

Quality Assurance Committee Terms of Reference	
1. Constitution	<p>The board has established a committee, known as the quality assurance committee, (the committee) reporting to the board, in accordance with standing order 6 for the practice and procedure of the board of directors (annex 8 of the constitution).</p> <p>The committee shall have terms of reference and powers and be subject to such conditions, such as reporting back to the board, as the board shall decide and shall act in accordance with any legislation and regulation or direction issued by the regulator.</p> <p>The committee shall be a non-executive committee of the board comprised of independent non-executive directors and has no executive powers, other than those specifically delegated in these terms of reference.</p>
2. Terms of Reference	<p>a. Purpose / duties / role</p> <p>The role of the committee is to provide assurance to the board, along with the audit committee, that The Christie is properly governed and well managed across the full range of activities and to provide internal and external assurance relating to quality by reviewing the establishment and maintenance of effective systems of governance, risk management and internal control.</p>
3. Membership	<p>The committee shall be comprised of non-executive directors and should include three independent non-executive directors. The chief executive and other executive directors of The Christie may be invited to attend meetings at the request of the committee.</p> <p>Chair of the Committee</p> <p>The chair of the committee shall be one of the independent non-executive directors selected by the board. In their absence their place shall normally be taken by another independent non-executive director.</p> <p>Quorum</p> <p>The quorum shall be any two members of the committee.</p> <p>Attendance at meetings</p> <p>The following individuals shall normally be in attendance:</p> <ul style="list-style-type: none"> • Executive medical director • Chief nurse & executive director of quality <p>Other directors and other officers may be invited to attend by the chair, particularly when the committee is discussing an issue that is the responsibility of that director or officer.</p> <p>Attendance by Others</p> <p>As required by the committee.</p>



	<p>Notice of meetings</p> <p>Meetings of the quality assurance committee shall be called at the request of the chair. Notice of each meeting, including an agenda and supporting papers shall be forwarded to each member of the quality assurance committee not less than five working days before the date of the meeting.</p>
<p>4. Responsibilities/ accountability and reporting arrangements</p>	<p>The committee has a shared responsibility with the audit committee to provide assurance to the board of directors that The Christie is properly governed and well managed across the full range of its activities.</p> <p>In broad terms, the audit committee is responsible for all matters relating to corporate, financial and investment governance and risk management, whilst the quality assurance committee is responsible for quality, clinical and research governance and risk management. Where either committee is concerned that identified risks have a material impact on the remit of the other they will refer the details to it.</p> <p>Quality governance, risk management and internal control</p> <p>The committee is responsible for reviewing the establishment and maintenance of effective systems of quality governance, risk management and internal control, particularly in relation to safety, effectiveness, patient experience, and clinical & research governance. In particular, the committee will review the adequacy and effectiveness of:</p> <ul style="list-style-type: none"> • The underlying assurance processes that support achievement of the corporate objectives and the management of principal risks, including: <ul style="list-style-type: none"> ○ Assurance framework ○ Annual Governance Statement ○ Risk register ○ Clinical audit programme ○ Policies and procedures ○ Whistle blowing arrangements • Compliance with all applicable legal and regulatory requirements, in particular those of the CQC and NHS Improvement, and including: <ul style="list-style-type: none"> ○ Patient involvement and information ○ Personalised care, treatment and support ○ Safeguarding and safety (including infection control) ○ Suitability of staffing (including learning, development and oversight of professional standards) ○ Quality management (including SIs, notifications, complaints and records) ○ Suitability of management ○ Statutory reports (including Quality Report) ○ Compliance with national and local mandatory targets • All other aspects of patient experience, safety and effectiveness, including:



- Patient environment and amenities
- Waiting times
- Outcomes

- To ensure that all Cost Improvement programmes have had a quality impact assessment and to ensure that there is an annual report on this activity provided by the transformation team

In carrying out this function, the committee will primarily utilise the work of internal audit and other assurance functions, but will not be limited to these audit functions. It will also seek reports and assurances from directors and managers as appropriate, concentrating on the over-arching systems of integrated quality governance, risk management and internal control, together with indicators of their effectiveness.

The committee may request and review reports and positive assurances from directors and managers on the overall arrangements for quality governance, risk management and internal control. The committee may also request specific reports from individual functions within the organisation, as they may be appropriate to the overall arrangements.

In addition, the committee will review the work of other committees within The Christie, whose work can provide relevant assurance to the committee's own scope of work. This will particularly include the risk and quality governance committee, the management board, the clinical and research effectiveness committee and the health & safety committee.

This will be evidenced through the committee's use of the assurance framework to guide its work and that of the audit and assurance functions that report to it.

Internal Audit

The committee will also obtain internal assurance from the Internal Audit function, which meets mandatory NHS internal audit standards and provides independent assurances to this committee, the chief executive and the board. This will be achieved by:

- Ensuring that adequate internal audit capacity consistent with the governance needs of the organisation is purchased by the audit committee
- Consideration of the major findings of quality related internal audit reports, and management's response, ensuring co-ordination between the audit and quality assurance committees.
- Contributing to the annual review of the performance and effectiveness of the internal audit service conducted by the audit committee.

External assurance

The committee will review the findings of other significant assurance functions, both internal and external to the organisation, and consider the governance implications for The Christie. These will include, but not be limited to:

- Assessment reports from external accreditation agencies or regulators such



	<p>as NHS Resolution, Health and Safety Executive, Medicines and Healthcare Products Regulatory Agency, professional bodies with responsibility for the performance of staff or functions (e.g. royal colleges, accreditation bodies etc.), strategic health authority, improving working lives standard, JACIE accreditation, ISO 9002, etc.</p> <ul style="list-style-type: none"> • Declarations of compliance with the essential standards for quality and safety of the Care Quality Commission and any other such declaration that may be required by the CQC or other regulator • Statements from internal or external audit opinion relating to clinical and research governance and risk management. • Compliance with national quality imperatives including National Institute of Clinical Excellence guidance and Improving Outcome guidance. • Compliance with relevant regulatory legal and code of conduct requirements relating to clinical and research activity and employment legislation. <p>Reporting to the board</p> <p>The minutes of each meeting of the quality assurance committee shall be reported to the next meeting of the board of directors. The chair shall draw to the attention of the board of directors any issues that require disclosure to the board or require executive action, together with reports of particular interest or importance.</p> <p>The committee will report annually to the board of directors on its work in support of the Annual Governance statement, specifically commenting on the fitness for purpose of the assurance framework, the completeness and the effectiveness of risk management in the organisation.</p> <p>Annual report and financial statements</p> <p>The committee shall review the annual report for The Christie before submission to the board of directors, focusing particularly on the declaration and content of the quality accounts, the wording in the Annual Governance Statement and other disclosures relevant to the terms of reference of the committee.</p> <p>The committee must review and update these terms of reference annually, recommending any changes to the board of directors, and they shall be published the Christie website.</p> <p>The committee must evaluate its own membership and performance on a regular basis.</p>
<p>5. Frequency</p>	<p>Meetings</p> <p>The quality assurance committee shall meet at least five times per year. The chair may at any time convene additional meetings of the committee to consider business that requires urgent attention.</p> <p>Members may participate in meetings by telephone, video or computer link and participation in this manner shall be deemed to constitute presence in person at the meeting.</p>
<p>6. Authority</p>	<p>The committee is authorised by the board of directors to investigate any activity within its terms of reference. It is authorised to seek any information it requires</p>



	<p>from any employee, and all employees are directed to co-operate with any request made by the committee.</p> <p>The committee is authorised by the board of directors to obtain reasonable external legal or other independent professional advice and to secure the attendance of outsiders with relevant experience or expertise, if it considers this to be necessary.</p>
7. Relationship with other committees	<p>This committee and the audit committee have a shared responsibility to provide assurances to the board of directors. As such, both committees need to work collaboratively, to ensure that all aspects of governance are covered and that the board receives comprehensive assurances on The Christie's business and activities. The committee receives information and assurance about The Christie business and activities from the Risk and Quality Governance Committee and, via its minutes, its sub-committees.</p>
8. Dissemination of information	<p>Information is disseminated via the board of directors'.</p>
9. Review	<p>The quality assurance committee terms of reference are to be reviewed annually.</p>
10. Administration	<p>The committee shall be supported administratively by the executive assistant team, who will agree the agenda with the Chair, produce all necessary papers, attend meetings to take minutes, keep a record of matters arising and issues to be carried forward and generally provide support to the chair and members of the committee.</p> <p>Minutes of all meetings of the committee shall be taken and kept by the executive assistant to the board or an appropriate alternative.</p>
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