# **HEE-TV Quality Committee**

## **Terms of Reference**

Version:	2.0	
Date of Authorisation:		
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Key individuals and/or	Quality Management Committee	
Committees consulted during	EQSOC	
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1.0	May 2017	May 2017			
2.0	9.8.17	11.8.17	Amended following Assurance Committee meeting on 7.8.17		

#### **Remit & purpose**

- 1. The Quality Committee will be a multiprofessional committee,
- 2. The Quality Committee will have oversight of all clinical learning environments in HEE-TV, encompassing non-medical, medical, dental, general practice [primary and secondary] and pharmacy training programmes.
- 3. The Quality Committee will be responsible for the quality management of the clinical learning environment
- 4. The Quality Committee will provide assurance that clinical learning environments meets the standards for education and training as set by Health Education England [HEE] and regulatory bodies including the GMC, NMC and GPhC.
- 5. The Quality Committee will have both operational and strategic areas of responsibility.

#### Governance

- 6. The Quality Committee will be chaired by the HEE-TV Head of Quality, who will report to the Postgraduate Dean.
- 7. The Quality Committee will be accountable to the HEE-TV Senior Leadership Team and the South Director for Education & Quality through the South Quality Scrutiny Group [Appendix 1].

#### Main areas of responsibility

#### Strategic responsibilities:

- 8. The Quality Committee will be responsible for reporting on the degree to which Placement Providers are ensuring requirements and standards of the HEE-Quality Strategy and Framework are met.
- 9. The Quality Committee will have oversight of the HEE-TV Education Quality Risk Register which will be used to populate outgoing quality reports, including those to HEE National [via tableau], Quality Surveillance Groups, regulatory bodies, and others as required [Appendix 2].
- 10. The Quality Committee will have oversight of local and regional trends emerging in relation to the quality of education and training, and will provide both insight and foresight in the management of concerns.
- 11. The Quality Committee will scrutinise reports related to quality interventions undertaken, completing an annual trend analysis of areas of concern relating to the learning environment.
- 12. The Quality Committee will identify and encourage dissemination of best practice locally and regionally.

- 13. The Quality Committee will have oversight of all issues relating to the quality of education, and the process by which they are addressed, managed and resolved.
- 14. The Quality Committee will monitor progress to address risks and resolve all issues and concerns arising.
- 15. The Quality Committee will determine the most appropriate quality intervention on the basis of available evidence and data, ensuring that any intervention is prepared for in a timely manner.
- 16. The Quality Committee will, in partnership with the relevant education and/or placement provider, make recommendations on the continued suitability of placements.
- 17. The Quality Committee will receive, critically evaluate and validate where appropriate, reports from placement and education providers, including: placement provider self-assessments; placement provider Learning & Development Agreement self-assessment report; junior doctor contract exception reports, completed risk assessment reports and action plans; responses to national and local surveys; and other data sources.

## Membership

- Head of Quality, Chair\*\*
- Postgraduate Dean\* [or nominated deputy]
- Head of Business and Operations
- Quality Lead Practice Learning\*
- Quality Manager
- Quality Support Administrator
- Lay Representative
- Chair/Deputy Chair from the Trainee Advisory Committee\*\*
- Non-medical Learner Representative\*\*
- One/Two co-opted, experienced clinical educators\*\*
- Other co-opted members as appropriate [eg DME Representative, LEL Representative].

## Quorum

The Quality Committee will be considered quorate providing that there are no fewer than five members in attendance, three of whom should be clinical representatives [registered with the appropriate regulatory body] one of whom should be in current practice and one of whom should be the Head of Quality, or the Postgraduate Dean. Clinical Representatives are identified above by an asterisk. Current practice representatives are identified above by double asterisks.

## **Frequency of meetings**

The Quality Committee will meet monthly. The length of meeting will be determined by the agenda.

### **Appendix 2 Governance**

HEE-South Assurance Committee HEE Commissioning for Quality Team

HEE-TV Senior Leadership Team

HEE-TV Quality Committee

#### **Appendix 2 Reporting**



## HEE-TV Quality Board Date of meeting: Time of Meeting: Venue: Chair:

No.	Item	Presented By	Papers
	Attending:		
1.	Apologies -		
2.	Declaration of Conflicts / Competing Interests	All	
	Monthly standing items - ongoing Quality Management		
3.	National Updates		
	Regional [South] Updates		
4.	Oxford University Hospitals NHS Foundation Trust		
	<ul> <li>Review of issues and progress reports</li> </ul>		
	<ul> <li>Review of new concerns emerging</li> </ul>		
	Review of intelligence from system partners		
5.	Milton Keynes University Hospital NHS Foundation Trust		
	<ul> <li>Review of issues and progress reports</li> </ul>		
	<ul> <li>Review of new concerns emerging</li> </ul>		
6	Review of intelligence from system partners		
6.	Royal Berkshire Hospital NHS Foundation Trust		
	<ul> <li>Review of issues and progress reports</li> <li>Review of new concerns amorging</li> </ul>		
	<ul><li>Review of new concerns emerging</li><li>Review of intelligence from system partners</li></ul>		
7.	Buckinghamshire Healthcare NHS Trust		
/.	<ul> <li>Review of issues and progress reports</li> </ul>		
	<ul> <li>Review of new concerns emerging</li> </ul>		
	<ul> <li>Review of intelligence from system partners</li> </ul>		
8.	Frimley Health NHS Foundation Trust		
	<ul> <li>Review of issues and progress reports</li> </ul>		
	<ul> <li>Review of new concerns emerging</li> </ul>		
	<ul> <li>Review of intelligence from system partners</li> </ul>		
9.	Central & North West London NHS Foundation trust [MK]		
	<ul> <li>Review of issues and progress reports</li> </ul>		
	<ul> <li>Review of new concerns emerging</li> </ul>		
	Review of intelligence from system partners		
10.	Oxford Health NHS Foundation Trust		
	<ul> <li>Review of issues and progress reports</li> </ul>		
	<ul> <li>Review of new concerns emerging</li> <li>Devices of intelligences from purchase partners</li> </ul>		
11	Review of intelligence from system partners		
11.	<ul> <li>Berkshire Healthcare NHS Foundation Trust</li> <li>Review of issues and progress reports</li> </ul>		
	<ul> <li>Review of new concerns emerging</li> </ul>		
	<ul> <li>Review of intelligence from system partners</li> </ul>		
11.	All other Placement Providers		
	GP Practices		
	<ul> <li>Dental Practices</li> </ul>		
	<ul> <li>PVI Placements</li> </ul>		
12.	TAC update		
	Quarterly Standing Items		
13.	<ul> <li>Review of HEE-TV Quality Management of issues – assessing, escalating, closing</li> </ul>		
	<ul> <li>Review of Quality Interventions undertaken</li> </ul>		
	<ul> <li>Review of Quality Dashboard [Tableau]</li> </ul>		
	<ul> <li>Review of Emerging Trends</li> </ul>		
14.	Any Other Business		
15.	Date of Next Meeting		