

Terms of Reference

<p>Function</p>	<p>To ensure that there is a culture of continuous, positive improvement to patient/user and carer experiences and that this remains a core to the Trust's business.</p>
<p>Purpose</p>	<p>The PPVP will involve patients in discussions about the range and quality of services provided by the Trust with the aim of promoting the proactive engagement of patients and local representative groups. Promote patient's culture outside the group.</p> <p>To promote a culture of Patient experience in North West Anglia NHS Foundation Trust and support Staff engagement.</p> <p>To engage patients and the public, at the individual and community level, in shaping local Trust services as well as their own care.</p> <p>To engage with our strategic partners at an organisational level such as other NHS organisations, local government, third sector and provide providers of health and social care.</p> <p>To ensure that the Trust continues to fulfil any requirements as determined by the Care Quality Commission and other regulators.</p> <p>The PPVP will (this is not an exhaustive list):</p> <ul style="list-style-type: none"> • Receive regular or exceptional reports and surveys received from the directorates, ensuring that patient/user experience is part of their governance agenda and that actual improvements are achieved and sustained • Monitor progress on Trust-wide initiatives • Agree indicators for measuring patients' experiences • Develop standards for robust, high-quality data collection and monitor these • Review complaints, critical comments (eg PALS feedback) and compliments • Review internal benchmarks, e.g. comparisons between departments /wards/directorates • Create and Review action plans and outcomes • Commission quality improvement initiatives from Directorate Boards and Service Groups • Provide regular progress reports to Board • Provide / commission support in response to barriers identified by Directorate leads.

	<ul style="list-style-type: none"> • Consider national and local patient/user surveys – ensuring that action plans are in place and monitored and that appropriate progress is achieved. Implementing additional methods of seeking patient/user feedback as required • Consider external reviews in relation to patient/user experience conducted by other bodies • Review information received from focus groups and user groups <p>The PPVP will listen to the views of and involve our key stakeholder members – Health Watch, patient/user representatives – to consider them as a critical friend and to explore ways in which the Trust can respond positively to their views</p> <p>Members will adhere to the committee members’ purpose and behaviour built around the Trust board’s vision, organisational values and personal responsibility framework Appendices 1 & 2.</p>
Level of Authority	<p>The PPVP does not have statutory delegated authority.</p> <p>The PPVP has been authorised by the Trust board to investigate any activity within the Terms of Reference. It may seek information if it requires from any employee and all employees are to be directed to co-operate with any request made by the group.</p> <p>The PPVP can seek external advice from any source necessary taking into consideration financial constraints and guidelines of the trust.</p> <p>The PPVP is authorised to create sub groups, working groups and workshops when necessary to fulfil its responsibilities within the Terms of Reference.</p>
Level of Financial Authority	None
Policy Responsibility	Assistant Chief Nurse & Head of Patient Experience
Risk Responsibility	Assistant Chief Nurse & Head of Patient Experience
Reports Received	<p>Friends and Family Test results</p> <p>National Surveys</p> <p>Complaints</p> <p>PALS</p> <p>Healthwatch</p> <p>EDI</p> <p>Volunteers</p>

<p>Reports to</p>	<p>QAC</p> <p>Full minutes and action log will be circulated to all Divisional Heads and all members of the Patient Experience Group.</p> <p>The Chair of the group will draw the attention of the Executive Team any issues that require disclosure to the Trust Board.</p> <p>All issues pertaining to Patient or Staff safety will be escalated to the Governance & Risk and or Executive Board.</p> <p>The PPVP is responsible for the implementation, maintenance and monitoring of the Trust documents and procedures at all times:</p> <p>The PPVP must, at all times, act in a way that is compliant with the Equality Act 2010 and the obligations under the PSED to:</p> <p>(a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under the Equality Act 2010;</p> <p>(b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;</p> <p>(c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.</p>
<p>Links to Other Committees</p>	<p>Governance & Risk and or Executive Board.</p>
<p>Status</p>	
<p>Frequency and Duration</p>	<p>The PPVP will meet at least 6 times per year.</p> <p>Additional meetings may be held on agreement with the Chair of the Group.</p>
<p>Minimum Required Attendance</p>	<p>The meeting for decision making purposes will be quorate if at least six members are present, one of which must be the Chair or Head of Patient Experience and to at least four members of external organisations or lay members.</p> <p>Where the group is not quorate the meeting can still go ahead however no decisions will be made.</p> <p>The PPVP has joint and collective responsibility for agreeing ALL decisions. Decisions shall be reached by consensus where possible, and where there is not a unanimous agreement a vote shall be taken and result recorded. The Chair shall have the casting vote where applicable.</p>

	<p>In the event of an urgent decision being required between meetings on any matter within the Terms of Reference of the PPVP, the Chair may take 'chairs action'. The action will be reported to the next meeting and recorded in the minutes/notes.</p> <p>The PPVP will be chaired by the appointed Chair and in their absence the Vice Chair or Head of Patient Experience.</p> <p>It is intended that the membership be a diverse group of individuals and organisations who are representative of the local community.</p> <p>Attendance at meetings will be monitored; members are required to appoint appropriate deputies to attend on their behalf if they cannot attend. The appropriate deputy should, as much as possible always be the same person and be prepared to make an informed contribution to the committee.</p> <p>All substantive members must attend at least 4 of the 6 Patient Experience Group meetings in any one year and have representation by their appropriate deputies at the meetings that they cannot attend.</p> <p>Sub-committees, working groups or workshops may be established to progress specific projects to improve patient experience or to meet specific guidelines or standards.</p> <p>All Group members must declare any conflict of interests, should they arise, and exclude themselves from the meeting for the duration of that specific item.</p> <p>Membership will be approved by Trust senior management following an 'expression of interest' application.</p>
Chair	Assistant Chief Nurse
Vice Chair	Head of Patient Experience
Standing Agenda Items	<ul style="list-style-type: none"> • Assistant Chief Nurse, Head of Patient Experience, Complaints, PALS and Healthwatch updates • Patient Experience Groups Project Updates
Minute-taker	PA to Assistant Chief Nurse
Archive responsibility	PA to Assistant Chief Nurse
Quorum	At least six members to be present, one of which must be the Chair or Head of Patient Experience and at least four members of external organisations or lay members

Process for Compliance with ToRs	Assistant Chief Nurse and Head of Patient Experience to review 2 yearly
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Agreed date: November 2020

Endorsed by: NMAG

Date of endorsement: March 2021

Date of review: March 2021

Date of expiry: March 2023

Membership:

Chair
Vice-chair

Assistant Chief Nurse
Public Members
Head of Patient Experience
Patient Experience Manager
Volunteer Services Manager
Equality and Diversity Lead
Matron (Peterborough/Stamford and Hinchingsbrooke)
Healthwatch

By invite: CEO twice yearly
Chaplaincy
Disability Nurse
Public Governor
Other invites on ad-hoc basis as required by the business of the PEG

Corresponding Members: In attendance as required