

Patient and Staff Sub Group

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Terms of Reference

Introduction and purpose

To focus on patient and staff safety and experience across the Trust.

Aims/responsibilities

- To study and seek assurance on the quality of specific services of the Trust, in respect of patient and staff experience;
- To take account of all available evidence in respect of the above, including reports from service managers, written reports such as those listed below, Governor visit reports, and Governor Issues. The views of staff members involved in service provision can be anonymised;

– Complaints Reports	– Patient Safety Reports
– Patient Experience Group reports	– I Want Great Care/Other patient survey reports
– Community Survey and Action Plan	– Healthwatch Reports
– Innovation, Research and Clinical Effectiveness Group Report	– Quality Strategy
– Quality Accounts	– Care Quality Commission Reports
– SI Assurance Reports	– Staff Survey results
– Reports on staff mandatory training and appraisals	– Equality, Inclusion and Human Rights Annual Equality Info Report
– Staff FFT results	– Delivering & Monitoring Safe staffing
– Developing a diverse workforce	– ORR risks assigned to the Q&G Committee

- To study and seek assurance on staff morale, recruitment and retention in support of service quality. To scrutinise and contribute views on HR priorities, including but not limited to, HR strategies, staff satisfaction and performance, staff survey, training and development and staff issues in general;
- To report to the Council of Governors (CoG), and Quality and Governance Committee, as appropriate, on matters of assurance and incomplete assurance, and liaise with other sub-groups as required;

- To report to the CoG and Board of Directors (BoD) any observed breach of the NHS constitution;
- Receive and consider assurance from the Quality and Governance Committee on workforce matters including understanding the effects on service quality;
- Receive and consider assurance and comment upon from the Quality and Governance Committee on issues of patient safety, patient experience and patient outcomes and promote the involvement of service users, carers and the public.

Membership

The sub-group will elect its Chair and Vice-Chair from its membership bi-annually. If unable to attend a meeting, the Chair will arrange for the Vice-chair to chair it. In the absence of both the Chair and the Vice-chair, those members present will elect a Chair for that meeting.

The quorum for the sub-group will be one third its membership. Apologies for absence should be sent to the Trust Office at least two days before a meeting, except in exceptional circumstances, and will be recorded at the meeting.

Meeting frequency

The sub-group will meet bi-monthly, with timed meetings of two hours. Extra meetings will be arranged in exceptional circumstances.

Performance evaluation

A rolling work-plan will be maintained, updated at each meeting, and shared with the Quality and Governance committee.

These Terms of Reference will be reviewed annually, or earlier at the request of the sub-group.

Reporting arrangements

The Chair or Vice-chair will report to the CoG, BoD and Q&G committee as required.

Date of approval:	
Date of approval by sponsoring group:	
Date of next review:	
Executive Lead:	