**NATIONAL WAITING TIMES CENTRE BOARD**

**PERSON CENTRED COMMITTEE (PCC)**

**(April 2018)**

## TERMS OF REFERENCE

1. **Purpose**

The purpose of this Committee is to ensure appropriate scrutiny and governance around the person centred quality agenda. Person centred encompasses a range of stakeholders including patients, families, staff, customers, volunteers, carers and any relevant 3rd sector parties.

The NHS Quality Strategy for Scotland recognises the need to have an engaged, motivated and healthy workforce to deliver the quality ambitions of delivering person centred, safe and effective healthcare services.

1. **Role**

It is the responsibility of the Person Centred Committee to assure the NWTC Board that appropriate structure and processes are in place for the effective governance of the Board’s person centred agenda. The Committee shall be responsible for ensuring that the governance processes to meet statutory obligations and any other guidance issued by the Scottish Executive and Health Improvement Scotland are met.

This Committee shall be a standing committee of the NWTC Board which is part of the governance framework for NHS Boards.

The Person Centred Committee is toprovide coordination and leadership to enable effective delivery of the Involving People Strategy and the Staff Governance Standard. This will include supporting the delivery of the highest standard possible of person centred care including an understanding that staff management is the responsibility of everyone working within the system and is built upon partnership and collaboration.

1. **Membership of the Person Centred Committee**

The Person Centred Committee membership shall comprise of:

* Kay Harriman, Non Executive Director (Chair)
* Jane Christie-Flight, Employee Director
* Mark MacGregor, Non Executive Director
* Marcella Boyle, Non Executive Director
* Sylvia McCulloch, Lay Representative (Unison)
* Judith Ross, Lay Representative (RCN)

In addition, the following people may attend the committee:

* Jack Tait, Lay Representative
* Gareth Adkins, Director of Quality, Innovation and People
* David Miller, Associate Director of Human Resources
* Jill Young, Chief Executive
* Susan Douglas-Scott, Chair
* Anne Marie Cavanagh, Nurse Director
* Others invited by the Committee

1. **Quorum**

A quorum will consist of three non-Executive Directors of the Committee.

1. **Executive Director Lead**

The Designated Executive Lead will support the Chair of the Committee in ensuring that the Committee operates according to / in fulfilment of its agreed Terms of Reference. The named Executive Lead for the Committee is the Director of Quality, Innovation and People. Specifically he/she will:

* Support the Chair in ensuring that the Committee remit is based on the latest guidance and relevant legislation, and the Board’s best value framework;
* Liaise with the Chair in agreeing a programme of meetings for the business year, as required by its remit;
* Oversee the development of the annual work plan for the Committee which is congruent with its remit and the need to provide appropriate assurance at the year-end, for the endorsement of the Committee and approval by the Board;
* Agree with the Chair an agenda for each meeting, having regard to the Committee’s remit and work plan;
* Lead a mid-year review of the Committee Terms of Reference and progress against the annual work plan, as part of the process to ensure that the work plan is fulfilled; and
* Oversee the production of an annual report on the delivery of the Committee’s remit and work plan, for endorsement by the Committee and submission to the Board.

1. **Conduct of Business**
2. The Committee shall meet at least four times a year.
3. The conduct of business will be in accordance with the Board’s Standing Orders.
4. Prior to the full approved Minutes of the Committee being available, a template covering the main points of the discussion will be shared at the next available Board meeting. The full Minutes of this Committee will be reported to the NWTC Board.
5. Reports to the Board will be required to have a standard cover sheet clarifying whether the report is being presented for information, for discussion or for approval. Papers are required to be circulated a minimum of 5 working days in advance of the Committee taking place.
6. There will be a requirement to produce an Annual Report at the end of each financial year.
7. The framework for the Person Centred Committee for NWTC Board will be scheduled as part of a formal monitoring plan and will include the following:

Involving People Strategy

Trends of complaints

Trends from adverse incidents/Scottish patient safety programme

Volunteering Strategy

Equality and Diversity Information

Health Improvement Scotland Standards

Participation Standards

Summary of feedback from Quality Walkrounds (patient/ execs/ volunteers)

Care Opinion

What Matters To You? Day

Involving People

Staff Governance

Self Assessment Audit Tool

Staff Governance Action Plan

Workforce Strategy and Workforce Plan

Learning and development Strategy

Medical Education and Training

Medical Revalidation

Occupational Health and Safety Programme

Partnership Activities

Internal/external Workforce Audits

Corporate

Corporate Communications

1. **Reporting Arrangements**

Through the Person Centred Committee, the Remuneration Committee is required to provide assurance that systems and procedures are in place to manage the issues set out in MEL (1993) 114 (amended) so that overarching staff governance responsibilities can be discharged.

1. **Responsibilities & Remit of the Person Centred Committee:**

**Involving People Strategy**

The Committee will:

1. Ensure the Board has mechanisms in place in respect of all relevant legislation and policy relating to the Quality Strategy, Patient Focus Public Involvement and the Equalities legislation relating to the General and Specific public sector duties of the Equality Act. This incorporates:

* providing assurance on the patient centeredness quality domain including for example, carers, volunteers and 3rd sector parties.
* monitoring and evaluating the effectiveness of interventions.
* demonstrating positive outcomes related to the general and specific duties of the Single equality act.
* highlighting any potential risks.
* ensuring robust and accessible communication, monitoring and reporting mechanisms are in place and that appropriate committees, as indicated by accountability arrangements, receive regular progress reports.

**Staff Governance Standard**

The Committee will:

* ensure appropriate frameworks are in place which ensure that delivery against the Staff Governance Standard is being achieved;
* monitor and evaluate strategies and implementation plans relating to people management;
* recommend any policy amendment, funding or resource submission to the Board to achieve the Staff Governance Standard;
* take responsibility for the timely submission of all staff governance information required for national monitoring arrangements;
* monitor benefits realisation processes; and
* provide staff governance information for the statement of internal control;
* to provide assurance that systems and procedures are in place to manage the issues set out in MEL 1993 114 amended (the Remuneration Committee).

**9. Review of Terms of Reference**

These terms of reference will be reviewed annually.