



## Terms of Reference

### Learning from Deaths Group

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| TITLE OF GROUP/COMMITTEE                  | LEARNING FROM DEATHS (LFD) GROUP |
| DATE TERMS OF REFERENCE RATIFIED          | September 2025                   |
| DATE OF NEXT REVIEW OF TERMS OF REFERENCE | June 2025 September 2026         |

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| 1. | <b>Purpose and Aims of the Group/Committee</b><br><br>The Learning from Deaths Group provides assurance to the Trust Board that there is a robust and systematic process for reviewing the deaths of service users. The Group ensures learning is identified, shared and acted upon to improve the safety and quality of care.<br><br>The Group ensures that learning from reviews, investigations and external sources informs continuous improvement in the safety and quality of care, and that families and carers are appropriately involved and supported.                                                                                                                                                                                                                                                            |
| 2. | <b>Duties/Core Delegated Responsibilities and Accountabilities</b><br><br>The Group will:<br><b>Learning and Review</b><br><br>Oversee the implementation of the Trust's Learning from Deaths policy.<br>Review themes and trends from Structured Judgement Reviews and learning scores rather than individual cases.<br><br>Monitor and review health inequalities highlighted through mortality data and thematic reviews.<br><br>Receive Prevention of Future Death Reports (PFD) and monitor the implementation of actions.<br><b>External and National Reports</b><br><br>Maintain oversight of actions arising from externally reports<br><br>Receive national reports<br><b>Improvement and Oversight</b><br><br>Commission improvement work in response to themes and patterns identified through the LFD processes |



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|    | <p>Receive updates from commissioned work groups leading improvement projects and monitor progress</p> <p>Maintain oversight of the Trust's Suicide Prevention Strategy, monitoring implementation and alignment with learning from deaths</p> <p>Monitor actions arising from arising from External Reviews, Structured Judgement Reviews and Patient Safety Incident Investigations (PSII) and receive assurance actions are embedded into clinical practice.</p> <p>Conduct an annual self-assessment against the NCISH "10 Ways to Improve Patient Safety" using findings to benchmark and strengthen practice.</p> <p><b>Learning and Dissemination</b></p> <p>Ensure family and carer engagement is integral to review and learning processes.</p> <p>Share learning through the Trust's safety bulletin and other communication channels.</p> <p>Promote organisational learning by hosting learning events, workshops, or seminars to disseminate key themes and improvements.</p> |
| 3. | <b>Strategic Functions</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|    | <p>The Group will:</p> <p>Provide assurance to the CGC and QPESC Committee that LFD processes comply with national requirements.</p> <p>Identify system wide themes and escalate significant risks to the CGC and QPESC Committees</p> <p>Ensure lessons learnt are disseminated across all service areas and embedded into practice.</p> <p>Align Trust wide learning from deaths with quality improvement and patient safety priorities.</p> <p>Support cultural change by promoting openness and transparency, and a learning culture across the Trust.</p>                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 4. | <b>Membership</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|    | <p>Chair – Deputy Medical Director for Quality and Safety</p> <p>Co-Chair Learning for Deaths Lead</p> <p>Head of Patient Safety</p> <p>Head of Learning Disability and Autism</p> <p>Head of Safeguarding</p> <p>Family Liaison Officer</p> <p>Safety Partner</p> <p>Representation from each Service Area</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |



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|    | <p>In attendance by invitation:-<br/>Members of commissioned work groups</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 5. | Quoracy                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|    | <p>50% of membership must be present with either the Deputy Medical Director present or the Co-Chair.</p>                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 5. | Meeting Arrangements                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|    | <ul style="list-style-type: none"><li>• Meetings will be held monthly</li><li>• Extra ordinary meetings may be convened by the chair as required</li><li>• The LFD will meet on at least 9 occasions during the year.</li><li>• Members are required to attend 70% of meetings throughout the course of the year.</li><li>• The agenda will be set by the Chair who will ensure administrative support is available to the meeting.</li><li>• Agenda and papers will be circulated 5 days before the meeting</li></ul>                 |
| 6. | Reporting Arrangements                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|    | <p>The Group reports into QPESC who provide assurance to the Trust Board A quarterly summary report will be presented to CGC and QPESC, highlighting themes, health inequalities, national learning, risk and progress against actions.</p> <p>An annual Learning from Deaths Report will be produced for the Trust Board, which will be included in the Quality Account, in line with national guidance.</p> <p>Significant risks or urgent issues identified by the Group will be escalated immediately to the Medical Director.</p> |
| 7. | Effectiveness of the Group/Committee Function                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|    | <p>The terms of reference will be reviewed annually or sooner in response to changes in national guidance or Trust governance arrangements.</p> <p>The effectiveness of the group will be evaluated annually through self-assessment, including the NCISH 10 Ways to Improve Patient Safety Framework</p>                                                                                                                                                                                                                              |