

Healthcare Governance Committee Terms of Reference

1. Introduction

- 1.1 The Healthcare Governance Committee is established as a Committee of the NHS Board as described in the Board's Standing Orders. The approved Terms of Reference and information on the composition and frequency of the Committee have been informed by the Board's Standing Orders with specific reference to Section 9 Committees.
- 1.2 The Terms of Reference will be reviewed annually and submitted to the NHS Board for approval.

2. Remit

- 2.1 To provide assurance to the NHS Board that systems and procedures are in place to monitor healthcare governance in line with the Board's statutory duty for quality of care.

3. Duties

The Committee shall be responsible for the oversight of healthcare governance within NHS Ayrshire & Arran. Specifically it will:

- 3.1 Consider and scrutinise the health and care system's performance in relation to its statutory duty for quality of care, screening and immunisation programmes, as well as ensure appropriate remedial action takes place where required.
- 3.2 The areas over which the committee will look to gain assurance relate to but are not limited to the following:
- Infection control
 - Blood transfusion and organ transplant
 - Patient experience including complaints
 - Adverse Events
 - Quality and Safety (including SPSP and Excellence in Care)
 - Care Home Governance (added specially due to Covid19)
 - Quality Improvement
 - Public Protection (including Adult Support and Protection, Child Protection and Multi-Agency Risk Assessment Conference (MARAC))
 - Mental Welfare Commission reports/performance against action plans
 - Gender Based Violence
 - Health and Care in Health and Social Care Partnerships
 - Public Health
 - Duty of Candour
 - Unplanned Activity Exceptional Cases (UNPACS)
- 3.3 Hold the relevant staff of NHS Ayrshire & Arran to account in respect of their performance in relation to the system's duty for quality of care.

- 3.4 Review action taken by the Lead Directors on recommendations made by the Committee or the NHS Ayrshire & Arran Board on healthcare governance matters.
- 3.5 Provide assurance to NHS Ayrshire & Arran Board on the operation of healthcare governance within the health and care system in compliance with relevant national standards, highlighting problems and action being taken where appropriate.
- 3.6 Receive minutes and annual reports from the sub-committees established by the NHS Healthcare Governance Committee in order to provide assurance and accountability. The following groups/sub-committees report to Healthcare Governance Committee:
- Research and Development Committee
 - Prevention of Infection and Control Committee
 - Area Drug & Therapeutics Committee for Medicines Governance
 - Controlled Drug Accountable Officer Team
 - Organ Donation Committee
 - Area Nutritional Care Strategic Group
 - Acute Services Clinical Governance
 - Public Health
 - Partnership Clinical and Care Governance groups (as set out in the Ayrshire and Arran Integrated Health and Care Governance Framework)
 - NHS GBV (Gender Based Violence) Steering Group
- 3.7 Monitor and review risks falling within its remit.
- 3.8 To review internal audit reports aligned to the Committee, to ensure that recommendations are reported, monitored and reviewed.

4. Authority

- 4.1 The Committee is authorised to investigate any matters which fall within its Terms of Reference and obtain external professional advice.
- 4.2 The Committee may establish sub-committees to support its functions.
- 4.3 The Committee is authorised to seek and obtain any information it requires from any employee whilst taking account of policy and legal rights and responsibilities.
- 4.4 The Committee will have the authority to require the attendance of any employee of NHS Ayrshire & Arran, as may be required.

5. Committee Membership

- 5.1 The Committee shall be established by the NHS Board and be composed of six Non-Executive members, one of whom is the Chair of the Area Clinical Forum.
- 5.2 The NHS Board shall appoint the Chair and approve membership of the Committee.

- 5.3 A Vice Chair will be proposed by the Healthcare Governance Committee Chair and agreed by Committee.
- 5.4 Committee membership will be reviewed annually or as required by the Board Chair

6. Quorum

- 6.1 Three Non-Executive members will constitute a quorum.

7. Attendance

- 7.1 The Nurse Director, Medical Director, Director of Acute Services and Director of Clinical and Care Governance will attend in an *ex-officio* capacity to provide the Committee with advice and guidance. In addition, the Chief Executive, the Director of Public Health and the Health and Social Care Directors for each of the local authority areas will attend as appropriate.
- 7.2 The Committee may co-opt additional advisors as required
- 7.3 With the prior approval of the Chair, the Nurse Director, Medical Director, Director of Public Health and Chief Executive can provide deputies on an exceptional basis.

8. Frequency of Meetings

- 8.1 The Committee will normally meet bi-monthly but will meet at least five times per annum.
- 8.2 The Chair may at any time convene additional meetings of the Committee.

9. Conduct of Business

- 9.1 Meetings of the Committee will be called by the Committee Chair.
- 9.2 The agenda and supporting papers will normally be available to members at least five working days before the date of the meeting.

10. Reporting Arrangements

- 10.1 A minute will be kept of the proceedings of the Committee. A draft minute of the meeting will be circulated, normally within ten working days, to the Chair of the Committee. Once the Chair has approved, the draft minute will be shared with committee members for information, not for comment, prior to consideration at a subsequent meeting of the Committee.
- 10.2 The Chair of Committee shall provide assurance on the work of the Committee. A summary of key points from each meeting and the approved minute will be submitted to the NHS Board meeting for information.
- 10.3 Committee will conduct an annual review of its role and function by completing a self-assessment checklist and providing this and an annual assurance report to the NHS Board each year.

10.4 Items requiring urgent attention by the NHS Board can be raised at any time at NHS Board Meetings, subject to the approval of the Chair.

Version:	Date:	Summary of Changes:	Approved by
01.0	05/03/18	Addition of Vice chair arrangements	HGC 30/04/18 NHS Board 21/05/2018
02.0	03/08/20	Amended to align with the updated NHS Board Standing Orders	NHS Board 17/08/2020
02.1	31/08/20	Section 8 updated to reflect recommendations from the Internal Audit - Healthcare Governance Committee Review of assurance arrangements on areas of assurance and reporting committees. Addition of reporting arrangements section and in line with other NHS Governance Committee ToR. Issue of committee papers 5 working days before the meeting in line with other NHS Governance Committee ToR.	NHS Board 05/10/2020
02.2	11/01/21	Reviewed and endorsed without change, following the new process agreed in December 2020 to review ToR in Jan/Feb each year. Agreed by HGC 11/01/21	
03.0	09/03/21	Amendments to deliver a standard approach to Governance Committee ToR. <ul style="list-style-type: none"> Sections reordered to bring committee business together, ie. Remit/Duties/Authority Duplication removed if referred to in Board Standing Orders Introduction amended to note that ToR are informed by the Board standing orders and the requirement for an annual review. Reporting arrangements amended to 10 days for draft minute to be available and ensuring approved draft shared with members. Inclusion of requirement for annual self-assessment checklist in addition to the Annual Report. No change to Remit or Duties 	NHS Board 29/03/2021
04.0	10/01/22	Annual Review of Terms of Reference – no changes made	NHS Board 28/03/2022
05.0	09/01/22	Annual Review of Terms of Reference – changes: 3.2 updated to reflect that the new Public Protection structure has now been established (including Adult Support and Protection, Child Protection and MARAC) and the agreed new format of 'Quality and Safety' reports which encompass all elements of quality and safety, including SPSP and Excellence in Care. 3.8 added statement on monitoring of internal audit recommendations	NHS Board 28/03/2023
05.1	15/01/24	Annual Review of Terms of Reference – no changes	NHS Board 26/03/2024

06.0	13/01/25	Annual Review of Terms of Reference: Item 3.6, Groups reporting to HGC – Ethical Decision Making Advice Group has been stood down and will no longer report to Committee. Item 7, Attendance – addition of Director of Clinical and Care Governance who will attend in an ex-officio capacity.	NHS Board 31/03/2025
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