



Northern Ireland Ambulance Service
Health and Social Care Trust



Patient Experience, Quality and Safety (PEQS) Committee

TERMS OF REFERENCE

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1.0 ESTABLISHMENT

The Board of the Northern Ireland Ambulance Service Health & Social Care Trust (the Trust) has established the Patient Experience, Quality and Safety Committee.

The Committee has no executive powers other than those specifically delegated by the Board and detailed within these Terms of Reference.

2.0 MEMBERSHIP

The membership of the Committee shall be determined by Trust Board and appointments made from amongst its membership.

A full list of Committee Members as of the date of these Terms of Reference can be found in Appendix 1.

The Committee Chair shall be a Non-Executive Director appointed by the Chair of Trust Board and will hold office for a term specified on appointment or until such time as the Chair of Trust Board determines otherwise.

The Committee Chair will cease to act as Chair if they are no longer a Non-Executive Director or if they notify the Chair of Trust Board in writing that they no longer wish to continue in the role as Committee Chair.

A quorum shall be two Non-Executive Directors including the Committee Chair.

In the absence of the Committee Chair, another Non-Executive Member may temporarily act as Chair for a meeting of the Committee by agreement of the other Non-Executive Directors present.

3.0 ATTENDANCE

All Executive Directors may be in attendance at meetings of the Committee (where required).

If an Executive Director who is required is unavailable to attend, he/she can nominate a senior manager to attend in their absence by recording an apology in advance with the Board Secretary and providing details of the proposed substitute no later than three working days prior to the date of the scheduled meeting.

The Assistant Director for Governance, Risk and Assurance/Board Secretary (or nominee) will be in attendance at meetings of the Committee (where required).

4.0 FREQUENCY OF MEETINGS

The Committee shall meet at least three times annually.

Members must attend a minimum of two meetings during the course of the year.

5.0 AUTHORITY (including escalation to Trust Board)

The Committee is authorised by Trust Board to undertake and investigate any activity stated within these Terms of Reference.

The Committee is further authorised to obtain legal or other independent professional advice and to secure the attendance of other relevant external parties if it considers this necessary in order to fulfil its remit.

The Committee Chair shall draw to the attention of Trust Board any issues that require disclosure to the full Board or may require executive action by the Chief Executive and/or wider Senior Management Team. In addition, the Committee has authority to formally escalate any issues Members determine require notification to, or further consideration by, Trust Board.

6.0 REMIT

The Committee shall embed the Trust's vision and values in conducting its business.

The Committee will be responsible for assuring Trust Board that effective clinical and non-clinical governance arrangements are in place and that processes to identify and manage risks are effective.

The Committee will:

- Ensure that the Trust's assurance processes in respect of clinical and non-clinical activities are adequate to meet the Trust's objectives, and that associated risks are identified and escalated, where necessary, to Trust Board.
- Seek assurance from Executive Directors covering all aspects of quality, safety and patient experience.
- Review and seek assurances on Trust performance in respect of the identification and management of clinical and non-clinical Adverse Incidents, Serious Adverse Incidents, Complaints and Compliments.
- Review and seek assurance on Trust delivery against clinical and safety key performance indicators.
- Provide assurance that adequate systems and processes are in place for the delivery of high-quality patient care that is safe, effective and patient focused.
- Monitor, assess and respond to the information presented to it in respect of the Trust's strategic objectives relating to safety and quality, including external factors and any potential impact on the organisation.
- Review implementation and continued compliance with quality/risk related standards e.g. NICE, NPSA.

- Support a learning culture across the Trust to ensure high quality service delivery and patient safety.
- Seek assurance that action plans developed as a result of external reviews/reports are being progressed and implemented.
- Monitor the implementation of the Trust's Quality Strategy and approve this Strategy before it being presented to Trust Board.
- Oversee development of quality improvement programmes and projects.
- Consider the implications for safety and quality from other significant external and internal assurance functions such as relevant reviews by the Department of Health (DoH), other DoH ALB or commissioned bodies, the Regulation and Quality Improvement Authority (RQIA) or professional bodies with responsibility for the performance of staff or functions (e.g. Joint Royal Colleges Ambulance Liaison Committee and other accreditation bodies, etc.).

7.0 OPERATIONAL ARRANGEMENTS

Administrative Support to the Committee

The Committee shall be supported administratively by the Board Secretary (or nominees) whose duties in this respect include:

- Preparation and issue of an agenda on behalf of the Chair;
- Collation and distribution of papers to Members in advance of each meeting;
- Taking minutes and keeping a record of matters arising;
- Maintaining a record of attendance at Committee meetings;
- Advising the Committee on pertinent issues;

- Assisting the Chair in ensuring the effective operation of the Committee;
- Arranging attendance of appropriate staff at meetings;
- Ensuring these Terms of Reference are reviewed and updated annually; and
- Developing and maintaining the Committee's meeting schedule.

Conduct of Meetings

All procedural matters in respect of conduct of meetings of the Committee shall be in accordance with the Trust's Standing Orders.

All questions arising will be decided by a simple majority of Members of the Committee. In the case of equal votes, the Chair will have a casting vote.

Agenda Items and Papers for Meetings

The Board Secretary (or nominee) will issue the agenda and associated papers for each meeting no later than five days prior to the date of the scheduled meeting, to provide Members and those in attendance the opportunity to read information in advance.

Papers may be accepted and distributed within five days of the date of scheduled meeting at the discretion of the Committee Chair.

Minutes of Meetings

The minutes of the Committee shall be recorded by the Board Secretary (or nominee) and agreed with the Committee Chair prior to issue in advance of the next meeting. Minutes will be circulated as soon as possible after the meeting.

Once approved by the Committee at its subsequent meeting, the minutes will be submitted to Trust Board for noting.

8.0 DECLARATION OF INTEREST

The Committee Chair shall ask Members to declare any actual or potential conflict of interest on any matter listed on the agenda for consideration at the outset of each meeting.

Where a conflict arises during the course of the meeting, the Member(s) with the conflict should declare their interest immediately and withdraw for the duration of the discussion on the relevant item(s) of business.

All stated declarations of interest made during each meeting shall be recorded in the minutes.