QUALITY, FINANCE AND PERFORMANCE COMMITTEE
TERMS OF REFERENCE

1 Authority

The CCG’s Governing Body hereby resolves to establish a committee to be known as the Quality, Finance and Performance Committee (“the Committee”) and keeps under review its Terms of Reference. The Committee is authorised by the Governing Body to investigate any activity within its terms of reference which has delegated functions connected with the Governing Body’s main function. Except as outlined in these Terms of Reference, meetings of the Committee shall be conducted in accordance with the provisions of Standing Orders, Reservation and Delegation of Powers and Standing Financial Instructions approved by the Governing Body and reviewed from time to time.

2 Purpose

The Committee has been established to provide assurance to the Governing Body on Quality, Finance and Performance and to investigate any activity within its Terms of Reference and to produce an annual work programme to discharge its responsibilities. It is authorised to seek any information it requires from any employee of the CCG and its Member practices and all employees are directed to co-operate with any request made by the Committee. The Committee will take responsibility for ensuring compliance with the principles of good governance and the CCG’s constitution when undertaking its Terms of Reference.

3 Membership

The Governing Body shall appoint the members of the Committee and these shall include the following members:

- Governing Body Nurse Member (Chair)
- Associate Clinical Director of Quality
- Chief Finance Officer
- Medical Director
- Chief Nurse
- Director of Commissioning
- 2 GP Neighbourhood Leads
- Lay Member for Audit, Governance and Finance
- Lay Member for Patient and Public Participation
- Director of Performance & Quality Improvement

A Vice-Chair is to be appointed by majority vote (with the Chair having the casting vote) at the first Committee meeting of the financial year.

The following shall have a standing invite to the meetings of the Committee in a non-voting capacity:
• Healthwatch Trafford Representative  
• Health & Wellbeing Board Representative (Local Authority)  
• Trafford Council Executive Member (as appropriate)

Representatives from other departments may be invited to attend as appropriate.

4 Quorum  

A meeting will achieve quorum if at least one of either the Chair or Vice-Chair and five other members are present, providing there is a Governing Body member and three other members who have Quality, Finance and Performance responsibilities.

Each member of the Committee shall have one vote. The Committee shall reach decisions by a simple majority of members present, but with the Chair having a second and deciding vote, if necessary. However, the aim of the Committee will be to achieve consensus decision-making wherever possible.

5 Attendance  

Members of the Committee should normally attend all meetings of the Committee. Should a member not be able to attend a meeting of the Committee, apologies in advance must be provided to the Chair and Governance Team, and the name and status of any representative attending in their place must be agreed with the Chair and communicated to the Governance Team (the Chair may use their discretion where exceptional circumstances mean a member is unable to provide advance notice of their absence). Any person in attendance for a committee member whose attendance has not been agreed with the Chair may not count towards the quorum.

6 Frequency and Notice  

Meetings shall be held on a monthly basis, and not less than ten times per year. However, the Chair may arrange extraordinary meetings at their discretion. A schedule of pre-arranged meetings will be distributed to all members on an annual basis.

Unless otherwise agreed, notice of each meeting confirming the venue, time and date together with an agenda of items to be discussed, shall be forwarded to each member of the Committee and other persons required to attend no later than five working days before the date of the meeting. Supporting papers shall be sent to committee members and other attendees as appropriate, at the same time.

7 Responsibilities  

The responsibilities of the Committee are to have quality management, performance management and financial management and reporting aligned towards the overall management of commissioned services as follows:
Quality management

- Monitor the CCG’s providers’ quality of care in relation to the CCG’s approved Quality Strategy.
- Monitor clinical best practice guidance implementation by commissioned providers and the delivery of statutory responsibilities of safeguarding children and adults through quantitative and qualitative data analysis.
- Monitor and performance manage provider serious incidents to ensure preventative measures are put in place and lessons learnt are identified by commissioned providers.
- Monitor key quality standard schemes such as the Quality Premium and CQUIN.
- Review and monitor the handling and outcomes of complaints and patient experience.
- Have oversight of the management of quality risks to the CCG’s strategic objectives, priorities and commissioning intentions.

Note - the quality of general medical services is overseen by the CCG’s Primary Care Commissioning Committee

Performance management

- Monitor the overall performance of the CCG against national and local economy targets, and making subsequent recommendations.
- Review any performance necessary in implementing the CCG’s Operational Plan and provide assurance to the Governing Body on the delivery of outcomes of the CCG’s commissioning intentions.
- Receive regular commissioning performance reports (covering activity, cost and quality) for each of the CCG’s main areas of commissioning expenditure.
- Review the performance of the CCG’s providers including secondary care, community healthcare and services commissioned jointly with Trafford Metropolitan Borough Council.
- Monitor national and local key performance such as the NHS constitution standards.
- Have oversight of the management of performance risks to the CCG’s strategic objectives, priorities and commissioning intentions.
Monitor the CCG’s operational planning processes to ensure they align with the CCG’s long term strategic objectives.

**Financial and risk management & reporting**

- Review the CCG’s financial plans and annual budget, before making recommendations to the Governing Body for their approval, ensuring that any savings plans are supported by robust financial evaluation.
- Monitor delivery of the CCG’s financial plans and annual budget as agreed by the Governing Body.
- Review individual expenditure on providers and agree courses of action where that expenditure is not within targets set.
- Review and approve business cases in line with the Scheme of Delegation.
- Review budget setting and financial planning for the medium and long term.
- Receive risk reports for all the individual risks recorded on the Board Assurance Framework (BAF) for which the Committee has oversight of, and provide scrutiny and challenge.

8 **Reporting**

The minutes of Committee meetings shall be formally recorded and the Chair of the Committee shall formally report material issues arising from meetings of the Committee to the Governing Body, as appropriate.

9 **Monitoring Compliance**

The Committee shall submit an annual report to the CCG’s Governing Body, incorporating progress, reporting arrangements, frequency of meetings and membership attendance.

The Committee will develop a work plan with specific objectives which will be reviewed regularly and formally on an annual basis. The committee will also review its performance against the “effective committee” checklist on an annual basis.

10 **Review of Terms of Reference**

The Terms of Reference of the Committee (including membership) shall be reviewed by the CCG’s Governing Body at least annually.