



National Screening Service – Quality, Safety and Risk Management Committee

The National Screening Service (NSS) encompasses BreastCheck - The National Breast Screening Programme, CervicalCheck - The National Cervical Screening Programme, BowelScreen – The National Bowel Screening Programme and Diabetic RetinaScreen – The National Diabetic Retinal Screening Programme.

Terms of Reference

1.0 Introduction

This document sets out the Terms of Reference (ToR) of the National Screening Service (NSS) Quality, Safety and Risk Management (QSRM) Committee (“the Committee”).

2.0 Purpose

The purpose of the Quality, Safety and Risk Management Committee is to assure itself and provide assurance to the NSS Chief Executive (CE) that the risks relating to the NSS are being effectively managed. It will therefore assist the NSS in the fulfilment of its governance duties in relation to quality and risk.

3.0 Delegated Authority

The Committee is authorised by the CE of the National Screening Service to:

- examine any activity within the terms of reference set out in this document;
- seek any information or explanations that it requires from any employee of the National Screening Service, or any agency contracted to provide services to the National Screening Service;
- if required, obtain independent legal or other independent professional advice (following agreement with the CE, NSS) at NSS expense and in accordance with the HSE’s procurement policy and secure the attendance of persons with relevant experience and expertise if it considers this necessary; and
- request an investigation/review of any matter it deems relevant in line with the HSE policies.

4.0 Scope

The scope of the Committee’s duties covers the following:

- the NSS and anything it directly controls, and
- HSE and other agencies providing services to the NSS.

In scope includes: Corporate National Screening Service; BowelScreen; BreastCheck; CervicalCheck; Diabetic RetinaScreen.

5.0 Reporting

- The Chair of the Committee or delegate shall report to the CE, NSS after each meeting on all matters within its duties and responsibilities.
- The Committee shall make any recommendations to the CE, NSS that it deems appropriate on any area within its remit where action or improvement is required.
- At the beginning of each year the Committee, in consultation with the CE, will prepare a set of priorities and how these will be measured.
- At the end of each year the Committee will prepare a report on its role and responsibilities and the actions it has taken to discharge those responsibilities for inclusion in an annual report. Such a report should include:
 - a summary of the role of the Committee;
 - its performance against assessment or priorities set for the year;
 - the names and role of all members of the Committee during the period;
 - the number of Committee meetings and attendance by each member; and
 - the way the Committee has discharged its responsibilities.

6.0 Duties

The Committee will focus principally on all matters relating to quality, safety, risk and internal control of the NSS. In particular, it will:

1. Advise the CE, NSS on the robustness and comprehensiveness of the NSS's approach and processes for:
 - a. describing and communicating the Governance Framework for the NSS¹,
 - b. the identification, measurement, assessment, and management of risk (proactive and reactive) in the NSS,
 - c. reviewing the effectiveness of the NSS internal control framework,
 - d. revising the quality assurance process and data management,
 - e. reviewing and responding to:
 - i. audit reports relating to the NSS,
 - ii. incident review reports relating to the NSS,
 - iii. reports received from the NSS programme's Quality Assurance Committees,
 - iv. the adequacy of arrangements in place within the NSS for the monitoring of implementation of any recommendations made in the above reports,
 - v. the NSS's annual service and audit plans,
 - vi. the implementation of recommendations resulting from external reviews, audit, regulator reports (e.g.: HIQA, HSA, etc.).
2. Advise the CE, NSS on quality and risk management in the context of healthcare reform and phased transition of the NSS to new healthcare structures and services.

¹ This framework must be in compliance with the Code of Practice for Governance of State Bodies (2016) and updated in line with subsequent versions as they are developed.

3. Review arrangements in place by which employees may, in confidence, raise concerns and receive reports, on a timely basis, of concerns rose under the Procedures on Protected Disclosures of Information and advice on appropriate action to maintain the highest standards of probity and honesty throughout the NSS.
4. Review, at least annually, and if necessary, propose changes to the NSS's Governance Framework with particular emphasis on quality and risk management and the framework for internal control.
5. Advise executive management about the maintenance and promotion of a safety culture that enables integrated management of all risks.
6. Advise the NSS, CE regarding proposed changes to quality assurance management across the NSS. The QSRM Committee convey their advice with comprehensive information in support and for consideration for the CE in their decision making.

7.0 Independence

The Committee will be independent in the performance of its duties and will report only to the CE, NSS.

8.0 Membership and Quorum

Membership

- Members use their experience to challenge and critically items for discussion and make recommendation to NSS CE via Chair.
- Each member has equal voting rights for tabled motions, with the exception of the Chair, who has an additional casting vote, should this be needed.
- The CE, NSS will appoint members of the Committee. The Committee will consist of:
 - Each of the four programmes Quality Assurance Committee Chair,
 - Two Patient and Public Partnership Strategy representatives,
 - At least one NSS, Public Health Department representative
 - not fewer than four other persons who, in the opinion of the CE, NSS have the relevant skills and experience to perform the functions of the Committee, at least one of whom will be an experienced practitioner of risk management and quality improvement.
- Employees of the NSS may be appointed to the Committee by the CE, NSS, subject to prior approval of the Chair, where specialist knowledge and expertise relating to operational aspects of the NSS is required.
- When making appointments, the CE, NSS will ensure the Committee comprises a majority of persons independent of the NSS/HSE who have the relevant skills and experience required.
- The Committee will have access to co-opted members as required inclusive of external experts as agreed.
- The committee will have a deputy chair agreed from the Committee members.
- The Committee Chair will be independent i.e., not an employee of the NSS.

Attendees

- Attendees provide the necessary information, input, and contribution to enable the QA Committee members fulfil their duties. Attendees have no voting rights.
- The attendees will consist of:
 - Each of the four programmes Programme Managers or representative
 - Each of the four programmes Clinical Directors
 - At least one NSS, Quality, Safety and Risk (QSR) Department representativeThe CE, NSS will ensure that the Committee is provided with administrative support and with other resources required to enable it to perform its functions.

A quorum will be 50% of the membership plus one attendee.

The current Committee membership and attendees are available from NSS QSR Department.

9.0 Tenure

The members of the Committee will hold office for the period determined by the CE, NSS when appointing that person.

A member of the Committee may resign from the Committee by letter addressed to the CE, NSS and the Chair or may at any time be removed as a member of the Committee by the Chair for stated reasons.

Any external members of the Committee will hold office on such terms and conditions as determined by the CE, NSS with the consent of the Minister for Health and the Minister for Public Expenditure and Reform and in line with the HSE's Code of Practice for Governance of State Bodies (2016).

10.0 Meetings

10.1 Frequency

The Committee will meet as required, determined at its own discretion, but not less than four times a year (to coincide with key dates in the National Screening Services reporting cycle). Additional meetings will be held as the work of the Committee demands.

The CE, NSS may request a meeting if she considers that one is necessary.

The administrative support to the Committee, at the request of the Chair of the Committee, will summon meetings of the Committee. Notice will be given to each member of the venue, time and date of the meeting usually one week in advance.

10.2 Agenda

The agenda will be finalised by the Chair of the Committee and circulated with appropriate briefing papers by the Committee's administrative support to the other members of the Committee (and other attendees, as appropriate) 5 working days in advance of each meeting.

10.3 Attendance

Only members of the Committee will be entitled to attend Committee meetings unless specifically invited.

10.4 Minutes

The Chair of the Committee will ensure that minutes of the meetings held include the names of those present and in attendance at the meeting and of those who are not in attendance at the meetings.

The administrative support to the Committee will circulate the agenda and minutes of previous meetings and relevant reports on the direction of the Chair of the Committee to all members of the Committee and other relevant persons.

The Committee will approve minutes from previous meeting, upon which a copy of the approved minutes signed by the Chair will be published on the NSS website when this facility becomes available.

11.0 Access

The Chair of the Committee or any member, acting with the authority of the Chair, will have the right of access to the CE, NSS and any senior personnel of the Health Service Executive on any matter relating to the business of the Committee.

12.0 Performance Review

The Committee will arrange periodic reviews of its own performance and, at least annually, review its Terms of Reference (ToR) to ensure that it is operating effectively and recommend to the CE, NSS any changes that it considers necessary.