**Appendix 2.**

# Clinical Outcomes & Effectiveness Group (COEG) Terms of Reference

## Introduction

Swansea Bay University Health Board's standing orders provide that *"The board may and, where directed by the Welsh Government must, appoint committees of the health board either to undertake specific functions on the board's behalf or to provide advice and assurance to the board in the exercise of its functions. The board's commitment to openness and transparency in the conduct of all its business extends equally to the work carried out on its behalf by committees".*

In line with standing orders (and the Health Board's scheme of delegation), the board shall annually nominate a committee to be known as the Quality and Safety Committee. This committee's focus is on all aspects aimed at ensuring the quality and safety of healthcare, including activities traditionally referred to as "clinical governance".

The Clinical Outcomes & Effectiveness Group (COEG) is a sub-committee to the Quality & Safety Governance Group, which feeds into the Quality and Safety Committee. The detailed terms of reference and operating arrangements in respect of this committee are set out below.

## Purpose

The purpose of the Clinical Outcomes & Effectiveness Group (COEG) is to:

- Provide assurance to the Quality & Safety Committee, via the Quality & Safety Governance Group, that there are appropriate systems in place for the development and monitoring of policy and standards relating to
    - National and Local Clinical Audits
    - Mortality Reviews
    - NICE Guidance (as it applies in Wales)
    - Health Technology Wales (HTW) reports
- The committee will identify, manage and escalate risks to the Quality and Safety Committee via the Quality & Safety Governance Group, as identified.

## Delegated Powers

The Clinical Outcomes & Effectiveness Group (COEG) will, in respect of its assurance role, operate as necessary to ensure that it is confident that arrangements for clinical audits, mortality reviews, NICE guidance and HTW reports are operating effectively to ensure the provision of high quality, safe healthcare and services across the whole of the health board.

## Objectives

To achieve this, the Clinical Outcomes & Effectiveness Group (COEG) programme of work will be designed to ensure that:

1. **Mandatory National Clinical Audits**
   **The Clinical Outcomes & Effectiveness Group (COEG) will**
   **Receive** the NHS Wales National Clinical Audit **and** Outcome Review (NCA&OR) Annual Plan,
   a. **Communicate** to all delivery units those audits the Health Board will participate in in the next audit year
   b. **Agree** a single named clinical lead for each audit at local health board level who will be responsible for coordinating any responses
   c. **Ensure** that any required responses back to Welsh Government regarding National Clinical Audits are coordinated and appropriate
   d. **Ensure** that Delivery Unit clinical and senior management teams have, with respect to the published reports and online data relating to the NCA&OR audits
      i. reviewed the findings
      ii. considered the implications for their service (including a risk assessment)
      iii. set out improvement actions
      iv. Identify actions in their unit IMTP process to address any gaps highlighted.
   e. **Scrutinise** the clinical outcome data arising from national audits
   f. **Monitor** progress against the agreed improvement actions.
   g. **Note** ad hoc responses provided by the Executive Medical Director on behalf of the Health Board to Welsh Government and national audit programmes
   h. **Provide assurance** to the Quality & Safety Governance Group that quality and service improvements in response to NCA&OR audit reports have been identified and progress is being monitored effectively

2. **Mortality data**
   **The Clinical Outcomes & Effectiveness Group (COEG) will**
   a. **Ensure** that the Health Board's mortality review process is fully implemented and meets the requirements set by NHS Wales and the lead Medical Examiner for Wales from 1st April 2021.
   b. **Ensure** that Delivery Unit clinical and senior management teams have, with respect to mortality review processes,
      i. reviewed any findings
      ii. considered the implications for their service (including a risk assessment)
      iii. set out improvement actions

iv. Identify actions in their unit IMTP process to address any gaps highlighted.

c. **Scrutinise** the trends arising from mortality reviews and mortality statistics
d. **Monitor** progress against the agreed improvement actions.
e. **Provide assurance to the Quality & Safety Group**, that all deaths (from April 1st 2021) are being reviewed and that lessons learned from these reviews are being used to inform Health Board and national improvement programmes

3.**NICE Guidance**

**The Clinical Outcomes & Effectiveness Group (COEG) will**

a. **Receive publications from NICE, including guidance, guidelines, quality standards and pathways (but NOT when publications relates specifically to medicines, which should be addressed by the Medicines Management Strategy Board)**
b. **Ensure** that the Health Board has signed up as a NICE stakeholder
c. **Ensure** that there is a Health Board process for providing comment to contribute to NICE guideline development
d. **Agree** a single named clinical lead for each NICE guidance, at health board level, who will be responsible for coordinating responses
e. **Oversee** the systems and processes for dissemination of NICE guidance
f. **Ensure** that Delivery Unit clinical and senior management teams have, with respect to NICE guidance,
    i. reviewed the NICE guidance
    ii. considered the implications for their service (including a risk assessment)
    iii. set out improvement actions
    iv. Identify actions in their unit IMTP process to address any gaps highlighted.
g. **Provide assurance** to Welsh Government that NICE guidelines have been considered, if requested

**4.Health Technology Wales (HTW)**

**The Clinical Outcomes & Effectiveness Group (COEG) will**

a. **Receive** publications from Health Technology Wales, which may include, but is not limited to, medical devices, surgical procedures, psychological therapies, tele-monitoring or rehabilitation
b. **Agree** a single named clinical lead or established group for each Health Technology Wales guidance, at health board level, that will be responsible for coordinating responses.
c. **Oversee** the systems and processes for dissemination of Health Technology Wales publications
d. **Ensure** that Delivery Unit clinical and senior management teams have, with respect to Health Technology Wales,
    i. reviewed the HTW guidance

ii. considered the implications for their service (including a risk assessment)
iii. set out improvement actions
iv. Identify actions in their unit IMTP process to address any gaps highlighted.

e. **Provide assurance** to Welsh Government that HTW guidance has been considered, if requested

## Authority

The group is authorised by the Quality & Safety Governance Group to investigate or have investigated any activity within its terms of reference. In doing so, COEG shall have the right to inspect any records or documents of the Health Board relevant to the COEG's remit and ensuring patient/client and staff confidentiality, as appropriate. It may seek any relevant information from any:

- employee (and all employees are directed to cooperate with any reasonable request made by COEG); and
- other committee, sub-committee or group set up by the board to assist in the delivery of its functions.

COEG is authorised by the board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience and expertise if it considers it necessary, in accordance with the board's procurement, budgetary and other requirements.

## Access

The chair of COEG shall have reasonable access to executive directors and other relevant senior staff.

## Sub-Committees

COEG may, subject to the approval of the health board, establish sub-committees or task and finish groups to carry out on its behalf, specific aspects of COEG business.

## Membership

Chairperson- Interim Deputy Medical Director, or AMD for Quality & Safety

Member- All Unit Medical Directors

Associate Medical Directors for

- Research
- Education & Training

- Quality & Safety
- Digital
- Transformation
- Innovation
- Non-COVID-19 Services

Executive Medical Directorate Manager

Clinical Audit Manager (Executive Medical Directorate)

Head of Quality & Safety (Corporate Nursing Directorate)

Director of Public Health

Clinical Director of Pharmacy

Assistant Director of Therapies & Health Sciences

Head of Information Services

Secretary- Executive Medical Directorate

If a member is unable to attend the meeting, a deputy may attend. However, the deputy must have sufficient authority to make decisions on behalf of the usual member.

The chair may extend invitations to attend COEG meetings as required to the following:

- Any persons identified as having a role within clinical audit, mortality reviews, NICE Guidance and assessment of health technologies,
- Anyone from within or outside the organisation who the committee considers should attend, taking account of the matters under consideration at each meeting.

## Clinical Outcomes & Effectiveness Group (COEG) Meetings

Meetings shall be held no less than quarterly and otherwise as the chair of the committee deems necessary.

At least five members must be present to ensure the quorum of the committee and must include the following:

- The COEG chair or vice-chair.
- Four Unit Medical Directors or their deputies

## Reporting and Assurance Arrangements

The Clinical Outcomes & Effectiveness Group (COEG) will report directly into the Quality & Safety Governance Group. The minutes of the Clinical Outcomes &

Effectiveness Group (COEG) will be submitted to the Quality & Safety Governance Group.

The committee chair shall:

- bring to the Quality & Safety Governance Group specific attention to any significant matters under consideration by the committee;
- ensure appropriate escalation arrangements are in place to alert the health board chair, chief executive or chairs of other relevant committees of any urgent/critical matters that may compromise patient care and affect the operation and/or reputation of the health board.

## Applicability of Standing Orders to COEG Business

The requirements for the conduct of business as set out in the health board's standing orders are equally applicable to the operation of the Clinical Outcomes & Effectiveness Group (COEG), except in the following areas:

- quorum
- notice of meetings
- notifying the public of meetings
- admission of the public, the press and other observers
- paper circulation.

## Review

These terms of reference and operating arrangements shall be reviewed annually by the Clinical Outcomes & Effectiveness Group (COEG):