



GIG
CYMRU
NHS
WALES

Cyd-bwyllgor
Comisiynu
Joint Commissioning
Committee

QUALITY SAFETY AND OUTCOMES SUB- COMMITTEE (QSOC)

Terms of Reference & Operating Arrangements
(Schedule 3.1 of the Standing Orders)

Document Author:	Committee Secretary
Lead Director	Director of Nursing and Quality
Endorsed By	Joint Commissioning Committee 17 March 2026
Approved By	Health Boards – May/June 2026
Issue Date	26 May 2026
Review Date	March 2027
Version	4

Contents

1.	Introduction & Constitution.....	3
2.	Purpose	3
3.	Scope and Duties.....	4
4.	Membership.....	5
5	Quorum & Attendance.....	6
6	Meeting Secretariat	7
7	Frequency of Meetings	7
8	Withdrawal of Individuals in Attendance	7
9	Circulation of Papers.....	7
10	Access.....	7
11	Accountability, Responsibility & Authority.....	8
12	Reporting.....	11
13	Applicability of Standing Orders to Sub-Committee Business.....	13
14	Chairs Action on Urgent Matters	13
15	In Committee (Private Meeting).....	13
16	Review.....	13

Version Control

Version	Issued To	Date	Outcome	Next Review Date
Version 1	Health Boards	17 September 2024	Approved at LHB September Board meetings	1 June 2025
Version 2	NWJCC Joint Commissioning Committee (JCC)	21 January 2025	Endorsed	12 January 2025
Version 3	Health Boards	21 January 2025	Approved at LHB Board meetings – with staff side rep removed.	12 January 2025
Version 3.1	QSOC	23 February 2026	Endorsed at QSOC subject to minor amendments to paragraph 11.2	-
Version 3.2	JCC	17 March 2026	Endorsed	March 2027
Version 4	Health Boards	May 2026	Approved	March 2027

Sub-Committee Arrangements:

This schedule forms part of and shall have effect as if incorporated in the NHS Wales Joint Commissioning Committee Standing Orders.

1. Introduction & Constitution

- 1.1 In accordance with NHS Wales Joint Commissioning Committee (NWJCC) Standing Order 5.5, the NWJCC Joint Committee (the JC) may and, where directed by the Local Health Board (LHB) Boards jointly, or the Welsh Ministers must, appoint joint sub-committees of the Joint Committee either to undertake specific functions on the Joint Committee's behalf or to provide advice and assurance to others (whether directly to the Joint Committee or on behalf of the Joint Committee to each LHB Board and/or its other committees). The Joint Committee shall determine, for agreement by the LHBs, a joint sub-committee structure that meets its own advisory and assurance needs and in doing so the needs of the constituent LHBs.
- 1.2 In accordance with Standing Orders (SOs) (and the NWJCC Scheme of Delegation), the JC shall nominate annually a sub-committee to be known as the **Quality, Safety and Outcomes Sub-Committee**. The detailed terms of reference and operating arrangements set by the JC in respect of this sub-committee are set out below.

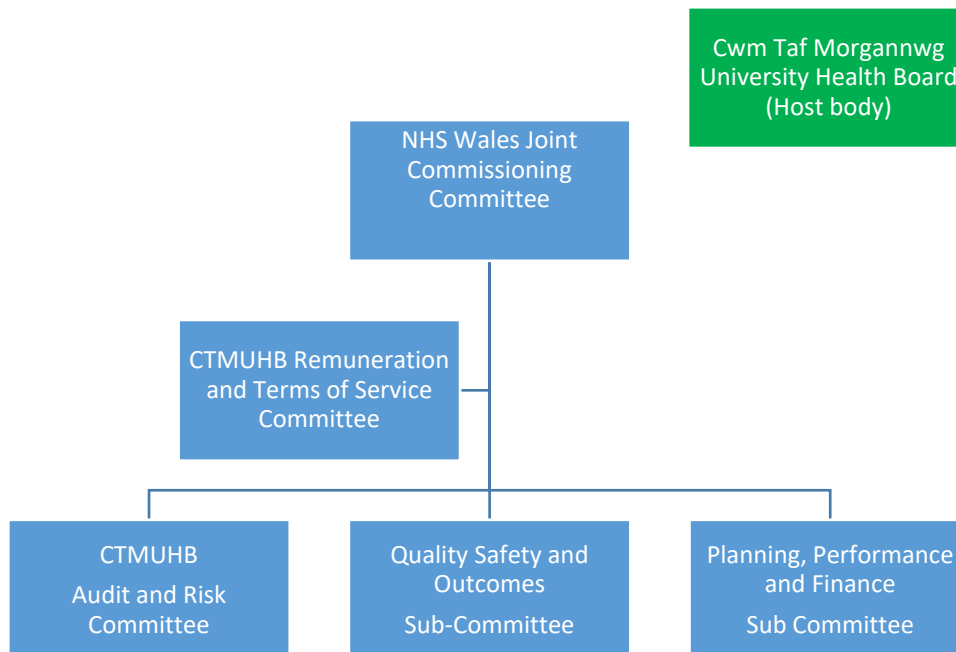
2. Purpose

- 2.1 The purpose of the Quality, Safety and Outcomes Sub-Committee "the Sub-Committee" is to be assured that the JC is commissioning appropriate, high quality and safe services from providers (Local Health boards, Trusts and private sector providers) on behalf of LHBs in Wales.

This will be achieved by:

- Providing scrutiny and assurance to the Joint Committee for the Quality Safety and Outcomes of services commissioned from providers including local health boards, NHS Trusts and private providers who are accountable for the provision of safe, quality services
- Reporting to and providing advice to the JC, including escalation of issues that require urgent consideration and action by the JC
- Addressing concerns delegated by the JC ensuring that individual LHB Quality and Patient Safety Committees are informed of any issues relating to their population recognising that concerns of the services commissioned may impact on primary and secondary and vice versa (whole pathway) and contribute to the achievement of the Duty of Candour; and
- Providing assurance to the JC in relation to improving the experience of patients, carers, citizens and those that come into contact with the services commissioned by the NWJCC.

Figure 1 – NWJCC Sub-Committee Structure



3. Scope and Duties

3.1 The Sub-Committee will provide scrutiny and assurance to the JC and LHBs in relation to the duties below:

- Monitor and support the development and implementation of the Commissioning Assurance Framework ensuring that there is continuous improvement in the commissioning of safe, effective and sustainable services for the people of Wales
- Consider the quality, patient safety and outcome implications arising from the development of commissioning strategies, including developments outlined in the agreed NWJCC Integrated Medium Term Plan (IMTP)
- Ensure that all aspects of commissioning activity, through regular reporting to the sub-committee consider quality, safety and outcomes as part of the commissioning of services
- Receive, when required, items for urgent consideration and escalation
- Ensure a robust process is in place for the development and approval of evidence-based service specifications, focussed on quality and safety of service provision, for all services commissioned by the NWJCC
- Have responsibility for the commissioning risks designated to the Sub-Committee for monitoring ensuring that quality, safety and outcomes of services commissioned are a priority for the organisation

- Monitor and scrutinise risk management and assurance arrangements for the risks designated to the Sub-Committee for monitoring from the perspective of clinical and patient safety risks
- receive assurance from provider organisations that concerns management arrangements are robust and reported through the appropriate governance routes; and
- Receive assurance that patient safety incidents, complaints and claims (relating to the services commissioned by the JCC) are routinely monitored and are considered a critical part of the evaluation of services in the JCC commissioning cycle.

Sub-Committee Programme of work

- 3.2 Each year the JC will determine the Sub-Committee’s priorities for its annual programme of work, based on the Joint Committee’s Commissioning Assurance Framework (once approved) and Organisational Risk Register. This approach will ensure that the Sub-Committee’s focus is directed to the areas of greatest assurance needs. This will therefore mean that these Terms of Reference are provided as a framework for the Sub-Committee’s annual programme of work and is not an exhaustive list for full coverage. This approach recognises that the Sub-Committee’s programme of work will be dynamic and flexible to meet the needs of the JC throughout the year.
- 3.3 The Sub-Committee will provide onward assurance to the JC on all matters relating to its annual programme of work, as delegated.

4. Membership

Members

- 4.1 The Membership of the QS&O Sub-Committee is as follows:

Chair	Lay (Independent) Member of the Joint Committee
Vice Chair	Lay (Independent) Member of the Joint Committee
Member	One further Lay (Independent) Member of the Joint Committee
Member	Two LHB Chief Executive representatives, who shall alternate attendance, or designated nominated deputy who must be an Executive Director from a health board (and would be fully briefed on the issues to be discussed)

- 4.2 The membership of the Sub-Committee shall be determined by the JC, based on the recommendation of the Chair of the JC and lay members, taking account of the balance of skills and expertise necessary to deliver the subcommittee’s remit and subject to any specific requirements or directions made by Ministers or the Welsh Government.
- 4.3 The Membership will be reviewed annually.

Support to Sub-Committee Members

- 4.4 The Committee Secretary, on behalf of the Sub-Committee Chair, shall:
- Arrange the provision of advice and support to Sub-Committee members on any aspect related to the conduct of their role, and
 - Co-ordinate the provision of a programme of organisational development for Sub-Committee members as part of the overall JCCs Organisational Development programme.

4.5 In Attendance

JCC Director of Nursing and Quality (Lead Director for the Committee)
JCC Medical Director
JCC Director of Commissioning for Specialised Services
JCC Director of Commissioning for Ambulance and 111
JCC Director of Commissioning for Mental Health, Learning Disabilities and Vulnerable Groups (MH, LD & VG)
Committee Secretary or representative who will routinely attend meetings ensuring governance support and advice is available to the Committee Chair
Llais Representative

Directors may on occasion nominate a suitably senior deputy to attend the Sub-Committee on their behalf but should ensure that they are fully aware and briefed on the issues to be discussed.

By Invitation:

- 4.6 The Chief Commissioner, and other directors / senior managers may be invited to attend when the Sub-Committee is discussing areas of risk, audit/review findings or matters that are the responsibility of that Director / member of staff.
- 4.7 The Sub-Committee may also co-opt additional independent external members from outside the organisation to provide specialist skills, knowledge and experience.

Member Appointments

- 4.8 The membership of the Sub-Committee shall be determined by the Chair of the JC, taking account of the balance of skills and expertise necessary to deliver the committee's remit and subject to any specific requirements or directions made by the Welsh Government.

5 Quorum & Attendance

- 5.1 A quorum shall be at least two members comprising of two Lay (Independent) Members.
- 5.2 For effective governance, at least two JCC Team directors, one of which must be a Clinical Director should be in attendance at the meeting.

6 Meeting Secretariat

- 6.1 The Committee Secretary will determine the secretarial and support arrangements for the Sub-Committee.

7 Frequency of Meetings

- 7.1 The Meetings shall meet no less than 6 times a year, and otherwise as deemed necessary by the Chair of the Joint Committee.
- 7.2 Additional meetings may be called as appropriate with agreement of the Sub-Committee Chair.
- 7.3 Additional meetings may be held with the chairs of the LHBs Quality and Safety Committees where there is requirement.
- 7.4 Members will be expected to attend a minimum of 75% of all meetings. Attendance will be monitored and reported to the Joint Committee through the Sub-Committee's Annual Report.
- 7.5 The Sub-Committee will arrange meetings and align with key statutory requirements during the year consistent with the Joint Committee's annual plan of Committee Business.

8 Withdrawal of Individuals in Attendance

- 8.1 The Sub-Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of specific matters.

9 Circulation of Papers

- 9.1 All papers will be distributed at least 5 clear days in advance of the meeting.
- 9.2 The Committee Secretary will ensure that the draft minutes will be provided to the Sub-Committee Chair within ten working days following the meeting.
- 9.3 The Committee Secretary will ensure that a Sub-Committee highlight report is provided for presentation by the Sub-Committee Chair to the next Joint Committee meeting.
- 9.4 The Sub-Committee highlight report will also be shared with members and LHB Directors of Corporate Governance / Board Secretaries.

10 Access

- 10.1 The Chair of the Quality, Safety and Outcomes Sub-Committee shall work closely with the Director of Nursing and Quality and have reasonable access

to the NWJCC Directors and other relevant senior staff within the NWJCC Team.

11 Accountability, Responsibility & Authority

- 11.1 Although LHBs have delegated authority to the JC and subsequently to this Sub-Committee for the exercise of certain functions as set out within these terms of reference, each LHB retains overall responsibility and accountability for ensuring the quality and safety of healthcare for their citizens through the effective governance of their organisation.
- 11.2 This Sub-Committee is responsible for providing scrutiny and assurance to the JC that Quality, Safety and Outcomes are being managed appropriately within the services commissioned by the NWJCC.

Authority

- 11.3 The Sub-Committee is authorised by the JC to investigate any activity within its terms of reference.
- 11.4 The Sub-Committee is authorised by the JC to obtain outside legal or other independent professional and clinical advice and to secure the attendance of relevant external experts if it considers it necessary to support the Sub-Committee in the discharge of its duties. Such advice will be sought in accordance with the NWJCCs procurement, budgetary and other procedural and policy requirements.
- 11.5 The Sub-Committee will ensure that it is aware of and receives relevant reports on the activities and reports of external independent regulators and agencies, such as Healthcare Inspectorate Wales, Care Quality Commission, National Audit Office and Audit Wales, that relate to the commissioning of services.

Sub Groups

- 11.6 The Sub-Committee may, subject to the approval of the JC establish sub-groups or task and finish groups to carry out on its behalf specific aspects of Sub-Committee business.

Strategy

- 11.7 Oversee and monitor the development and implementation of the NWJCCs Strategies for patient quality, safety and outcomes:
- **Patient Quality, Safety and Outcomes**
 - Provide assurance to JC on implementation of the Quality aspects within the Integrated Medium-Term Plan (IMTP)
 - Provide support for the development and implementation of the Commissioning Assurance Framework and to subsequently provide assurance to the JC in relation to the Commissioning Assurance Framework.

- Contribute to and oversee the development of effectiveness of the Joint Committee's Annual Quality Statement and the Annual Governance Statement
- Monitor quality via the Quality Dashboard.
- Monitor and receive reports on the organisation's progress with embedding and implementing the Health & Care Quality Standards
- Ensure arrangements are in place to review and act on clinical audit activity which responds to national and local priorities applicable to the business and services commissioned by the JCC as part of the commissioning cycle.
- Receive recommendations made by internal and external review bodies, ensuring where appropriate, that action is taken in response.

Corporate Organisational Risk

- 11.8 Regularly review and provide assurance to the JC on the risks included on the organisational Risk Register and assigned to the Sub-Committee by the Joint Committee.

Quality Improvement activities

- 11.9 The Sub-Committee will:
- Provide scrutiny and assurance to the Joint Committee that priorities relating to quality, safety and outcomes are progressing.

11.10 Patient Experience

- Receive and review progress reports relating to Patient Experience and the emerging themes and trends identified in the performance management of providers and the NWJCC's escalation processes.
- Ensure that the JCC engages with and co-operates with representatives of Llais as appropriate on ongoing patient engagement or major service change. (S.O. 7.7)

11.11 Concerns

- Receive, reports on Concerns relating to the services commissioned by the NWJCC (reported patient safety incidents, complaints, compliments, clinical negligence claims and inquests) including reporting trends, with emphasis placed on ensuring that lessons are learnt and are built into the evaluation of services as part of the NWJCC's commissioning cycles.
- Receive assurance of effective and timely management of concerns (including incidents, complaints & claims) relating to commissioned services from across NHS Wales, in accordance with the legislation under the NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 and the Health and Social Care (Quality and Engagement) (Wales) Act 2020.
- Receive assurance of effective and timely management of concerns (including incidents, complaints & claims) contributing to LHB

approaches providing information related to the services commissioned by the NWJCC to support them in complying with their own legal and contractual requirements.

Delegated Powers

11.12 Although the JC has delegated authority to the Sub-Committee for the exercise of certain functions as set out within these terms of reference, the JC retains overall responsibility and accountability for ensuring the quality and safety of the services it commissions. Notwithstanding this, each LHB retains overall responsibility and accountability for ensuring the quality and safety of healthcare for their citizens through the effective governance of their organisation.

11.13 This Sub-Committee is responsible for providing scrutiny and assurance to the JC that Quality, Safety and Outcomes are being managed appropriately within the evaluation of services as part of the NWJCC's commissioning cycles.

The Sub-Committee will:

- Support the development of and seek assurance that the NWJCC's **Commissioning Assurance Framework** is appropriate, and aligned to the Duty of Quality ensuring that the duty is embedded in practice.
- Seek assurance that arrangements for capturing the **experience of patients, citizens and carers** are sufficient, effective and robust, including:
 - Seeking assurance on the delivery of the NWJCC's Patient Experience Plan; and
 - Contributing information from a commissioning perspective to LHBs in their implementation of Putting Things Right regulations (to include patient safety incidents, complaints, compliments, clinical negligence claims and inquests) reporting trends, with particular emphasis on ensuring that lessons are learned through the commissioned service lens.
- Seek assurance that arrangements for the **provision of high quality, safe and effective healthcare** are sufficient, effective and robust, including:
 - the arrangements in place to ensure efficient, effective, timely, dignified and safe delivery of commissioned services
 - the arrangements in place to undertake, review and act on clinical audit activity which responds to national and local priorities
 - the recommendations made by internal and external review bodies, ensuring where appropriate, that action is taken in response
 - the development of the NWJCC's Annual Quality Statement including annual quality priorities; and
 - performance against key quality focussed performance indicators and metrics.

- Seek assurance on the arrangements in place to support **improvement and innovation**, including:
 - an overview of the research and development activity for commissioning within the organisation
 - alignment of the commissioning of services with the national objectives published by Health and Care Research Wales (HCRW);
 - an overview of the quality improvement activity for commissioned services within the organisation.
- Seek assurance that arrangements for commissioned services are **compliant with mental health legislation** are sufficient, effective and robust, including:
 - the Mental Health Act 1983
 - Mental Health Act Code of Practice for Wales and associated regulations (2016);
 - the Mental Capacity Act 2005 Code of Practice and associated regulations;
 - the Mental Capacity Act 2005 Deprivation of Liberty Safeguards Code of Practice and associated regulations; and
 - the Mental Health Measure (Wales) 2010.

11.14 The Sub-Committee will seek assurances on the management of strategic risks delegated to the Sub-Committee by the Joint Committee, from the NWJCC Organisational Risk Register.

Dealing with Members interests during meetings

11.15 Declarations of interest will be a standing agenda item for all meetings.

11.16 Members must declare if they have any personal or business pecuniary interests, direct or indirect, in any contract, proposed contract, or other matter that is the subject of consideration on any item on the agenda for a meeting.

11.17 Interests declared at the start of, or during a meeting will be managed in accordance with section 8.2 of the NWJCC Standing Orders.

12 Reporting

12.1 The Sub-Committee Chair shall:

- Report formally, regularly and on a timely basis to the JC on the Committee's activities. This includes:
 - Assurance that Quality, Safety and Outcomes are being managed appropriately
 - oral updates on recent activity
 - submission of written Sub-Committee highlight reports throughout the year
 - to receive annual reports, which will incorporate key information on quality, safety and outcomes.

- Bring to the JC’s specific attention any significant matters under consideration by the Committee; and
 - Ensure appropriate escalation arrangements are in place to alert the JC Chair, Chief Commissioner, LHB Chief Executive or Chairs of other relevant Sub-Committees of any urgent/critical matters that may affect the operation and/or reputation of the NWJCC and LHBs.
- 12.2 The Sub-Committee shall provide a written, annual report to the JC on its work in support of the Annual Governance Statement specifically commenting on the adequacy of the assurance arrangements, the extent to which risk management is comprehensively embedded throughout the organisation, the integration of governance arrangements and the appropriateness of self-assessment activity against relevant standards. The report will also record the results of the Sub-Committees self-assessment and evaluation.
- 12.3 The JC may also require the Sub-Committee Chair to report upon the activities at public meetings or to community partners and other stakeholders, where this is considered appropriate e.g. where the Sub-Committee’s assurance role relates to a joint or shared responsibility.
- 12.4 The NWJCC Committee Secretary, on behalf of the JC, shall oversee a process of regular and rigorous self-assessment and evaluation of the Sub-Committee’s performance and operation.

Relationship with the Joint Committee and its Sub-Committees / Groups

- 12.5 The Sub-Committee is directly accountable to the JC for its performance in exercising the functions set out in these Terms of Reference.
- 12.6 The Sub-Committee, through the Sub-Committee Chair and members, shall work closely with the NWJCC’s other Sub- Committees to provide advice and assurance to the JC through the:
- joint planning and co-ordination of JC business; and
 - sharing of information.
- 12.7 In doing so, contributing to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the NWJCCs overall risk and assurance arrangements.
- 12.8 The Sub-Committee, through its Chair and members, shall work closely with LHB Quality and Safety Committees to ensure that LHB Boards are informed of any issues relating to their population, recognising that concerns of the services commissioned by the JCC may impact on primary and secondary services and vice versa (i.e. the whole pathway). The Sub-Committee shall embed the JCC’s standards, priorities and requirements e.g. equality and human rights, through the conduct of its business.

- 12.9 The Sub-Committee shall embed the organisational values and strategic objectives through the conduct of its business, and in doing and transacting its business shall seek assurance that adequate consideration has been given to the sustainable development principle and in meeting the requirements of the Well-Being of Future Generations Act.

13 Applicability of Standing Orders to Sub-Committee Business

- 13.1 The requirements for the conduct of business as set out in the NWJCC Standing Orders are equally applicable to the operation of the Sub-Committee, except in the area relating to the quorum.
- 13.2 This Sub-Committee is a scrutiny and assurance sub-committee and therefore where a decision is required the matter will be referred to the NWJCC Senior Leadership Team or JC, as appropriate.

14 Chairs Action on Urgent Matters

- 14.1 There may, occasionally, be circumstances where decisions which normally be made by the Sub-Committee need to be taken between scheduled meetings. In these circumstances, the Sub-Committee Chair, supported by the NWJCC Committee Secretary as appropriate, may deal with the matter on behalf of the Sub Committee, after first consulting with one other Lay (Independent) Member. The Committee Secretary must ensure that any such action is formally recorded and reported to the next meeting of the Sub-Committee for consideration and ratification.
- 14.2 Chair's urgent action may not be taken where the Chair has a personal or business interest in the urgent matter requiring decision.

15 In Committee (Private Meeting)

- 15.1 The Sub-Committee can operate with an In Committee function to receive updates on the management of sensitive and/or confidential information.

16 Review

- 16.1 These Terms of Reference shall be adopted by the Sub-Committee at its first meeting and subject to review at least on an annual basis thereafter, with endorsement by the JC for onward approval by Health Boards.