



Quality, Safety and Clinical Risk Management Committee

Terms of Reference

1.0 Constitution

The QS Enterprises Board of Directors hereby resolves to establish a Forum to be known as the QSE Quality, Safety and Clinical Risk Management Committee (the forum).

2.0 Purpose

The QSCRM is responsible for assisting the Board of Directors in being adequately assured in relation to all quality, clinical governance and Health and Safety matters, including but not limited to:

- Infection Control
- Service Outcomes
- Safeguarding Adults and Child Protection
- Regulatory Compliance
- Patient Information
- Patient Experience (Complaints and Patient Feedback)
- Incidents and Risk Management
- Health and Safety

3.0 Membership (including quorum)

Core members of the committee will include:

- Operations Manager / Quality and Safety Lead (Chair)
- Superintendent Radiographers
- Administration Managers
- Adult and Paediatric Safeguarding Lead
- Governance Lead Radiographer

If core members are unable to attend, they must ensure that a representative attend in their place.

Members are permanent members of the committee for as long as they serve in their capacity for QSE.

4.0 Attendance

The Quality and Safety Lead will act as lead senior manager for the Forum.

Duties in this regard include but are not limited to:

- Agreement and circulation of agenda to members.
- Ensuring the agenda and papers are distributed no less than 5 working days in advance of the meeting.
- Ensuring minutes of the meeting are taken, including a record of decisions taken, matters arising and that issues to be carried forward are recorded in a rolling log.
- Ensuring that draft minutes are circulated within 10 working days of the meeting to all members.

Non-Executive Directors may attend periodically by invitation as part of the mechanism for Board assurance.

5.0 Frequency

Meetings will normally be held every 1 month on the Company audit morning. Additional meetings may be scheduled where necessary.

6.0 Authority

The forum is authorised by the Board to act in respect of any activity within its terms of reference. It is authorised to seek any information it requires from any employee, and all employees are directed to co-operate with any request made by the forum.

7.0 Reporting

The minutes of forum meetings shall be formally recorded and confirmed as accurate at the next meeting of the committee. The Operations manager as chair, shall draw to the attention of the Board, any issues that require disclosure or executive action.

8.0 Review

These terms of reference shall be reviewed at least annually. During this review, the forum will conduct a self-assessment of its duties as reflected within its Terms of Reference and report any conclusions and recommendations for change to the Board.

9.0 Example Agenda

- 1. Welcome and Introductions**
- 2. Apologies**
- 3. Review of minutes of last meeting held**
- 4. Action tracker / matters arising**
- 5. Review of Risk Register**
- 6. Quality Management Reports (to be presented by link staff invited to attend or by proxy by the Clinical Governance Lead Radiographer)**
 - a. Infection Control**
 - b. Service Outcomes**
 - c. Safeguarding and Child Protection**
 - d. Regulatory compliance**
 - e. Patient Information**
 - f. Patient Experience (Complaints and Patient Feedback)**
 - g. Incidents and Risk Management**
 - h. Health and Safety**
- 7. A.O.B and next meeting**