



Southern Health
and Social Care Trust

Quality Care - for you, with you

PATIENT AND CLIENT EXPERIENCE **COMMITTEE**

TERMS OF REFERENCE

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1. CONSTITUTION

The Committee is established as a sub-committee of the Trust Board. It has no executive powers, other than those specifically delegated in these Terms of Reference.

2. MEMBERSHIP OF THE COMMITTEE

The Committee shall be appointed by the Board from amongst the Non-Executive Directors of the Trust and up to three representatives of the Public and Personal Involvement (PPI) Panel. A quorum shall be three members, (two Non Executive Directors and one PPI Panel member). The Chair of the Committee, who will be a Non Executive Director, shall be appointed by the Trust Board.

3. ATTENDANCE

The Trust Directors, Assistant Director of Promoting Wellbeing, Assistant Director of Quality Improvement, Assistant Director of Clinical and Social Care Governance and Assistant Director of Nursing (Patient Safety, Quality and Experience) shall normally attend the meetings.

4. FREQUENCY OF MEETINGS

Meetings shall be held not less than four times a year.

5. AUTHORITY

The Committee is authorised by the Board to investigate any activity within its Terms of Reference. It is authorised to seek any information it requires through the relevant Director. Directors and employees are directed to co-operate with any request made by the Committee.

6. ROLE

The Trust's vision is "To deliver safe, high quality health and social care services, respecting the dignity and individuality of all who use them."

The Trust is committed to changing services for the better and the ongoing improvement of user and carer experience of our services is a key priority of the Trust in delivering safe high quality care. To ensure the highest level of organisational focus on this issue, the Trust has established a Patient and Client Experience Committee of the Board.

The role of this Committee is to:

1. Provide assurance to the Trust Board that the Trust's services, systems and processes provide effective measures of patient, client and carer experience and involvement;
2. Identify gaps and areas of opportunity for development to ensure continuous, positive improvement to the patient, client and carer experience;
3. Ensure that patient, client and carer experience improvement initiatives are in place to address identified shortcomings and that these are monitored.

To fulfil this role the Committee will:

- a) Seek assurance that the Trust has effective and regularly reviewed mechanisms and systems in place to capture the views and experiences of service users and carers and is continuously improving on these.

In carrying out its work, the Committee will utilise information on all aspects of the patient, client and carer experience.

- b) Review and analyse trends emerging from users' feedback on their experience of care. Reviews and analysis of trends will focus on themes, service areas and professional matters.
- c) Assess the evidence that effective learning and improvement is occurring in relation to the user and carer experience.
- d) To receive assurances of the quality and breadth of the training and development provided to staff to deal appropriately with patients, clients and carers.
- e) Review progress of the Trust's Continuous Improvement Plan in relation to the patient, client and carer experience.
- f) Review progress of the Trust's Carers Action Plan.
- g) To receive updates on the development of the Trust's approach to learning from patient, client and carer experience.
- h) Make recommendations to Trust Board for consideration.
- i) Produce an Annual Report on the work of the Committee to Trust Board

7. REPORTING

The minutes of the Patient and Client Experience Committee shall be formally recorded and submitted to the Board following approval of the Patient and Client Experience

Committee. The Chair of the Committee shall draw to the attention of the Board any issues that require executive action.

8. SUB COMMITTEE

The Committee has delegated responsibilities to the following sub-group and will receive quarterly reports from this sub group:

- Patient/Client Experience Steering Group

Membership of the Committee – 2021-22

Mr John Wilkinson, Non Executive Director (Chair)

Ms Eileen Mullan, (Chair, SH&SCT)

Ms Geraldine Donaghy, Non Executive Director

Ms Sharon Doherty, PPI Panel representative

Mr Ray Hamilton, PPI Panel representative

Mr Peter Donnelly, PPI Panel representative

The following senior staff shall be invited to attend meetings.

Mr Paul Morgan, Director of Children and Young People/Executive Director of Social Work
Director of Mental Health & Disability Services

Mrs M McClements, Director of Acute Services

Mrs Aldrina Magwood, Director of Performance and Reform

Mr Brian Beattie, Interim Director of Older People & Primary Care

Mrs Heather Trouton, Executive Director of Nursing, Midwifery and AHPs

Mr Gerard Rocks, Assistant Director of Promoting Wellbeing

Ms Caroline Doyle, Interim Assistant Director – Clinical & Social Care Governance

Mrs Paula Tally, Assistant Director of Quality Improvement

Mrs Grace Hamilton, Assistant Director of Nursing (Patient Safety, Quality and Experience)

Southern Area, Patient Client Council representative

Medical Representative

Director of Human Resources and Organisational Development and representatives from Directorate/client specific group(s) may be invited to attend as the agenda requires.