

Meeting: Oxfordshire CCG Board

Date of Meeting	16 March 2021
Title of Paper	Terms of Reference for ICP Quality Committee
Lead Director	Diane Hedges, Deputy Chief Executive
Author(s)	Helen Ward, Head of Quality
Paper Type	For decision
Action Required	The Committee Members are asked to review and agree the proposed Terms of Reference.

Executive Summary

In line with the new system architecture as set out in the White Paper, OCCG has reviewed the arrangements for commissioner oversight of Quality.

The Terms of Reference set an Integrated Place based approach to Quality assurance and quality improvement.

Previously considered by (CCG and/or ICS, ICP Boards and/or Committees)	CCG Quality Committee
Financial and resource implications	There are no financial and resource implications arising from this paper.
Risk and Assurance	The proposed Terms of Reference bring the Quality Committee into line with the ICS structure.
Legal implications/regulatory requirements	There are no legal implications arising from this paper.
Consultation, public engagement & partnership working implications/impact	Not applicable.
Public Sector Equality/Equity Duty	Not applicable.

Conflicts of Interest
Not applicable

No conflict identified	✓
Conflict noted: conflicted party can participate in discussion and decision	
Conflict noted, conflicted party can participate in discussion but not decision	
Conflict noted, conflicted party can remain but not participate in discussion	
Conflict noted, supported paper withheld from conflicted party e.g. pecuniary benefit	
Conflicted party is excluded from discussion	

Authority to Make a Decision – process and/or commissioning (if relevant) Consideration and approval of applications to the NHS Commissioning Board on any matter concerning changes to the CCG's constitution, including terms of reference for the Board, its committees, membership of committees, the overarching scheme of reservation and delegated powers, arrangements for taking urgent decisions, standing orders and prime financial policies.

Oxfordshire Integrated Care Partnership (ICP) Quality Committee Terms of Reference

1. Introduction

The Oxfordshire Integrated Care Partnership (ICP) Quality Committee is established in accordance with NHS Oxfordshire Clinical Commissioning Group's (CCGs) Constitution. These Terms of Reference (ToR) set out the membership, remit, responsibilities and reporting arrangements of the Committee.

2. Purpose

The ICP Quality Committee will form an alliance of commissioners and providers that collaborate to meet the health and social care needs of the Oxfordshire population.

The Committee will agree ambitions, monitor, and collectively drive quality improvement for (NHS commissioned) services delivered to the Oxfordshire population by local health and care providers.

The Committee will develop a culture across the system which encourages and supports continuous service improvement, and which places the client/patient at the centre of all that we do.

The primary purpose of the group is to build strong relationships and a culture of collaboration to jointly oversee progress within the collectively agreed quality priorities for the financial year, which, in essence, will include some of the following points:

- Clinical effectiveness
- Patient experience
- Patient safety
- Clinical pathway development
- Risks and mitigation
- Address population health with a focus on inequalities

The Committee will discuss, challenge and agree actions to gain assurance regarding quality and patient safety issues as identified through analysis of patient pathways and clinical projects.

The Committee will be responsible for monitoring and reporting on the defined methods of measurement defined by the ICS Quality Dashboard inclusive of national and local priorities. The Committee will ensure there is patient involvement, regulatory compliance and risk management.

The Committee will receive national audits on the quality and performance of Oxfordshire services.

The Group will ensure that the health and social care bodies within Oxfordshire act as a system. Outcomes and achievements will be understood on a system level. The system will learn and develop as a whole. The Committee will seek to reduce the level of reporting required by providers with a view to minimise duplication within the process.

3. Reporting & Accountability

The Quality Committee is formally accountable to the CCG Board as one of its committees and will put together an annual report submitted to Board. In addition, the Quality Committee will feed into the BOB ICS Quality and Surveillance Board.

4. Duties

The responsibilities of the Committee are:

- a. To inspire and oversee Quality Improvement initiatives across the Oxfordshire health and social care system.
- b. To gain assurance of the Quality of health delivery and provision and social care and to hold the system, and its partners to account for delivering high quality care in Oxfordshire.
- c. To receive and review shared quality information from across the system and explore any issues or concerns and opportunities for improvements working as a system.
- d. To oversee shared governance processes– e.g., incident investigations, complaints and determine cross organisational learning.
- e. To ensure decisions and developments are made with consideration of the system and from best available evidence and resource.
- f. To ensure the Oxfordshire health and social care system delivers safe, effective and excellent care placing service users and carers at the heart.
- g. To identify, prioritise and manage clinical risk as a system on a continuing basis; to jointly agree and manage any collective risks that will be detailed and reviewed within the ICS Quality Risk Register.
- h. To develop and implement a system quality strategy and priorities.
- i. To ensure compliance with relevant national standards and regulatory requirements.

5. Membership

Chair – Medical Specialist Advisor from OCCG; if the Chair is absent the Committee will nominate a member of the committee to chair the meeting.

- Oxfordshire Clinical Commissioning Group; Deputy Accountable Officer, Clinical Director of Quality, Head of Quality
- Oxfordshire County Council – 1 to 2 CM to ask Stephen
- OHFT; 3 representatives with exec/senior responsibility for quality across all services
- OUHFT; 3 members with exec/senior responsibility for quality across all services
- Primary Care – 3 members (one from each network area)
- SCAS - 1 member with exec/senior responsibility for quality
- Patient/public member
- Healthwatch

Members should delegate an appropriately informed substitute to attend on their behalf in the exceptional circumstance that they are unable to attend a meeting.

6. Responsibility of Members

In addition to contributing to the delivery of the purpose and duties outlined above, individual Members of the Committee and those invited to attend the Committee meetings are responsible for declaring their own conflicts of interests.

Management and mitigations will be at the discretion of the Committee Chair, which shall be documented in the meeting minutes.

Confidentiality to be adhered to as deemed appropriate.

7. Secretarial support

Secretariat support will be provided by the Clinical Commissioning Group. Papers will be distributed electronically no later than one week prior to the meeting. Draft minutes will be circulated within ten days of the Committee.

8. Quorum and voting

The quorum for the committee will be a minimum of 12 members with at least one member present from each constituent organisation and either Healthwatch representative or the patient/public member.

Deputies should be fully briefed to be able to participate in discussion and given delegated authority for any decision making. Alternatively, where appropriate members' views may be sought by email and reported verbally at the Committee Meeting.

9. Frequency and notice of meetings

Meetings will be held on a quarterly basis (April, June, October and January).

10. Review of the Committee

The membership and terms of reference of the ICP Quality Committee will be reviewed on an annual basis.

Date agreed:

Review date: