

# Clinical Governance Committee Constitution

**Lead Author:**

Nurse Director

**Signature:**

Mrs Caroline Hiscox

**Identifier:**

**Reviewer:**

Clinical Governance  
Committee

**Signature:**

**Review Date:**

August 2021

**Approver:**

Chair, Clinical Governance  
Committee

**Signature:**

Ms Joyce Duncan

**Approval Date:**

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This Constitution is also available in large print and other formats and languages, upon request. Please call NHS Grampian Corporate Communications on Aberdeen (01224) 554400.

## **1. Background:**

The Clinical Governance Committee is a sub-committee of Grampian NHS Board (Board) and will be responsible for assuring corporate accountability for the quality of clinical care provided. The Committee is convened as a statutory requirement as outlined in MEL(1998) 75, further amendments in MEL (2000) 29, HDL (2000) 11 and HDL (2001) 74, all of which describe arrangements for clinical governance systems within Boards.

## **2. Remit:**

To provide the Board with assurance of high level measures of clinical quality including performance assurance and improvement matrix and a system in place for oversight and consideration by the organisation to respond appropriately. This will include responsibility for:

- Reviewing and assuring the Board that Clinical Governance issues on risk registers are being appropriately addressed.
- The Committee should satisfy itself that all clinical risks are shared appropriately and those which have been escalated to the Committee, have control measures in place which are adequate to manage the risk.
- Prepare an annual report which takes account of the strategic outcomes of the Board and key strategic risks relevant to the role and remit of the Committee.
- Bring to the attention of the Board regular reports on the operation of the system and specific reports on any problems that emerge and necessary corrective actions taken.
- Notify NHS Grampian's Performance Governance Committee of areas of significant clinical risk for inclusion in the performance monitoring systems of the organisation.
- The Committee critically review reports and action plans arising from the work of internal audit, external audit, review agencies and inspectorates as they relate to the assurance on the effectiveness of clinical risk management and quality improvement.
- Assure the Board that recommendations made by the Scottish Public Services Ombudsman are implemented, including those recommendations applicable to independent practitioners.
- Provide line of accountability on behalf of the Board, of key governance structures in compliance with the Scottish Government Health Department's directions.
- Ensure that NHS Grampian has in place a managed system and network for engaging with Integration Joint Board Clinical and Care Governance groups/ Committees.
- Provide appropriate information for inclusion in the NHS Grampian Annual Statement of Internal control.
- To assure the NHS Board that preventable inequalities in health outcomes due to deprivation are addressed across NHS Grampian.

### 3. Executive Lead:

The designated Executive Lead is the Nurse Director and supports the Chair of the Clinical Governance Committee in ensuring that the Committee fulfils its agreed Terms of Reference by:

- Liaising with the Chair in agreeing a programme of quarterly meetings, as required by its remit.
- Overseeing the development of an assurance report for the Board which is congruent with the Clinical Governance Committee remit and the need to provide appropriate assurance.
- Agree with the Chair an agenda for each meeting, having regard to the Committee's remit.
- Oversee self-assessment on the effectiveness of the Committee and agree with the Chair a programme of development for members of the Clinical Governance Committee.

### 4. Membership:

<b>Chair:</b>	The Committee Chair is a Non-Executive Board Member as agreed by the Chair of Grampian NHS Board.
<b>Members:</b>	There will be 4 Non-Executive Board Members and one Public representative.
<b>In Attendance:</b>	Chair, NHS Grampian Chief Executive, NHS Grampian Medical Director, NHS Grampian Nurse Director, NHS Grampian Director of Public Health, NHS Grampian Infection Prevention & Control Manager or Doctor, NHS Grampian Integration Joint Board representatives
<b>Management Support:</b>	Manager Quality Improvement & Assurance, NHS Grampian or deputy.
<b>Administrative Support:</b>	Quality Improvement & Assurance Administrator, NHS Grampian or deputy.

### 5. Minutes and Reports:

The business of the Committee is recorded in a formal minute which, once approved, is circulated to the Board. At that time they are available to all staff on the NHS Grampian intranet and can be accessed under the provision of the Freedom of Information Act (Scotland) 2002. When confidential and sensitive information requires to be discussed this will be held within a closed session. The minute of closed sessions are confidential and will not be shared out with the membership of the Committee.

## **6. Meetings:**

Meetings are held quarterly with dates agreed and set in advance for the year.

Agenda setting meetings are held at least 6 weeks prior to the meeting and Committee papers are issued one week in advance.

Written documentation will be expected in support of all agenda items, except for those under "Matters Arising".

When confidential and sensitive information requires to be discussed, this will be held within a closed session. The minute of closed sessions are confidential and will not be shared out with the membership of the Committee.

## **7. Attendance:**

A minimum of two Non-Executive Board Members will constitute a Quorum.

There will be a named deputy for the Chair, agreed by the Committee, selected from the Non-Executive Board members of the Committee.

In the event of the Board Medical Director, Board Nurse Director or the Board Public Health Director being unable to attend, it is expected that a deputy will attend in their place.

All Board Members have a right to attend as observers. It will be expected that the Chief Executive, Board Medical Director, Board Nurse Director and Director of Public Health will attend all meetings.

Other staff will be invited to attend Committee meetings to inform and/or report on specific matters or by prior arrangement as observers.

## **7. Standing orders:**

The provision of the NHS Grampian standing orders for Board meetings shall apply to this Committee as far as is practicable and appropriate.

Relationship to the Board and other Committees is described within the diagram in Appendix 1.

**Appendix 1: NHS Grampian Clinical Governance Committee Relationship to the Board and other Committees**

