

NHS South East London Integrated Care Board Quality and Safeguarding Committee

Terms of Reference

September 2024

1. Introduction

- 1.1 The NHS South East London Integrated Care Board (ICB) Safeguarding and Quality Committee [the “committee”] is established as a committee of the ICB.
- 1.2 The committee has no executive powers other than those specifically delegated in these Terms of Reference. These terms of reference can only be amended by the ICB Board.
- 1.3 These terms of reference set out the purpose, duties, responsibilities and accountabilities, membership, and reporting arrangements of the committee under its terms of delegation from the ICB Board.
- 1.4 ICB Board Members and employees are directed to co-operate with any requests made by the committee.

2. Purpose

- 2.1. The committee will act as a focal point for the collective oversight and strategic direction of safeguarding and quality matters across SEL Integrated Care System. The committee is responsible for overseeing the delivery of high-quality care, ensuring compliance with safeguarding legislation, promoting the safety and wellbeing of vulnerable populations and fostering continuous improvement in health services.
- 2.2. It's work will ultimately support improved health outcomes, reduced inequalities and enhanced patient experience.
- 2.3. The committee will provide the ICB Board with assurance that the ICB is delivering it's quality and safeguarding functions and obligations in a way that is compliant with the NHS Safeguarding Assurance and Accountability Framework (2024) and the advice and recommendations of the National Quality Board.
- 2.4. The scope of the committee's activities will be in relation to services commissioned by the ICB on behalf of the resident population of South East London.

3. Duties

- 3.1. The committee is responsible for ensuring the robustness of the systems in place across the ICB to secure effective quality and safeguarding governance, assurance and internal control across the ICB.
- 3.2. The committee will oversee that these systems and processes allow the ICB to comply with all relevant legislation, effectively delivering its strategic objectives to provide sustainable and high-quality care, and ensuring appropriate safeguards are in place to protect children and adults at risk.
- 3.3. The committee will pro-actively identify and obtain assurance that declining quality and safeguarding indicators are being addressed, ensuring risks are managed rapidly by a designated responsible officer or responsible group. In this the committee will ensure the development and delivery of system action plans has been actioned by the ICB Executive Committee and system partners as appropriate, where these are required due to variance against agreed standards.
- 3.4. The committee is expected to work across the system to review and endorse mitigating actions at South East London, Local Care Partnership / Borough and Provider Collaborative level, as put forward by these partnerships and collaboratives for their agreed areas of responsibility.
- 3.5. The System Quality Group (SQG) and System Safeguarding Group (SSG) are sub-groups of the Quality and Safeguarding Committee. The committee will act both directly, and through its oversight of the SQG and SSG to:
 - input into the development of shared ambitions and priorities.
 - act to ensure inequalities and variation in the quality of care and outcomes are addressed.
 - ensure serious quality and safeguarding risks and concerns are managed effectively; and that learning, intelligence and improvement are shared across the system and beyond to inform ongoing improvement.
 - obtain assurance that actions are delivered in keeping with agreed timescales
 - ensuring training provision for the workforce is robust – succession planning, professional development, clinical governance are central to ICB delivery
- 3.6. The committee will undertake the following specific activities:
 - 3.6.1 Receive and review a risk report to agree the main risks (internal and external) related to quality and safeguarding. The committee will oversee the ICB's objective to minimise risk related to its responsibilities towards securing continuous improvement in quality and safeguarding and improving outcomes for the resident population. Whilst responsibility for detailed review

and remedial action on risks rests with the ICB Executive Committee, the committee is expected to maintain an awareness of related risks and assure itself that the proposed actions are adequate, acting as the point of escalation for concerns relating to quality and safeguarding which are raised by the ICB Executive Committee.

- 3.6.2 Receive reports from the SQG and SSG to review identified themes and shared learning from statutory and non-statutory learning reviews, drawing on intelligence from borough-based forums such as Local Care Partnerships, Safeguarding Children Partnerships, Safeguarding Adult Boards and Safer Community Partnerships, and working collaboratively with partner organisations to do so.
- 3.6.3 Oversee and scrutinise the ICB's response to all relevant directives, regulations, statutes, national standards, policies, reports, reviews and best practice as issued by the DHSC, NHSE, and other regulatory bodies / external agencies (e.g. CQC, NICE), including giving guidance to the system as required and gaining assurance that they are appropriately reviewed and actions are being undertaken, embedded and sustained.
- 3.6.4 Maintain an overview of changes in the methodology employed by regulators and changes in legislation/regulation and assure the ICB that these are disseminated and implemented across all sites.
- 3.6.5 Receive assurance that the ICB has effective and transparent mechanisms in place to monitor mortality and that it learns from death (including coronial inquests and Prevention of Future Deaths reports).
- 3.6.6 Provide the ICB Board with assurance that it is delivering its statutory duties for Safeguarding Adults, Safeguarding Children and Children Looked After as laid out in Section 11 of the Children Act (2004), Working Together to Safeguard Children (2023), the Care Act (2014), and Promoting the Health and Wellbeing of Looked After Children (2015).
- 3.6.7 Provide the ICB Board with assurance that it is delivering its statutory duties in relation to people with Special Educational Needs and Disabilities (SEND) outlined in the SEND Code of Practice (2015) and Children and Families Act (2014)
- 3.6.8 Comprehensively scrutinise the robustness of the arrangements for, and assure compliance with, the ICB's statutory responsibilities for:
 - Infection Prevention and Control
 - Local Maternity and Neonatal System
 - Patient Experience
 - Learning Disabilities and Autism

- Medicines safety and antimicrobial stewardship.
- Equality, Diversity and Inclusion (where these relate to specific performance standards or matters of care quality)
- Continuing Healthcare
- Safeguarding

- 3.6.9 Arrange a rolling programme of deep-dive reviews across both the committee and SQG and SSG with the aim of understanding in detail key areas of ICB risks and quality and contributing through this process to improvement activities and the promotion of shared learning.
- 3.6.10 Ensure that the SQG and SSG maintains effective processes for system-wide learning in accordance with the principles of the National Patient Safety Framework, learning from significant events including themes and trends from incidents and safeguarding reviews. This assurance will be provided via SSG and SQG reports and supplementary papers, the committee's role being to ensure that lessons learned are implemented and are making a positive difference.
- 3.6.11 Contribute to the development and utilisation of a common ICS Safeguarding and Quality Framework to measure the impact of the actions taken by the ICB Board or the ICS more broadly (including ICS transformation programmes). This framework will include quantitative and qualitative intelligence relating to service performance and the quality and safety of care, including patient experience and outcomes.
- 3.6.12 Receive and review a quarterly exception report on Safeguarding and Children Looked After. This will include matters related to borough based safeguarding arrangements, risks and performance.
- 3.6.13 Receive updates in relation to local, regional or national quality and safeguarding priorities, agreeing a strategic and/or operational response as appropriate, and monitoring ICB delivery on any priorities.
- 3.6.14 Identify and share best practice across the ICS in relation to quality and safeguarding.
- 3.6.15 Receive updates from the SEL Forum for Antimicrobial Stewardship (via the Infection Prevention & Control Group), the SEL Medicines Safety Network and the SEL Integrated Medicines Optimisation Committee on quality improvement work relating to medicines.

4. Accountabilities, authority, and delegation

- 4.1. The authority delegated to the committee is set out in the ICB's Scheme of Reservation and Delegation.

- 4.2. The committee will act to agree and report against all duties within its scope. It will report on risks and planned improvements related to its performance and quality assurance activities and update on improvement work to the ICB Board.
- 4.3. The committee will be provided with a regular opportunity to hear from representatives of its supporting groups. It will be able to act on recommendations or proposals that arise at those supporting groups (SQG, SSG, CHC Quality Assurance Group, IPC group) in line with the ICB Scheme of Reservation and Delegation
- 4.4. The committee will link with other partnership assurance processes, such as Local Authority Overview and Scrutiny and Safeguarding Boards/ Partnerships.
- 4.5. The committee may establish a working group or task and finish group to lead work under a defined term of reference/ engagement. The committee must agree by majority on the establishment of any of the groups and formally agree their terms of reference.

5. Membership and attendance

- 5.1. Committee members shall be appointed by the ICB Board in accordance with the ICB Constitution.
- 5.2. As far as is possible, the membership of the committee should be representative of the population it covers, in line with relevant ICB Equality, Diversity and Inclusion processes, guidance and objectives.
- 5.3. At any point, the Chair may ask any non-committee members in attendance to withdraw in order to facilitate open and frank discussion by committee members of a particular matter or issue.
- 5.4. The membership of the committee will be
 - ICB Non-Executive Director (Chair)
 - Independent Safeguarding Board/ Partnership Chair (Vice Chair)
 - ICB Chief Nurse
 - ICB Medical Director
 - ICB Place Executive Lead (x1)
 - ICB Chief of Staff
 - ICB Chief Pharmacist or Associate Chief Pharmacist
 - SEL Director of Children's or Adult Services (x1)
 - ICB Director for Mental Health, Children & Young People and Inequalities
- 5.5. The committee will meet with the following in attendance:

- ICB Deputy Chief Nursing Officer
- ICB Head of Nursing – Safeguarding
- ICB Head of Primary Care
- ICB Head of Quality – Clinical and Care Professional Lead (CCPL)
- Director of Public Health (x1)
- SEL Provider Chief Nursing Officer
- Director, SEL Healthwatch

- 5.6. Any member of the ICB Board additional to those listed as committee members may join the committee in attendance.
- 5.7. Other individuals from across the ICS (health or social care organisations) may be invited to attend as required for specific items.
- 5.8. The committee is permitted, with agreement of the chair and a majority of members, to formally co-opt additional members and/or other subject matter specialists to broaden the range of input should this be deemed necessary.
- 5.9. Committee members will be expected to conduct business in line with the ICB values. Members of, and those attending, the committee shall behave in accordance with the ICB's Constitution, Standing Orders, and Standards of Business Conduct Policy
- 5.10. The committee shall satisfy itself that the ICB's policy, systems and processes for the management of conflicts, (including gifts and hospitality and bribery) are effective including receiving reports relating to non-compliance.
- 5.11. All committee decisions must be taken in line with ICB Equality, Diversity and Inclusion processes and procedures, for example the consideration of an Equalities Impact Assessment where relevant. All decisions must also seek to include an appropriate level and mechanism of public/ service user engagement.

6. Chair arrangements

- 6.1. The committee will be chaired by an ICB Non-Executive Director.
- 6.2. The Vice Chair will be the Independent Safeguarding Board/ Partnership Chair.
- 6.3. At any meeting of the committee, the Chair shall preside. If the Chair is absent, the Vice Chair shall preside. If the Chair is temporarily absent on the grounds of conflict of interest, the ViceChair shall preside.

7. Quoracy and Conflict of Interest

7.1. To be quorate, the following four members must be present:

- ICB Chief Nurse or ICB Chief Medical Officer
- Director of Children's Services or Director of Adult Services
- Place Executive Lead (x1)
- Chief Pharmacist or Associate Chief Pharmacist

7.2. The committee will operate with reference to NHS England guidance and national policy requirements and will abide by the ICS's standards of business conduct. Compliance will be overseen by the Chair.

7.3. The committee agrees to enact its responsibilities as set out in these terms of reference in accordance with the Seven Principles of Public Life set out by the Committee on Standards in Public Life (the Nolan Principles).

7.4. Committee members will be required to declare any interests they may have in accordance with the ICB's Conflict of Interest Policy (included within the Standards of Business Conduct Policy). Members will follow the process and procedures outlined in the policy in instances where conflicts or perceived conflicts arise.

8. Decision-making

8.1. Where a decision is required, it is expected that this will be reached by consensus. Where a vote is required to decide a matter, each member may cast a single vote. In the event of equal votes, the Chair will have a casting vote.

9. Procedure of decisions made outside of formal meetings

9.1. The Chair will arrange for the notice of the business to be determined and any supporting paper to be sent to members by email. The email will ask for a response to be sent to the Chair by a stated date. A decision made in this way will only be valid if the same minimum quorum described in Para. 7.1, expresses by email or signed written communication by the stated response date, that they are in favour.

9.2. The ICB's Corporate Governance team will retain all correspondence pertaining to such a decision for audit purposes and report decisions so made to the next meeting. A clear summary of the issue and decision agreed will then be recorded in the minutes of the next committee meeting.

10. Frequency

10.1. The committee will meet on a quarterly basis.

- 10.2. Given the importance of the committee, members will be expected to prioritise attendance. They should provide apologies in advance should they be unable to attend.
- 10.3. Members are responsible for identifying a suitable representative should they be unable to attend a committee meeting. The representative must be agreed in advance with the Chair, and notified to the meeting administrator.
- 10.4. Nominated representatives will count towards the meeting quoracy if attendance has been agreed by the committee Chair.
- 10.5. Members and staff from ICS partner organisations are expected to contribute to reasonable requests for information and input to the work undertaken by the committee.

11. Reporting

- 11.1. Papers will be made available five working days in advance to allow committee members to discuss issues with colleagues ahead of the meeting. committee members are responsible for seeking appropriate feedback.
- 11.2. The committee will report on its activities to the ICB Board primarily through the committee minutes and an accompanying report which will summarise key points of discussions, items recommended for decisions, the key assurance and improvement activities undertaken or coordinated by the committee, and any actions agreed to be implemented. The committee will also provide any ad hoc report or communications as the ICB Board so request.
- 11.3. Committee papers will be publicly available as part of the ICB Board Meeting in Public board pack.

12. Administrative Support

- 12.1. The committee will be supported administratively by the ICB's Corporate Governance team.
- 12.2. Draft minutes will be shared with the Chair for approval within five working days of the committee meeting.
- 12.3. Approved minutes will be circulated to members together with a summary of activities and actions within ten working days of the meeting.

13. Monitoring adherence to the Terms of Reference

- 13.1. The Chair will be responsible for ensuring the committee abides by the Terms of Reference.

14. Review of Arrangements

- 14.1. The committee shall undertake a self-assessment of its effectiveness on at least an annual basis. This may be facilitated by independent advisors if the committee considers this appropriate or necessary.
- 14.2. These terms of reference shall be reviewed by the committee Chair and ICB Chair on an annual basis, with changes proposed for approval to the ICB Board.