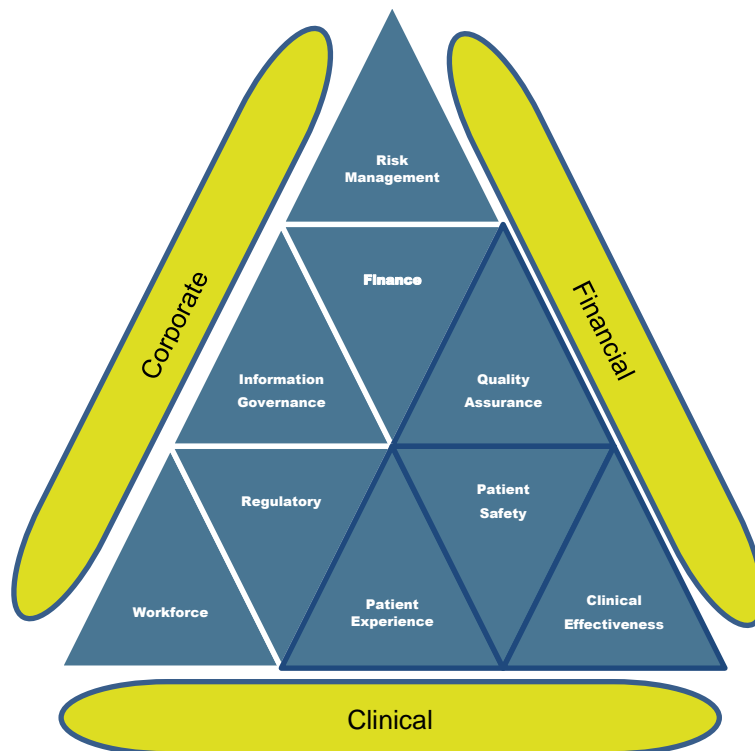


Integrated Governance Committee – Terms of reference

Introduction

The Fed's Integrated Governance Policy, approved by the Federation Board in December 2014, combines nine corporate, financial and clinical accountability domains as set-out below. This framework is used across all aspects of the Federation's work and provides a structure to ensure governance is integrated into all of our work.



Governance structures

- **Board** - The Board is ultimately responsible for all aspects of the Federation's governance. Specific duties of the Board include:
 - Appoint the Federation's financial adviser
 - Approve the Federation's annual accounts
 - Approve bids whose value exceeds 20% of annual Federation turnover and/or which contain performance elements which increase contractual risk
 - Set the salaries of the Executive Chair, CEO and non-executive directors
 - Sets the Terms of Reference for the Integrated Governance Committee
- **Integrated Governance Committee (IGC)** - The Board delegates various matters to the Integrated Governance Committee (IGC) which is a sub-committee of the Board. The IGC:
 - Makes recommendations to the Board
- Consists of the Federation Chair, CEO, Clinical Governance Lead, at least one Board executive member, one Board non-executive member, Operations Director and Financial Controller. There must be a quorum of people with the knowledge and the

relevant skill sets in order to demonstrate checks and balances. That an item should be escalated to Board level if the appropriate representation is not present at the IGC.

- Meets at least on a monthly basis, typically the third Tuesday of each month, with the exception of August when there is no meeting
- Chaired by a non-executive Board member
- Has a Standing Agenda which is set-out below – although not all items are discussed at each meeting

Integrated Governance Committee Monthly Agenda

Governance Domain	Activity
Patient Safety <ul style="list-style-type: none"> ▪ Safeguarding Children & Young People ▪ Safeguarding Vulnerable Adults ▪ Chaperoning & Advocacy ▪ HCAI Reduction Plan/Infection Control 	<ul style="list-style-type: none"> ▪ Reviews patient safety metrics to ensure we provide a safe environment for the welfare of our patients, the public and staff ▪ Ensures our policies and procedures meet national and local requirements and are fit for purpose and that staff comply with them ▪ Reviews enquiries into breaches and agrees remedial action plans
Regulatory Compliance <ul style="list-style-type: none"> ▪ CQC ▪ CIC Regulator ▪ Commissioners 	<ul style="list-style-type: none"> ▪ Ensures the Fed meets the requirements of its regulators including addressing policy changes ▪ Reviews the conclusions from self-assessments and inspections ▪ Monitors how well we meet contractual requirements
Information Governance <ul style="list-style-type: none"> ▪ Confidentiality ▪ Data Protection ▪ Information Security ▪ Freedom of Information ▪ Quality of clinical record keeping 	<ul style="list-style-type: none"> ▪ Ensures the Fed complies with the Law, NHS guidance via the IG Toolkit and local CCG's ▪ Reviews investigations into breaches and agrees remedial action plans
Risk Management <ul style="list-style-type: none"> ▪ Health & Safety ▪ Office Security ▪ Risk Assessment (including clinical risk and mitigation) ▪ Business Continuity Planning (BCP) ▪ Disaster Recovery Planning (DRP) 	<ul style="list-style-type: none"> ▪ Ensure a 'risk aware' culture throughout the organisation and assessment of risk is part of all work activities through a top down and bottom up approach. ▪ Agrees risk and associated policies ▪ Monitors compliance with all the statutory and non-statutory standards relating to the assessment and control of risk ▪ Monitors the Federation's BCP and DRPs
Workforce <ul style="list-style-type: none"> ▪ Recruitment ▪ Induction ▪ Professional Registration ▪ Mandatory Training ▪ Continuing Professional Development ▪ Appraisals & 1:1's ▪ Performance Management 	<ul style="list-style-type: none"> ▪ Ensures we have a motivated and appropriately skilled workforce ▪ Ensure we have appropriate HR systems and processes across the organisation and these reflect best practice, regulatory requirements and legislation ▪ Reviews the outputs from our HR systems

<ul style="list-style-type: none"> Management of conflicts/grievance Clinical Supervision Peer Support & Review Staff Surveys 	
Patient Experience <ul style="list-style-type: none"> Patient Access Being Open Patient Involvement & Surveys 	<ul style="list-style-type: none"> Review indicators of patient experience. Ensure patients understand that they can expect from our services, how services are accessed and wait times Ensure we are open and transparent when mistakes are made Ensure we have systems so patients are involved with developing our services Monitor and act on patient feedback to ensure we can develop and improve our services
Quality Assurance <ul style="list-style-type: none"> Performance Monitoring Complaints Handling Incident Reporting 	<ul style="list-style-type: none"> Review quality indicators Ensure there are appropriate systems for collecting complaints and incidents/issues Where appropriate, review complaints and incidents/issues, develop and disseminate learning
Clinical Effectiveness <ul style="list-style-type: none"> NICE Guidance Research Clinical Audit Clinical Policies Referral Procedures & Pathways Prescribing 	<ul style="list-style-type: none"> Ensure there are systems which assess the clinical effectiveness of services Review indicators of clinical effectiveness
Finance <ul style="list-style-type: none"> Budgets Cash Flow Expenses Remuneration 	<ul style="list-style-type: none"> Ensure Federation financial resources are used effectively and responsibly e.g. ensure suitable financial controls are in place Review annual financial statements. Approve and regularly review budgets and cashflow forecasts Approve contractual bids valued at 5-20% of turnover. This includes setting budgets for these services. (revenue and capital) to be used if the bid is successful. Contractual bids with no contribution should be escalated to the Board Agree policy changes which have a substantial impact on the Federation's finances e.g. annual pay increases and pension arrangements Approve (capital or revenue) expenditure exceeding £15,000 which is either not 'ordinary course of business' or part of approved budgets (e.g. part of bids). All salary and pay rise policy changes should be escalated to the Board for approval Review the expenses of the CEO and Chair – this task is normally delegated to a non-executive director. Regularly review the delegated authority of the CEO:- :

	<ul style="list-style-type: none">▪ Approving 'ordinary course of business' payments to staff and suppliers, other items up to £15,000 or when they are part of approved budgets (e.g. part of bids)▪ Approving the replacement of like for like staff (minor contractual changes) and other operational changes▪ Approving Bids with a value of up to 5% of turnover
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