# North West London Collaboration of CCGs Quality & Performance Committee

**DRAFT Terms of Reference v7 28/08/18**

<table>
<thead>
<tr>
<th>Title:</th>
<th>NWL Collaboration of CCGs’ Quality &amp; Performance Committee</th>
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<td>Date approved/ by approving body:</td>
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<td>Purpose:</td>
<td>The Committee has delegated responsibility from the eight North West London CCG Governing Bodies for oversight of quality and/or performance issues for the services commissioned by North West London CCGs, where it is appropriate to do it collectively rather than separately in each CCG. Issues affecting more than one CCG, with a significant impact on quality and/or performance are within the Committee’s remit. The primary purpose of the NWL CCGs Quality &amp; Performance Committee are to:</td>
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<td>• Oversee all the services the CCGs provides perform to the recognised standards, are safe and equitable, risk is well managed and that patients are satisfied; • Assurance of Serious Incident reporting across the health system and all Never Events; • Oversee areas of concern to establish risk and clarify potential harm, understand mitigating actions and follow through to ensure that they are effective; • Review external scrutiny of providers including Care Quality Commission (CQC), Health and Social Care Scrutiny Committee (HSCSC) and Healthwatch reports; • Provide objective scrutiny and assurance to the eight NWL Governing Bodies (GB) on the CCG’s overall delivery of the quality and performance elements of its Operational Plan; • Provide a forum for receiving, reviewing and triangulating incidents, complaints and patient experience or engagement information with other sources of intelligence. • Provide oversight of the following areas: - NHS Constitutional Standards - NHS Improvement and Assessment Framework - Strategic direction and agreeing priorities for quality and performance - Acute/ mental health &amp; Learning Disability - Provider concerns affecting multiple organisations - Response to national reports/ guidance, and implications for commissioners and providers - Statutory reports: safeguarding/ infection control/ emergency planning/ complaints before presentation to Joint Committee</td>
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<td>Responsibilities:</td>
<td>The Committee has two core functions, being: 1. assurance of in-year contract, activity and operational</td>
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performance; and
2. monitoring and driving forward the quality of commissioned care.

The scope of the quality aspects of the Quality and Performance Committee includes:

3. holding providers to account against an agreed quality framework/NHS Operating Framework;
4. monitoring and driving forward the quality of all commissioned care (including care homes, Mental Health and Learning Disability services), recommending courses of action where concerns have been identified, receiving and reviewing reports on quality in respect of commissioned services to include performance against CQUINs, patient experience (including complaints and compliments) and clinical performance indicators and agreeing actions in respect of the same;
5. providing assurance that the Group is assisting and supporting NHS England in its duty to improve the quality of primary care by receiving and discussing reports on the quality of primary care;
6. ensuring the patient voice is captured and changes in commissioning strategies are recommended to improve patient experience;
7. ensuring that there are robust systems and processes in place to safeguard adults and children;
8. monitoring arrangements in place with the Group relating to equality and diversity issues and ensuring compliance with statutory obligations as well as producing an equality plan to meet the public sector equality duty for the approval of the NWL CCGs Governing Bodies on an annual basis;
9. ensuring delivery of the requirements for Information Governance;
10. overseeing and providing assurance on the clinical governance arrangements in commissioned services;
11. receiving, reviewing and scrutinising reports on serious incidents (SIs) and Never Events occurring in commissioned services seeking assurance through the associated action plans;
12. Formulating responses to national reports/guidance, and implications for commissioners and providers;
13. Reviewing statutory reports: safeguarding/infection control/emergency planning/complaints before presentation to Joint Committee;

The scope of the performance aspects of the Quality and Performance Committee includes:

14. holding providers to account against the NHS Operating Framework; monitoring NHS constitution standards and overall use of resources;
15. monitoring transformational performance in relation to key national targets and the NHS Improvement & Assessment Framework for CCGs; and
## Membership:

| a) | Lay Member (Chair); |
| b) | North West London CCGs’ Director of Quality and Safety; |
| c) | North West London CCGs’ Chief Officer; |
| d) | North West London Collaboration of CCGs Managing Directors (or nominated deputy); one representative per each of the eight CCGs; |
| e) | Chair/ Vice Chair of each CCG’s Committee(s) with responsibility for Quality and / or Performance; |
| f) | Lay Member from a NWL CCG GB (Deputy Chair); |
| g) | North West London Collaboration of CCGs Director of Performance; |
| h) | North West London Collaboration of CCGs Director of Commissioning ; and |
| i) | Healthwatch Representative (non-voting). |

If the members above include fewer than four clinical Governing Body members, then additional clinical members will be appointed to ensure a robust clinical perspective is available to the Committee.

## Attendees

Only members of the committee have the right to attend committee meetings. However, other individuals, including external advisers, may be invited to attend for all or part of any meeting as and when appropriate. This may include representatives from provider organisations for the purposes of assuring system compliance and resilience.

## Chair:

Lay member (not a Chair of a CCG’s Committee with responsibility for Quality and / or Performance).

## Secretariat:

TBC

## Quorum:

- Chair (or Deputy);
- Three CCG Quality/ Performance Committee chairs;
- At least one NWL Director; and
- If not included in the above, at least one clinician and one lay member.

## Frequency of meetings:

Every month.

## Operation of the Committee:

The Secretary will prepare an agenda for meetings with the Chair and will collate papers and circulate papers to those required to be at the meeting no
committee:  

less than five working days before the meeting. Late papers will not be permitted except in exceptional circumstances and at the discretion of the Chair.

Minutes will be drafted by the Secretary for approval by the Chair within five working days of the meeting, and ratified at the following meeting.

The Committee may seek assurances from CCG committees on items that impact on more than one CCG.

Outcomes from the meeting will be reported to Governing Bodies via written/presented reports.

Representatives from CCG Committees have a responsibility to ensure open two-way communications between the committees that facilities efficient and effective working.

| Duties: Approvals | To approve revisions to quality and performance related policies (where the original has been agreed by the Governing Body); |
| | To approve quality and performance schedules for acute and mental health providers; |
| | To approve and steer the development of reporting systems across North West London CCGs, in order to reduce duplication, highlight common and specific themes, and share good practice; |
| | To agree actions to address issues/ variation identified in monitoring quality and performance in commissioned acute and mental health services; |
| | To have oversight of/ agree actions to address risks relating to quality and performance, specifically those highlighted in the Board Assurance Framework; |
| | To agree approach to local and national quality and performance priorities; |
| | To agree and lead on the approach to using quality/ performance information to support the case for change for strategic developments in North West London; |
| | To agree and lead the approach to NHS Constitutional Standards and the NHS Improvement and Assessment Framework; |
| | To provide assurance on NW London quality and performance issues to local governing bodies. |
| | To have powers to summon and hold to account provider organisations with quality and / or performance concerns to provide assurance to the committee and GBs. |

| Duties: Advisory | To consider issues raised at the committee by CCGs and make |
recommendations;

- To advise CCG representatives at Clinical Quality Groups/Performance & Contract Executives of the collective views of the CCGs with respect to quality and performance of providers;

To advise CCGs on areas of risk relating to the work of the committee as follows:

- Priorities for quality and performance (local and national);
- Advise Governing Bodies on the effectiveness of clinical governance, clinical risk management and quality reporting systems;
- Advise Governing Bodies on the key clinical and quality risks that could impact on patient safety, outcomes and experience in more than one CCG;
- Advise the Governing Bodies on policies relating to compliance with statutory and regulatory quality and performance requirements and national guidance (where they relate to the remit of this committee) and approving amendments to existing policies previously approved by the Governing Bodies;
- Advise the Governing Bodies on compliance with statutory requirements, including:

  Annual Reports:
  - Safeguarding;
  - Complaints and Patient Experience;
  - Infection and Prevention; and
  - EPRR.

  Six Monthly Reports:
  - EPRR; and
  - Business Continuity.

  Quarterly Reports:
  - Patient Safety;
  - Complaints;
  - Infection and Prevention; and
  - Central Contracts.

Duties: Monitor improvement and seek clinical and performance assurance on
### Monitoring

- **Issues affecting the quality of all commissioned services including performance against the indicators in the assurance framework.**

- **Review the establishment and maintenance of effective quality and performance governance, risk management and reporting systems to support the Governing Bodies’ objectives in relation to the duties of quality, including involvement and engagement.**

- **Review the adequacy of the underlying quality improvement and clinical assurance processes that indicate the degree of achievement of corporate objectives on clinical quality, patient safety and other key relevant outcome measures.**

- **Identify the key risks in terms of quality and performance, monitor and report progress on these to Governing Bodies.**

- **Review key findings of Care Quality Commission reports, serious incidents, never events, mental health incidents, independent inquiries, internal audit, complaints and other relevant sources, and recommend any improvements to current processes and procedures, and seek assurance about the delivery of subsequent actions. Review thematic findings from serious case reviews for children and safeguarding adult reviews, domestic homicide reviews and recommend the implementation any improvements identified from the learning that affects more than one CCG.**

- **To review both quality and performance data, and ensure that there is correlation with contractually mandated information schedules.**

- **To receive intelligence from sources such as clinical visits, audits, and feedback from Healthwatch, other patient and public engagement activities and statutory bodies and inspections.**

- **Monitor performance of complex multi-CCG delivery programmes.**

- **Monitor the management of board assurance framework entries designated to it.**

- **Monitor the effectiveness of the system resilience function for elective and non-elective activities, including Winter Pressures and A&E performance.**

- **Monitor any other areas of CCGs’ quality and performance as requested by the CCG Chairs and or Quality and Performance Committee Chairs.**

### Accountability:

- **The committee is accountable to the CCG Governing Bodies of which it is a committee.**

### Reporting responsibilities:

- **The approved minutes will be presented to each CCG’s Governing Body for information. This may be supplemented with a verbal or written report from the Chair on the proceedings of the committee.**

- **The committee shall make whatever recommendations to the Governing Body it deems appropriate on any area within its remit where action or improvement is needed.**

- **The minutes will also be circulated for information to each CCG’s Committee**
that leads on Quality.

| Conduct of committee: | The Committee will also apply the same scrutiny to inter-CCG quality and performance on how each delivers on its commissioning duties and responsibilities. The committee will examine its own quality, performance, membership and terms of reference as part of its assurance process annually. Any resulting changes to the terms of reference will considered for approval by the Governing Bodies. |