

Outcomes, Quality and Performance Committee

Terms of Reference

1. Introduction

Constitution:

The Outcomes, Quality and Performance Committee (the Committee) is established by the Integrated Care Board (the Board or ICB) as a Committee of the Board in accordance with its Constitution.

These Terms of Reference (ToR), which must be published on the ICB website, set out the membership, the remit, responsibilities, and reporting arrangements of the Committee and may only be changed with the approval of the Board.

The Committee is a non-executive chaired committee of the Board and its members are bound by the Standing Orders and other policies of the ICB.

Purpose:

The aims of the ICB are to:

- improve outcomes in population health and healthcare
- tackle inequalities in outcomes, experience and access
- enhance productivity and value for money
- help the NHS support broader social and economic development.

The Outcomes, Quality and Performance Committee has been established to provide the ICB with assurance that is delivering its functions in a way that secures continuous improvement in outcomes, performance, and the quality of services, against each of the dimensions of quality set out in the Shared Commitment to Quality and enshrined in the Health and Care Act 2022. This includes reducing inequalities in the quality of care.

The Committee exists to scrutinise the robustness of, and gain and provide assurance to the ICB that there is, an effective system of quality and performance governance and internal control that supports it to effectively deliver its strategic objectives and provide sustainable, high-quality care.

The Committee will provide regular assurance updates to the ICB in relation to activities and items within its remit.

2. Delegated Authority

The Outcomes, Quality and Performance Committee is a formal committee of the ICB. The Board has delegated authority to the Committee as set out in the Scheme of Reservation and Delegation and may be amended from time to time.

The Outcomes, Quality and Performance Committee holds only those powers as delegated in these Terms of Reference as determined by the ICB Board.

3. Membership

The Committee members shall be appointed by the Board in accordance with the ICB Constitution.

The Board will appoint no fewer than four members of the Committee including one who is a Non-Executive Member of the Board (from the ICB) and will act as Chair. Other attendees of the Committee need not be members of the Board, but they may be, and will be drawn from ICB Partner or Other members (as outlined in the Constitution).

When determining the membership of the Committee, active consideration will be made to equality, diversity and inclusion.

The Chair may ask any or all of those who normally attend, but who are not members, to withdraw to facilitate open and frank discussion of particular matters.

Chair:

If a Chair has a conflict of interest another member of the Committee will be responsible for deciding the appropriate course of action.

In the absence of the Chair, the remaining members present shall elect one of their number Chair the meeting.

4. The members of the Outcomes, Quality and Performance committee are:

- Non-Executive Director (Chair)
- Provider Non-Executive Director
- ICB Chief Nursing Officer
- ICB Chief Medical Officer
- ICB Director of Performance and Delivery,
- 1 Public Health representative
- 1 acute provider representative
- 1 community provider representative
- 1 mental health provider representative
- 1 local authority representative
- 1 primary care representative
- 1 patient voice representative

5. Administration

The Committee shall be supported with a secretariat function which will include ensuring that:

- The agenda and papers are prepared and distributed in accordance with the Standing Orders having been agreed by the Chair with the support of the relevant executive lead
- Attendance of those invited to each meeting is monitored and highlighting to the Chair those that do not meet the minimum requirements
- Records of members' appointments and renewal dates and the Board is prompted to renew membership and identify new members where necessary
- Good quality minutes are taken in accordance with the standing orders and agreed with the chair and that a record of matters arising, action points and issues to be carried forward are kept
- The Chair is supported to prepare and deliver reports to the Board

- The Committee is updated on pertinent issues/ areas of interest/ policy developments
- Action points are taken forward between meetings and progress against those actions is monitored.

6. Quoracy

There will be a minimum of one Non-Executive Member, plus at least the Chief Nursing Officer or Chief Medical Director, the ICB Director with responsibility for performance or their deputy.

Decision making and voting:

Decisions will be taken in according with the Standing Orders. The Committee will ordinarily reach conclusions by consensus. When this is not possible the Chair may call a vote.

Only members of the Committee may vote. Each member is allowed one vote and a majority will be conclusive on any matter.

Where there is a split vote, with no clear majority, the Chair of the Committee will hold the casting vote. The result of the vote will be recorded in the minutes.

If a decision is needed which cannot wait for the next scheduled meeting, the Chair may conduct business on a 'virtual' basis through the use of telephone, email or other electronic communication.

7. Frequency of meetings

The Outcomes, Quality and Performance Committee shall meet on a monthly basis. Additional meetings may be convened on an exceptional basis at the discretion of the Committee Chair.

8. Remit and Responsibilities

The responsibilities of the Outcomes, Quality and Performance Committee will be authorised by the ICB Board. The Committee will:

- Oversee and seek assurance on the effective delivery of the ICB Operational Plan
- Be assured that there are robust structures and processes in place for the effective planning, management and improvement of outcomes, quality and performance and that the structures operate effectively, and timely action is taken to address areas of concern
- Agree and recommend to the ICB Board key outcomes, quality and performance priorities that are included within the ICB strategy/ annual plan, including priorities to address variation/ inequalities in care
- Scrutinise robustness of arrangements, compliance with and monitor delivery of the ICB key statutory requirements relevant to outcomes, quality and performance
- Scrutinise and challenge those risks on the BAF and Corporate Risk Register which relate to outcomes, quality, performance, and high-risk operational risks which could impact on care. Ensure the ICB is kept informed of significant risks and mitigation plans, in a timely manner
- Oversee and scrutinise the ICB's response to all relevant (as applicable to outcomes, quality and performance) Directives, Regulations, national standard, policies, reports, reviews and best practice as issued by the DHSC, NHSEI and other regulatory bodies / external agencies (e.g. CQC, NICE) to gain assurance that they are appropriately reviewed and actions are being undertaken, embedded and sustained
- To be assured that people drawing on services are systematically and effectively involved as equal partners in outcomes quality and performance activities

- Have oversight of and approve the Terms of Reference and work programmes for the groups reporting into the Outcomes, Quality and Performance Committee
- Scrutinise robustness of arrangements, compliance with and monitor delivery of the ICB key statutory requirements relevant to outcomes, quality and performance including Emergency Preparedness, Resilience and Response

9. Behaviours and Conduct

ICB values:

Members will be expected to conduct business in line with the ICB values and objectives. Members of, and those attending, the Committee shall behave in accordance with the ICB's Constitution, Standing Orders, and Standards of Business Conduct Policy.

Equality and diversity:

Members must demonstrably consider the equality and diversity implications of decisions they make.

10. Declarations of Interest

All members, ex-officio members and those in attendance must declare any actual or potential conflicts of interest which will be recorded in the minutes. Anyone with a relevant or material interest in a matter under consideration will be excluded from the discussion at the discretion of the Committee Chair.

11. Reporting Requirements

The Outcomes, Quality and Performance Committee is directly accountable to the ICB. The minutes of meetings shall be formally recorded. The Chair of the Committee shall report to the Board (public session) after each meeting and provide a report on assurances received, escalating any concerns where necessary.

The Committee will advise the Audit Committee on the adequacy of assurances available and contribute to the Annual Governance Statement

The Committee will receive scheduled assurance report from its delegated groups. Any delegated groups would need to be agreed by the ICB Board.

12. Review of Terms of Reference

The Committee will review its effectiveness at least annually and complete an annual report submitted to the Board.

These terms of reference will be reviewed after six months at least annually thereafter. Any proposed amendments to the terms of reference will be submitted to the Board for approval.

The Committee will utilise a continuous improvement approach in its delegation and all members will be encouraged to review the effectiveness of the meeting at each sitting.

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