

NENC Integrated Care System

Safeguarding Health Executive Group: Children, Adults and Cared for Children Subcommittee

Terms of Reference

Table of Contents

1.	Establishment	3
2.	Terms of reference:	3
3.	Purpose	3
4.	Roles and responsibilities	3
	4.1 Duties	3
	4.2 Authority	4
	4.3 Accountability and reporting	5
5.	Committee meetings	6
	5.1 Composition and quoracy	6
	5.2 Frequency and formats	8
	5.3 Procedures	8
6.	Secretariat and administration	9
Αį	ppendix 1: Approval History	10
Αı	ppendix 2: Review History	10

1. Establishment

The NENC Integrated Care System Safeguarding Health Executive Group: Children, Adults and Care for Children Subcommittee is a Subcommittee established by the ICB Quality and Safety Committee, in accordance with the NHS North East and North Cumbria ICB's (hereafter referred to as the ICB) Scheme of Reservation and Delegation (SoRD) and Constitution.

2. Terms of reference:

Definition of terms: The terms of reference are defined by the ICB.

Amendment: The terms of reference may be amended in accordance with the provisions set out in the Standard Operating Procedure (SOP) (Establishing Subcommittees).

Publication: The terms of reference will be published in the ICB's Governance Handbook which is accessible here:

https://northeastnorthcumbria.nhs.uk/about-us/corporate-information/governance/

3. Purpose

The purpose is of the Subcommittee is to provide assurance and oversight of the ICBs safeguarding legal and statutory duties including cared for and care experienced children and child death and will report into the ICB Quality and Safety Committee

4. Roles and responsibilities

This section describes the Subcommittee's duties, authority, accountability and reporting.

4.1 Duties

The Subcommittee's duties are as follows:

These Terms of Reference describe the role and responsibilities of the Integrated Care System Safeguarding Health Executive Group Subcommittee. The functions of the Subcommittee do not in any respect change current ICB and or provider statutory responsibilities. It is also noted that these Terms of Reference will remain under review as required and in response to Acts or draft legislation where but there is currently no statutory guidance yet published.

The responsibilities of the NENC Integrated Care System Safeguarding Health Executive Group: Children, Adults and Cared for Children Subcommittee:

 To make formal recommendations to the Safeguarding Partnership's / Adult Board's as per Health Governance Structure on future commissioning arrangements for safeguarding, including any proposed changes to delegated decision making.

- To make formal recommendations to the Safeguarding Partnership's / Adult Board's Board, ICB and ICP and local organisations on future provision and delivery of safeguarding services.
- Provide a single strategic oversight body providing assurance to the Safeguarding Partnership's / Adult Board's, ICB and ICP and local organisations on quality, outcomes, finance and performance.
- Be an active voice and partner in shaping the proposal and implementation
 of an overall strategic programme of work to deliver the ambitions, priorities
 and plans for safeguarding (Endorsed with Safeguarding Partnership's /
 Adult Boards).
- To provide Health Executive leadership for safeguarding, facilitating and promoting joint working and best practice within and across the whole North East North Cumbria system.
- To enable the Subcommittee members to provide a strategic link back to the ICB and ICP and local organisations ensuring that the programme has a strong balance between strategic leadership and local system delivery.
- To provide assurance to the Safeguarding Partnership's / Adult Board's, ICB and ICP and local organisations on the discharging of statutory duties in-line with the legislative requirements.
- To make formal recommendations to the ICB and ICP and local organisations on any proposed investments/disinvestments in safeguarding arrangements.
- To seek assurance on safeguarding compliance and delivery and hold the Senior Safeguarding Leadership Group and Collaborative Forums to account on delivering the strategy and priorities agreed by the ICB and Partnership Boards.
- NENC ICB will demonstrate compliance via statutory reporting including:
 - Section 11 audits
 - Safeguarding Commissioner Assurance Toolkit (SCAT)
 - Safeguarding Review Case Tracker
 - CDOP reviews
 - Mandatory training compliance
 - Supervision

In addition it will be the responsibility of each local organisation and ICB/ICP representative to ensure that information and reporting on progress and outcomes is disseminated in line with the agreed arrangements and ICB Governance and Assurance Structure. All parties will ensure relevant wider stakeholder engagement is in place.

Role of members of the NENC Integrated Care System Safeguarding Health Executive Group: Children, Adults and Cared for Children Subcommittee:

- Provide strategic leadership to the programme being open and transparent in the pursuit for system improvement
- To ensure that there is a coordinated programme to progress commissioning for improved quality and outcomes.

4.2 Authority

The Subcommittee is authorised to:		
Investigate	Investigate any activity within its terms of reference.	
Seek information	Seek any information it requires within its remit, from any employee or member of the Board.	
Investigate	Commission reports required to help fulfil its obligations from NECS.	
	Commission reports required to help fulfil its obligations from Audit One or the ICB's external auditors, in consultation with the Chief Finance Officer.	
	Commission other external reports required to help fulfil its obligations, subject to the financial limits of the most senior member of the Subcommittee.	
Obtain advice	Obtain independent professional advice and secure the attendance of advisors with relevant expertise to fulfil its functions. In doing so, the Subcommittee must follow any procedures put in place by the ICB for obtaining professional advice.	
Create Groups	Groups may be established by the Subcommittee, but they have no formal status. They do not have any delegated authority from the Board. Their decision making is restricted to decisions and limits of individuals as set out in the ICB's Financial Limits and Financial Delegations. These may not be aggregated and therefore the limits are those of the most senior member present at any meeting of the group. Groups may be permanent or task and finish groups.	

4.3 Accountability and reporting

The Subcommittee is accountable to its parent committee and reports to its parent committee on how it discharges its responsibilities.

Accountabil	ties Description
Draft minutes	The Subcommittee receives scheduled assurance reports from its established groups.
and reports	The secretary formally records the minutes of each meeting.

Approved minutes will be provided to the parent committee after each meeting, providing assurances on the business considered and escalating any concerns, where necessary.	
Monitor attendance	Attendance is monitored and profiled as part of the agenda at each Subcommittee meeting.
	Members should aim to attend at least 75% of meetings and read all papers beforehand.
Cycle of business	The Subcommittee produces an annual work plan and cycle of business in consultation with its parent committee.
Continuous improveme nt	The Subcommittee utilises a continuous improvement approach in its delegation. Members review the effectiveness of the meeting at each sitting.

5. Committee meetings

This section sets out meeting:

Composition and quoracy

Frequency and formats

Procedures

5.1 Composition and quoracy

This section sets out the meeting composition and quoracy requirements.

Composition/ quoracy	Description of expectations		
Chair	NENC ICB Chief Nurse, AHP and People Officer		
Deputy Chair	Subcommittee members may appoint a vice chair from amongst the members.		
Absence of Chair or Vice Chair	In the absence of the chair, or vice chair, the remaining members present elects one of their number to Chair the meeting.		
Membership	 Members: Chair: NENC ICB Chief Nurse, AHP and People Officer NENC Director of Safeguarding NENC ICB Director of Nursing (North) NENC ICB Director of Nursing (South) NHSE Regional Safeguarding Lead 		

Composition/ quoracy

Description of expectations

- Nominated Designated Nurse (Children/Children in Care)
- Nominated Designated Nurse (Adults)
- Nominated Designated Doctor
- Nominated Head/Director of Midwifery
- Acute/Community Provider Executive Director of Nursing (x1)
- NEAS Director of Nursing and Quality
- NWAS Director of Nursing and Quality
- Mental Health Provider Executive Director of Nursing
- Named GP Safeguarding Lead
- Child death overview panel (CDOP) Chair representative

EDI: When determining the membership of the Subcommittee, consideration will be given to diversity and equality.

Involvement: In determining membership consideration will be given to the need for a patient and public involvement member.

ICS: Membership may be from across the Integrated Care System.

Conflicts: Consideration must be given to material conflicts in the appointment of members.

Attendees and procedure for absence

Only members have the right to attend meetings.

Other attendees: The chair may elect to co-opt additional attendees, where it is in the interests of the activities to do so.

Procedure for absence:

Where a member or any regular attendee of the Subcommittee is unable to attend a meeting, a nominated deputy may be agreed with the chair.

The chair may ask any or all of those who normally attend to withdraw to facilitate open and frank discussion of particular matters.

Quoracy and Procedure for Inquoracy

Threshold: A minimum of half the membership. The subcommittee provides an assurance function and is not decision making.

Absence: Where members are unable to attend, they should agree this with the chair.

Disqualification: If any member of the Subcommittee is disqualified from participating in an item on the agenda, due to a declared conflict of interest, that individual no longer counts towards the quorum.

Inquoracy: If the quorum is not reached, the meeting may proceed if those members attending agree. Any

Composition/ quoracy	Description of expectations	
	recommendations agreed will be captured in the minutes for approval at the next meeting of the sub-committee.	

5.2 Frequency and formats

This section on Subcommittee meetings describes the meeting frequency and formats.

Frequency/ Description	
Meeting	The Subcommittee will meet bi-monthly
frequency	Additional meetings may be convened on an exceptional basis at the discretion of the Subcommittee chair.
	The parent committee chair may ask the Subcommittee to convene further meetings to discuss particular issues on which they want the Subcommittee's advice.
Public vs closed	Where this is warranted by the nature of the business arising, the agenda may be divided into two parts. Part 1 is open to the whole Subcommittee, including invited attendees. Part 2 is a closed session for members only to discuss confidential information.
	External Audit, Internal Audit and Local Counter Fraud representatives will have full and unrestricted rights of access to the Subcommittee.
Virtual In accordance with the Standing Orders, the Subcomm meetings and extra-ordinary meetings In accordance with the Standing Orders, the Subcomm may meet virtually when necessary and members attention using electronic means will be counted towards the queetings	

5.3 Procedures

Procedure	Description of rules and expectations:	
Agenda	The chair is responsible for agreeing the agenda and ensuring matters discussed meet the objectives as set out in these terms of reference.	
	Members are expected to identify agenda items for consideration to the chair and any meeting papers using	

	the prescribed format at least 5 working days before the meeting.
Conflicts of interest	Declarations: All members and those in attendance must declare any actual, potential, or perceived conflicts of interest. This is recorded in the minutes.
	Exclusions: The Subcommittee will follow and apply the ICB's Standards of Business Conduct with regards to the management of conflicts of interest. This means that the chair will consider the exclusion of members and / or attendees from discussion and / or decision-making if individuals have a relevant material or perceived interest in a matter under consideration.
Decision- making	Decisions: Decisions are taken in accordance with the Standing Orders and are arrived at by consensus.
Conduct	The Subcommittee conducts its business in accordance with relevant codes of conduct / good governance practice, including the Nolan principles of public life, the ICB Standards of Business Conduct Policy, and other relevant policies / guidance on good and proper meeting conduct for NHS organisations

6. Secretariat and administration

This section describes the functions of the secretariat whose role is to support the Subcommittee in the following ways:

Functions	Description
Distribute papers	Prepare and distribute the agenda and papers in accordance with the Standing Orders following their agreement by the chair with the support of the relevant executive lead.
Monitor attendance	Monitor the attendance of those invited to each meeting and highlight to the chair those that are not meeting the minimum attendance requirements.
Maintain records	Record conflicts of interest.
Minute Taking	Take good quality minutes and agree them with the chair. Keep a record of matters arising, action points and issues to be carried forward.

Functions	Description	
Support for Chair &	Support the chair in preparing and delivering reports to the parent committee (when required).	
Committee	Take forward action points between meetings and monitor progress against those actions.	
Provide updates	Update the Subcommittee on pertinent issues/ areas of interest/ policy developments.	
Governance advice	Provide easy access to governance advice for Subcommittee members	

Appendix 1: Approval History

Version	Date	Approved by	Status
V1.0	March 2023	Quality and Safety Committee	First Issue
V2.0	12 March 2024	Quality and Safety Committee	Second issue

Appendix 2: Review History

Version	Date	Reviewed by	Changes Required Y/N?	Summary of changes (once changes are approved Appendix 1 should be updated)
V1.0	March 2023	QSC	N	
V2.0	12 March 2024	QSC	Υ	Minor changes to reflect changes to SOP.

Review date: March 2025

Contact: ICB Corporate Governance Team

Document control

The controlled copy of this document is maintained by the governance team in the Governance Handbook, here https://northeastnorthcumbria.nhs.uk/about-us/corporate-information/governance/

Any copies of this document held outside of the Governance Handbook, in whatever format (e.g., paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.