

# WILTSHIRE CLINICAL COMMISSIONG GROUP (CCG) HEALTH AND SOCIAL CARE QUALITY ASSURANCE GROUP TERMS OF REFERENCE

#### 1 Purpose

The purpose of the CHC Health and Social Care Quality Assurance Group (Group) is to oversee, support and inform the delivery of NHS Continuing Healthcare within Wiltshire in line with the National Framework for NHS Continuing Healthcare (DoH rev 2012) and by doing so inform review and further development of the Wiltshire CCG CHC Operating Policy thereby ensuring a coordinated and joined up approach to its implementation.

#### 2. Scope and Function

- 2.1 The scope and function of the Group is to continually develop CHC service delivery, ensuring models are fit for purpose, practicable across the whole of Wiltshire's health and social care community and meeting all applicable national and locally agreed standards.
- 2.2 To achieve this, the objectives of the CHC Health and Social Care Quality Assurance Group are to:
  - continue to review performance and activity scorecard with a view to successful delivery of the CHC workstreams;
  - develop quality audit tool, interpret and develop information with a view to identifying opportunities for improvement to inform changes;
  - lead and support implementation of change across Wiltshire's health and social care community specifically with a view to achieving the 28 working day standard for determination of CHC eligibility set by the Department of Health;
  - review and evaluate training and development in light of ongoing performance with a view to ensuring adequate and current education provision is delivered;; and
  - to identify and share operational risks in service delivery and support local management of these.
- 2.3 The Group will provide expert professional leadership and advice within their own organisation.

## 3. Links to Strategic Plan for Health in Wiltshire

- 3.1 (i) Integrated care closer to home: increasing the alignment and integration of primary care, community, social services and hospital services to ensure seamless, high quality safe care for patients and carers, delivering services at the right time and in the right place, designed to be responsive and flexible to individual need.
  - (ii) Development of strong localities: ensuring health services reflect the needs of local communities within Wiltshire.
  - (iii) Self management and self care: making sure service users and carers stay in control and that services are joing up around the needs of each individual.
  - (iv) Promoting health and wellbeing: working with communities and other organisations to develop an environment that improves health and wellbeing for adults, children and young people, reduces inequalities and supports people to make healthier lifestyle choices.
  - (v) *Using our resources wisely*: implementing a programme to deliver quality, innovation, productivity and prevention (QIPP) ensuring the resources we use deliver the best possible value for service users, and that we eliminate inefficiencies.

#### 4. Membership

4.1 The membership of the CHC Health and Social Care Quality Assurance Group will consist of the following:

Name	Job Title
	Chair
	Associate Director CHC and Specialist Placements
	Nursing and Patient Safety Directorate
	Wiltshire CCG
	CHC operational and strategic Representatives
	Wiltshire Council
	Learning Disabilities CHC Lead, CTPLD
	Representative, Salisbury Foundation Trust
	Representative, Royal United Hospital
	Representatives Great Western Hospital, Acute and
	Community Provider arm
	Representative AWP
	Clinical Lead CHC, Wiltshire CCG
	Registered Care Providers Association (RCPA)
	representative
	Service User Rep/ Healthwatch tbc

4.2 Other individuals may be invited to attend the group at the discretion of the Chair.

#### 5 Expectations of Members

- 5.1 Members are expected to attend all meetings unless previously agreed with the Chair through the Group Secretary. Should members be unable to attend it is expected that they will send an appropriate deputy to represent their services and organisation.
- 5.2 When the Chair is unavailable, XXXXXXXXXXXXX will deputise. No other deputisation is required.
- 5.3 Members are expected to communicate any organisational developments, decisions and/or recommendations in connection with delivery of CHC services that may potentially have a direct impact on one or more local partnership organisations as soon as practicable; in the most appropriate manner and presented for discussion and/or agreement at the next available meeting.

#### 6. Authority

- 6.1 The Group is authorised, on behalf of Wiltshire CCG to lead on development of local policy and service specifications, taking:
  - a directive approach to CHC service delivery through monitoring outcomes; and
  - an operational approach, by leading and implementing any recommendations in accordance with National guidelines and own organisational structure..

#### 7. Accountability

- 7.1 The Group is accountable to the Clinical Commissioning Group
- 7.2 Individual members of the Group are responsible for progressing any actions relevant to their own area/organisation and communicating decisions made through their own reporting structures to share information.

## 8. Reporting Arrangements

- 8.1 Minutes will be recorded for all meetings, disseminated to all members and presented at the next available meeting as a standing agenda item for accuracy.
- 8.2 The Group will report to the Clinical Commissioning group and joint commissioning board on a biannual basis .

# 9. Frequency of Meetings

- 9.1 Meetings will be held on a quarterly basis or extraordinarily as required.
- 9.2 A schedule of meetings will be established for each calendar year and published in advance.

#### 10. Quorum

The Chair and/or designate must be present together with members from at least three stakeholder/provider organisation enable quorate conditions.

#### 11. Review

The Terms of Reference and membership of the Group will be reviewed annually and in the event of any organisational, staff or policy changes.

#### 12. Freedom of Information/Data Protection

These terms of reference have been complied with the requirements of the Freedom of Information Act 2000, which allows a general right of access to recorded information held by NHS Somerset, subject to the specified exemptions, including Data Protection and Caldicott Guardian principles.

