



# National Quality Improvement (including Clinical Audit) Network (N-QI-CAN)

## Terms of Reference, Membership and Governance Arrangements

**v11.4**

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<b>Document History</b>					
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31 <sup>st</sup> May 2018	9	June 2020		Chair N-QI-CAN.	Minor amendments
Jan 2020	10	Jan 2022	March 2020 (in principle – see nature of change)	Chair and general secretary, N-QI-CAN.	Significant update TOR and document to include appendices for role descriptions, policy of interests and sponsorship. Discussed March 2020 and agreed in principle awaiting confirmation of Reporting requirements with NHSE.
Sept 2020	11.1	Jan 2022		Chair and general secretary, N-QI-CAN.	Delay in finalising review due to pandemic. Full document update and amendments relating to clarification of reporting requirements, and general edits following feedback from N-QI-CAN members. Final review September & November 2020.
Nov 2020	11.2& 3	Jan 2021	19th Nov 2020 and 2 <sup>nd</sup> December (in principle) approved shared with network members final comments by 31 <sup>st</sup> December	Chair and general secretary, N-QI-CAN.	For final approval by NQICAN Group members - January 2021. Changes include update to expansion of eligible individuals to apply to officer posts, task finish groups, accountability of officers and role descriptions for Chair and general secretary.

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1	<b>Defining this document</b>
1.1	This document outlines the governance and membership arrangements of the National Quality Improvement (including Clinical Audit) Network (N-QI-CAN).
1.2	It establishes robust governance arrangements for membership, explains the network and individual responsibilities of N-QI-CAN 's officers and members, defines the relationship between N-QI-CAN and other national clinical audit bodies and outlines responsibilities for members regarding our common purpose, work plan, confidentiality, interests, sponsorship and declarations.
2	<b>Purpose of N-QI-CAN</b>
2.1	<p>N-QI-CAN was formed in 2000 under the name 'National Audit and Governance Group'. In 2013 the group was restructured to cover the wider Quality improvement agenda including clinical audit.</p> <p>N-QI-CAN is a non-constituted group (non-legal body with a defined role) of regional networks across England. N-QI-CAN works collaboratively with NHS England and Improvement (NHSE/I), Healthcare Quality Improvement Partnership (HQIP), national clinical audit providers and other quality improvement bodies. N-QI-CAN is a recognised group within health and social care.</p> <p>N-QI-CAN's role is to provide key governance functionality and workstreams as outlined in the N-Q-I-CAN forward plan and agreed with HQIP, NHSE/I. For full details please see the N-QI-CAN forward plan, but this includes improve and develop local clinical audit and make recommendations as a unified voice on quality matters making recommendations to the system.</p> <p>In 2020 N-QI-CAN have undertaken a full governance review and agreed a new common purpose:</p> <p><b>To support our members* to deliver high quality projects that help to improve patient care as part of local programmes.</b></p> <p><i>*Clinical Audit, other Health QI and Clinical Effectiveness Professionals who are members of our regional networks</i></p> <p>To deliver this common purpose a three year forward has also been agreed in 2020 and is available on the NNSF and the N-QI-CAN website.</p> <p>N-QI-CAN's Steering Group is made up of Chairman and General Secretary that oversee the day to day functionality of N-QI-CAN supported by a communications lead. The Chairman and General Secretary posts are elected by vote from core members of N-QI-CAN which should meet quarterly.</p>
2.2	<p>N-QI-CAN itself has no executive authority or statutory responsibilities.</p> <p>Recommendations made by N-QI-CAN are not binding on any other organisation.</p>
2.3	N-QI-CAN is an independent body and is not a direct function of the NHSEI, HQIP or any other similar body. Please see section 14 for details of how we are funded.
2.4	N-QI-CAN's work plan reflects those of NHSEI and HQIP where clinical audit and other

	quality improvement are concerned with N-QI-CAN members continuing to act independently within their N-QI-CAN responsibilities.
2.5	N-QI-CAN will report progress on objectives and workstreams with a quarterly and annual report (including regional network update report) to our network members and will share this in the public domain on our website ( <a href="http://www.nqican.org.uk">www.nqican.org.uk</a> ). The annual report should be finalised and published by the end of September.
3	<b>Our role</b>
3.1	<p>To underpin our common purpose, forward plan and associated work programme - N-QI-CAN leads on the following:</p> <ul style="list-style-type: none"> <li>• Regional network chairs and other responsible officers are provided training, support and leadership to ensure the development of regional networks and support to local clinical audit and other quality improvement development and functionality.</li> <li>• Development and realisation of agreed governance functionality and workstreams including to: <ul style="list-style-type: none"> <li>○ Encourage and support sharing and adoption of best practice</li> <li>○ Provide training and development of staff</li> <li>○ Support the alignment of the local clinical audit with other QI and QA work programmes (Safety / Experience / Effectiveness)</li> <li>○ Help with the development of the national clinical audit (NCA) programme / policy</li> <li>○ Champion Clinical Audit as a Quality Improvement tool and be the face and voice of our profession</li> </ul> </li> <li>• Provision of advice and recommendations are made to the system regarding quality matters including development and delivery of the national clinical audit programme working with key organisations such as HQIP, NHSEI, NICE, CQC and national audit providers.</li> </ul> <p>To support do this N-QI-CAN has a website with blog pages (<a href="http://www.nqican.org.uk">www.nqican.org.uk</a>), Networking and Sharing Forum (NNSF), social media accounts (twitter @nqican and linked-in) and an nhs.net email account (<a href="mailto:nqi.can1@nhs.net">nqi.can1@nhs.net</a>), which are maintained and updated by officers and communications lead with support from our members.</p>
4	<b>Membership</b>
4.1	<p>Whilst all colleagues from our networks are members of N-QI-CAN - we have a core membership and the quorum is made up of the following:</p> <ul style="list-style-type: none"> <li>• <b>N-QI-CAN Steering Group (Officer positions)</b> including: <ul style="list-style-type: none"> <li>○ <b>Chair.</b> The chair is an elected officer of the N-QI-CAN. The chair provides leadership to the group and is responsible for ensuring that N-QI-CAN fulfils its terms of reference, governance functionality, strategy and workstreams. See role description (appendix B)</li> <li>○ <b>General Secretary (deputy chair).</b> The general secretary is an elected officer of N-QI-CAN and deputy chairman. The general secretary is responsible for ensuring that: internal assurances for governance and membership are being followed; ensure probity, openness and transparency; N-QI-CAN activities comply with relevant legislation; oversee process of sponsorship and declarations of interest. See role description (appendix C).</li> </ul> </li> <li>• <b>Non-Officer positions.</b> N-QI-CAN will formally appoint to the following posts to guide</li> </ul>

	<p>and facilitate its business:</p> <ul style="list-style-type: none"> <li>○ <b>Treasurer.</b> The post holder is responsible for: providing quarterly and annual financial income and expenditure updates regarding N-QI-CAN monies; provide financial forecasting of costs against regional network plans; liaise with HQIP to ensure that N-QI-CAN invoices are paid in a timely manner. (JD appendix to follow)</li> <li>○ <b>Communications lead.</b> The post holder is responsible for: supporting the Chair and General Secretary in the preparation and smooth running of the N-QI-CAN meetings, ensuring effective timely communication regarding N-QI-CAN matters including meetings, internet website, social media and the N-QI-CAN - Networking and Sharing Forum (NNSF). See role description (appendix D).</li> <li>○ <b>Web master.</b> The post holder is responsible for ensuring the functionality of the N-QI-CAN website. Provision of support for the internet site will be reviewed as part of the N-QI-CAN workstreams and will be discussed at a future N-QI-CAN meeting. Moving forward, the post should be appointed via an expression of interest as outlined in section 8. (JD appendix to follow)</li> </ul> <p>All of the above posts have protected time (see section 14.1).</p> <p>Should a core member be on ongoing sick leave or unable to fulfil their duties, the N-QI-CAN steering group will ensure appropriate interim cover arrangements are made and communicated to N-QI-CAN members.</p> <ul style="list-style-type: none"> <li>● <b>Regional Network representation:</b> <ul style="list-style-type: none"> <li>● The full list of regional networks is available as appendix A.</li> <li>● Each regional network recognised by N-QI-CAN and is entitled to send a representative to N-QI-CAN meetings.</li> <li>● The chair of the regional network acts as the elected representative of their group, providing a voice for their network raising queries and updates from their network as appropriate. The regional network representative provides updates on key points from their network and provides feedback to the network regarding key points from N-QI-CAN. Whilst it is recognised that there are a variety of chair role descriptions, the use of the generic regional chair role description is encouraged (see appendix F).</li> <li>● If the chair is unable to attend an N-QI-CAN meeting or the network has no elected chair, an agreed representative can attend to provide updates or raise queries on behalf of the regional network and feedback accordingly.</li> <li>● If the chair is unable to attend meetings for personal reasons then a delegated replacement can attend on behalf of the network.</li> </ul> </li> </ul> <p>Core members have N-QI-CAN voting rights.</p>
4.2	<p>N-QI-CAN non-core membership is made up of the following:</p> <ul style="list-style-type: none"> <li>● <b>Stakeholders.</b> Appointment to stakeholder members shall be by agreement of core members on the basis of an outline of the key points the stakeholder will add to the meeting. Agreement will be subject to a quorate vote. Stakeholders include: <ul style="list-style-type: none"> <li>○ NHS England and Improvement</li> <li>○ Healthcare Quality Improvement Partnership</li> <li>○ Relevant royal colleges, national groups and bodies*</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ Quality improvement bodies*</li> <li>● <b>Co-opted.</b> Other individuals may be appointed (co-opted) onto N-QI-CAN by invitation of the chair and approval by the core membership in the following circumstances for special purposes: <ul style="list-style-type: none"> <li>○ for their personal knowledge and expertise for a specific purpose. Membership will be one year and could be extended for a further year, e.g. clinical audit professionals who sit on national clinical audit boards (HQIP commission support group).</li> <li>○ to engage in a specific piece of work (in which instance membership would be deemed to last for the period of the project)</li> <li>○ outgoing Officers (see section 7)</li> </ul> </li> <li>● <b>Representative from organisations with an interest in clinical audit or our workplan.</b> To be invited by the N-QI-CAN Steering Group for a specific meeting to support the realisation of a project or present to the group.</li> </ul> <p>Non-core members do not have N-QI-CAN voting rights. *Commercial companies not providing healthcare do not have the right to be voting members of N-QI-CAN and our regional networks.</p>
4.3	<p><b>Confidentiality.</b> All members of N-QI-CAN (core and non-core) are required to treat all relevant communication and circulated documents with strictest confidence as requested. Where necessary a non-disclosure agreement will be requested when working on contract sensitive information.</p> <p>Communications and documentation will be circulated formally by the N-QI-CAN Chair, general secretary or communication lead for public circulation to the wider community.</p> <p>For full details see appendix E.</p>
4.4	<p><b>Policy of Interests and Sponsorship.</b> All core members of N-QI-CAN are required to act in accordance with the policy of Interests and Sponsorship (see appendix E), declaring any interests or positions of responsibility which they hold in their 'host' health or social care organisation, and outside of this (i.e. personal interests).</p> <p>An interest is defined as any personal or financial interest in an outside organisation, including a commercial company, public sector organisation, NHS employer or voluntary organisation which may compete for a contract to supply either goods or services in relation to the business of clinical audit. It is important that for all declarations, the name of the company or organisation is clearly stated, together with the nature of the relationship.</p> <p>The general secretary is responsible for holding the register of interests which will be reported formally.</p> <p>For full details and the declaration of interest form see appendix E.</p>
5	<p><b>N-QI-CAN Officer appointments</b></p>
5.1	<p>N-QI-CAN will formally appoint two officers to guide and facilitate its business. These officers form the N-QI-CAN Steering Group:</p> <ul style="list-style-type: none"> <li>● Chair</li> </ul>

	<ul style="list-style-type: none"> <li>• General secretary (deputy chair)</li> </ul>
6	<b>Election of N-QI-CAN Officers</b>
6.1	The officers (chair and general secretary / deputy chair) will be elected for a period of two years, after which they may seek re-election.
6.2	The post holder may reapply to stand for a further two-year period of office. The total number of terms a post holder can stand is three periods.
6.3	<p>Should there be no forthcoming suitable post holder for the position after the post holder has served three periods, they will continue until a suitable alternative post holder is identified. This should be for a period of no longer than six months.</p> <p>General secretary to act as interim chairman whilst a replacement is sought if the outgoing chairman cannot continue.</p>
6.4	<p>Appointments to officer positions will be sought from within the existing membership of N-QI-CAN from those that have been members for at least 12 months. This is deemed as essential experience required for the role including that the officer should hold responsibilities for clinical audit/QI in a health or social care organisation. See full list in the role description appendix B and C.</p> <p>N-QI-CAN officers and regional network chair's and co-opted members who have previously been chairs are eligible to apply for officer or non-officer posts.</p> <p>Previous members (officers, regional chairs and previous co-opted members who have been former chairs) within two years of standing down.</p>
6.5	<p>When an officer post becomes vacant or a period of office is coming to an end, the post will be:</p> <ul style="list-style-type: none"> <li>• Circulated by the communications lead to N-QI-CAN officers and regional network chairs with the role description requesting expressions of interest by a specified date.</li> <li>• Interested candidates should submit an expression of interest to the communications lead outlining their capability and experience to undertake the role. Interested candidates should be aware that their EOI can be shared with regional network members.</li> <li>• Coordinated by the communications lead, an election (vote) will be made by a quorate of core members of N-QI-CAN * ** and depending on timing of the vote, this will be either face to face or by email. Those voting should consider the candidates ability (capability and experience) to undertake the role. There is one vote per regional network and for the N-QI-CAN officer not involved in vote. Regional chairs should seek a vote from their members before casting the network vote. EOIs can be shared with network members should a regional chairman wish to do so.</li> <li>• The results of such elections will be circulated by the communications lead via email to all N-QI-CAN members and will be minuted at the N-QI-CAN meeting. The results will also be shared on our social media channels and N-QI-CAN forum.</li> </ul> <p>*Core members of N-QI-CAN only have voting rights. Neither co-opted members, persons with standing invitations, nor observers attending N-QI-CAN meetings, shall have voting rights.</p>

	** Attendees who are acting as a representative of the chair of their network (with the exception of officer posts) may vote on behalf of the regional network group they are in attendance to represent.
6.6	The appointed post holder will be provided with a handover from the outgoing officer.  In addition, training and mentoring to undertake the role will be provided by the outgoing officer (where feasible) and the other N-QI-CAN officer.
7.	<b>Outgoing officers</b>
7.1	When a serving officer reaches the end of a period of office (assuming he or she is not subsequently re-appointed), he or she has an automatic right to remain as a co-opted member for a maximum of one year, thereby ensuring continuity of knowledge and expertise within the Group and enabling the appropriate and smooth transition of governance arrangements and a period of training and support for the new officer.
7.2	Should a serving officer reach the end of his or her term of office in circumstances where a new officer has yet to be identified, the serving officer's period of office may be extended by up to six months (with the serving officer's agreement) to ensure continuity of N-QI-CAN 's business. Arrangements described would then apply at the point when the serving officer stands down.
7.3	If an officer relinquishes his or her post before the end of their term of office, he or she will forego automatic right to continued membership under paragraph 4.1, but retain recourse to the provision of paragraph 4.2 which would allow N-QI-CAN to co-opt such persons on the grounds of their personal knowledge and expertise.
7.4	In normal circumstances, appointed officers would not simultaneously sit on N-QI-CAN as representatives of regional or national groups, i.e. if a member of N-QI-CAN who is a regional representative is appointed to an officer position, an alternative regional representative should be nominated.  Any exceptions to this rule would be by agreement of the chair of N-QI-CAN and would be for the purpose of ensuring an appropriate chair for the regional network is appointed.
8	<b>N-QI-CAN Non-officer appointments</b>
8.1	When a non-officer post (treasurer, web master, communication lead) becomes vacant or a period of office is coming to an end: <ul style="list-style-type: none"> <li>• Candidates will be sought from regional networks via an expression of interest.</li> <li>• The chair and general secretary will appoint to the post reviewing the expressions of interests against the role description.</li> <li>• The post holder will continue with the role until they wish to step down or notice is given to them to step down*.</li> </ul> <p>*A quorate majority vote from core members is required to request that a non-officer post steps down.</p>
9	<b>N-QI-CAN Regional Network appointments</b>
9.1	Regional network chairs are appointed as per their approved terms of reference.  Whilst it is recognised that there are a variety of chair role descriptions, regional network

	chairs are encouraged to use the generic regional chair network role description (approved by N-QICAN in November 2019) to standardise governance arrangements (see appendix E).
9.2	The regional network chair will have an induction session with the chair and general secretary outlining expectations of the role as outlined in this document and will receive all necessary supporting documents as part of their induction pack.
9.3	As stated in 4.1, if the chair of the regional network is unable to attend an N-QI-CAN meeting or if no chair has been elected, an agreed representative can attend to provide updates or raise queries on behalf of the regional network and feedback accordingly.
9.4	Members who sit on N-QI-CAN in this capacity will retain N-QI-CAN membership for as long as they continue to represent their particular group.
9.5	Membership of N-QI-CAN will end with immediate effect when an individual ceases to formally represent his or her group, unless he or she successfully applies to become a co-opted member (see 4.2).
10	<p><b>Organisation and frequency of meetings</b></p> <ul style="list-style-type: none"> <li>• Formal minuted N-QI-CAN meetings will take place four times a year. Meetings will be held face-to-face or virtually via Microsoft Teams or other suitable software.</li> <li>• Dates for these meetings will be agreed by the N-QI-CAN Steering Group in the autumn of the previous year and circulated at the earliest opportunity.</li> <li>• Meetings can go ahead if not quorate, but any points requiring a vote will need to be subsequently ratified via electronic communication.</li> <li>• Core members of N-QI-CAN reserve the right to meet in closed session. This would usually take place at the beginning of a meeting.</li> <li>• Additional meetings will be convened according to work programmes, etc Task and Finish groups may be set up, or training events. These will be agreed with and monitored by the N-QI-CAN Steering Group. Task and finish groups are open to N-QI-CAN network members with interest and expertise in that area. All such meetings will report back regular progress to N-QI-CAN.</li> <li>• Agendas for meetings will be circulated by the communications lead at least one week before the meeting is due to take place.</li> <li>• Standing items will include: <ul style="list-style-type: none"> <li>○ Action points update from previous meeting</li> <li>○ Chair and general secretary update report</li> <li>○ N-QI-CAN forward plan and workstreams update report</li> <li>○ Updates from the regional chairs</li> <li>○ Update from HQIP</li> <li>○ Update from NHSEI</li> <li>○ Update from NCA providers Ally</li> </ul> </li> <li>• It is the responsibility of the communications lead to take meeting action points that identify and reflect key points of the meeting and actions required.</li> <li>• Agenda items requiring a vote should be done so in quorum.</li> <li>• Actions should be taken forward in a timely manner by the agreed member or task finish group and feedback provided on progress.</li> <li>• Copies of action points will be kept for up to 5 years by the general secretary.</li> <li>• Regular non-attendance of members will lead to their membership being reviewed.</li> </ul>
11	<b>Quorum.</b> A meeting will be deemed quorate when the following situation applies:

	<ul style="list-style-type: none"> <li>• At least one appointed officer is present and</li> <li>• 50% of appointed core members are present. See meeting attendance record (appendix A)</li> <li>• The meeting action points will record whether a meeting is quorate or not for the purposes of ensuring compliance with the terms of reference annual review.</li> <li>• Proposals made when meetings are not quorate will subsequently be ratified via electronic communication.</li> </ul>
12	<b>Expectations of all members</b>
12.1	<p>The following expectations apply to all N-QI-CAN members:</p> <ul style="list-style-type: none"> <li>• To attend all meetings, and if this is not possible to nominate a suitable deputy to attend to speak on behalf of the network.</li> <li>• To disseminate the chair's updates to the regional network they represent. Members representing networks are also expected to gather information from their networks to share at the N-QI-CAN meetings.</li> <li>• To participate in task and finish groups appropriate to each individual's particular skills and interests</li> <li>• To carry out any N-QI-CAN activities within the terms of this governance and membership arrangements and in compliance with relevant legislation.</li> </ul> <p>All members are expected to:</p> <ul style="list-style-type: none"> <li>○ have the support and approval of their employing organisation to undertake the role</li> <li>○ at all times to act in good faith and in the best interests of N-QI-CAN</li> <li>○ hold a role in clinical audit or other quality improvement /assurance / clinical effectiveness role in healthcare</li> <li>○ have capacity to dedicate sufficient time and energy</li> <li>○ commit to attend meetings and actively contribute to project work</li> <li>○ have the ability to bring personal knowledge and experience to bear</li> <li>○ have the ability to give direct and honest opinions and add value to decision making</li> <li>○ make independent judgement</li> <li>○ have personal integrity</li> <li>○ obtain the approval of the Chair before speaking at any local, regional or national conferences on behalf of N-QI-CAN, and make other members of N-QI-CAN aware of this intention.</li> <li>○ Actively contribute on the N-QI-CAN forum.</li> </ul> <p>The member is attending the meeting in their own expert healthcare capacity on behalf of their regional network or as a stakeholder or co-opted member. All such time to attend the meeting should be by the agreement of their line manager and fall under that auspices of their contractual requirements including working off site.</p>
12.2	<p>In addition, all members should act in accordance with the Policy of Interests and sponsorship as outlined in section 4.4 and full details in appendix E including but not exhaustive:</p> <ul style="list-style-type: none"> <li>• Not to misuse information gained in the course of working with N-QI-CAN for personal gain nor to use the opportunity of serving on N-QI-CAN to promote private interests or those of persons or organisations connected to members</li> <li>• To declare any personal interests that may be perceived to conflict with</li> </ul>

	<p>N-QI-CAN 's objectives</p> <ul style="list-style-type: none"> <li>To declare the acceptance of any gifts and offers of hospitality associated with duties connected with N-QI-CAN</li> </ul>
13	<b>Accountability</b>
13.1	<p>N-QI-CAN does not report up to another organisation, but works collaboratively with NHSEI, HQIP and other relevant organisations.</p> <p>Officers and members undertake their role with the prior agreement and support of their line manager and organisation.</p> <p>The chair will write a yearly letter of thanks to members for their individual support to their regional network and towards elements of the N-QI-CAN forward plan. The letter should be used to support the members appraisal and recognition of their role.</p>
13.2	<p>Concerns or queries regarding the conduct of any N-QI-CAN member should in the first instance be raised with the chair or the general secretary who will formally look into the matter and take necessary actions. All such concerns and queries will be formally noted at the next N-QI-CAN meeting by SBAR (situation, background actions report) and will form part of the annual report to our members.</p>
13.3	<p>The treasurer will provide N-QI-CAN members with quarterly updates and a yearly report regarding income and expenditure.</p>
13.4	<p>Internal monitoring of governance and assurance systems will be overseen by the general secretary.</p>
14	<b>Funding</b>
14.1	<p>N-QI-CAN is resourced independently with 'limited funding' available from NHSE/I through HQIP. This funding is not extensive (usually in the region of £20-£30,000) and is agreed at the start of each financial year.</p> <p>Payments are made by HQIP to individuals host organisation (for payment to individuals or their organisation agreed on a case by case basis) for the following core elements:</p> <ul style="list-style-type: none"> <li>develop and oversee implementation of the N-QI-CAN strategy and workstreams</li> <li>governance functionality through chair (up to 3 days a month),</li> <li>governance functionality through general secretary (up to 2 days a month),</li> <li>governance functionality through communication lead (up to 2 days a month),</li> <li>governance functionality through treasurer (up to 2 hours per month)</li> <li>governance functionality through webmaster (up to 2 hours per month)</li> <li>workstreams including task finish groups to support key strategic priorities</li> <li>Travel expenses to cover the travel costs for regional network representatives from recognised networks who attend N-QI-CAN's four face to face meetings. This is in line with HQIPs travel expenses policy.</li> <li>The costs of the regional telecoms and telecoms between the chair, general secretary and the communications lead.</li> </ul> <p>In addition, NHSEI provide a meeting venue and refreshments for up to four face to face</p>

	<p>meetings held.</p> <p>The N-QI-CAN forum (NNSF) has separate governance around its ownership &amp; support contract in place which are detailed on N-QI-CAN website (<a href="#">link</a>)</p>
15.	<b>Monitoring</b>
15.1	Attendance will be monitored as part of the agenda at each N-QI-CAN meeting.
15.2	The group compliance with Terms of Reference annual report will be produced and submitted as part of the annual report.
15.3	The compliance with Terms of Reference annual report will include membership attendance, frequency of meetings, whether meeting were held in quorum, dates when minutes were reported to the reporting group.
15.4	Annual report. N-QI-CAN will report progress on objectives and workstreams to NHSEI and HQIP with a formal annual report.
16	<b>Communication</b>
16.1	N-QI-CAN is committed to communicating openly and transparently with its members and the wider health and social care community. This includes the publication of minutes of N-QI-CAN meetings on its web site which will be shared following sign-off at the following meeting.
16.2	N-QI-CAN uses social media to help share key messages with our members and regional network members. N-QI-CAN will share and promote any posts relevant to our workplan. N-QI-CAN will not respond to queries / messages on social media unless it is in the interests of our network and its members.
16.4	Any concerns regarding the conduct of any N-QI-CAN member should in the first instance be raised with the Chair or General Secretary who will respond to formal requests.
16.5	Communications and publicity are the delegated responsibility of the appointed communications lead in conjunction with the Chairman and general secretary.
16.6	Any questions regarding the interpretation of this document should be directed to the General Secretary.
17	<b>Review</b>
17.1	<p>This document will be reviewed by the general secretary on behalf of the N-QI-CAN Steering Group at a minimum on a two yearly basis or sooner should amendments be required.</p> <p>This ensures that the work of N-QI-CAN keeps pace with evolving local and national requirements be they policy, operational or strategic.</p>
17.2	All amendments to this document will be presented to N-QI-CAN for review and approval prior to being uploaded to the N-QI-CAN website.





## MEETING ATTENDANCE RECORD – 2020/21

Membership (as per Terms of Reference).	MEETING DATES				
	Date	Date	Date	Date	Date
<b>Chair</b>					
<b>General Secretary</b>					
<b>Regional network representative:</b>	~	~	~	~	~
East Midlands Clinical Audit for Improvement Network (EMCAIN)					
East of England Clinical Audit Network (EECAN)					
Greater Manchester Clinical Audit Network (GMCAN)					
Cumbria and Lancashire Clinical Audit Network (CLCAN)					
London Quality Improvement (including Clinical Audit) Network (LQICAN)					
Mersey Quality Improvement (including Clinical Audit) Clinical Audit Network (MQICAN)					
North East Clinical Audit Network (NECAN)					
South Central Clinical Audit Network (SCCAN)					
South East Clinical Effectiveness Network (SECEN)					
Southwest Audit Network (SWANs)					
West Midlands Effectiveness & Audit Network (MEAN)					
Yorkshire Effectiveness and Audit Regional Network (YEARN)					
<b>Was the meeting held in quorum? Yes / No</b> <b>Please refer to Terms of Reference</b>					
Communications Lead					
Treasurer					
NHS England					
Healthcare Quality Improvement Partnership					
Royal Colleges and other stakeholders					
Co-opted members					



## Role Description of Chair of the National Quality Improvement (inc. Clinical Audit) Network (N-QI-CAN)

- 1 **Role summary.** The chair an elected member of National Quality Improvement (inc. Clinical Audit) Network (N-QI-CAN). The chair is responsible for ensuring that N-QI-CAN fulfils its terms of references and strategy (see governance arrangements for full details).

N-QI-CAN has delegated authority from NHS England/Improvement (NHSEI) to provide key governance functionality and workstreams as outline in the N-QI-CAN strategic plan and make recommendations as a unified voice on quality matters and make recommendations to the system.

N-QI-CAN is made up of regional clinical audit and quality improvement networks working collaboratively with NHSEI, Healthcare Quality Improvement Partnership, national clinical audit providers and quality improvement bodies. It is a recognised group within health and social care.

The chair attends meetings as necessary with NHSEI, HQIP and other national bodies or project groups to support the realisation of the N-QI-CAN strategy.

- 1.2 **Responsibilities.** The chair has the following key responsibilities:

- To lead the group and ensure that it functions effectively
- To keep members fully informed about the business of the group
- To chair meetings of the group, ensuring that all voices are listened to
- To maximise the ability of the group to fulfil its stated purposes
- To ensure that an agenda is set for each N-QI-CAN meeting
- To approve draft minutes from N-QI-CAN meetings
- To have a casting vote where necessary
- To take chair's action on N-QI-CAN matters between meetings

- 1.3 **Person Specification:**

- Existing member of N-QI-CAN for at least 12 months
- Must hold responsibilities for clinical audit/QI in a health or social care organisation
- The ability to present the work of the group cogently, accurately and confidently to commissioners and providers
- Proven skills in delivering consensus
- Ability to deliver complex tasks across a number of organisations or departments
- Experience of identifying programmes of work using inclusive approaches
- Understanding of the codes of behaviour required of staff in healthcare

- 1.4 **Accountability.** The chair is accountable to core members of the N-QI-CAN group.

- 2 **Funding.** The chair post is funded up to 3 days a month by NHS England to undertake the role. The monies are paid directly to the department / organisation of the postholder to enable backfill time. The funding is defined in the finance report for the current financial year, e.g. 2020/21.

- 2.1 **Appointment and period of office.** As outlined in N-QI-CAN terms of reference, the chair will:
- Be an appointment that will be sought from within the existing membership of N-QI-CAN.
  - Be elected for a period of two years, after which they may seek re-election.
  - The post holder may reapply to stand for a further two year period of office. The total number of terms a post holder can stand is three periods.
  - Should there be no forthcoming suitable post holder for the position after the post holder has served three periods, they will continue until a suitable alternative post holder is identified.

- The post holder is required to give two months' notice.
- N-QI-CAN members reserve the right to give notice for the post holder to step down should the role description not be met.

## Role Description of General Secretary / Deputy Chair of the National Quality Improvement (inc. Clinical Audit) Network (N-QI-CAN)



- 1 **Role summary.** The general secretary is an elected member of National Quality Improvement (inc. Clinical Audit) Network (N-QI-CAN). The general secretary is responsible for ensuring that: internal assurances for governance and membership are being followed; ensure probity, openness and transparency; N-QI-CAN activities comply with relevant legislation; oversee process of sponsorship and declarations of interest.
- 1.2 **Responsibilities.** The general secretary has the following key responsibilities:
  - To provide internal assurances that the governance and membership arrangements set out in this document are being followed
  - To be responsible for the monitoring and evaluation of these arrangements
  - To ensure probity, openness and transparency
  - To ensure fair and equitable elections to officer positions
  - To oversee a process by which members of N-QI-CAN must declare possible conflicts of interest.
  - To maintain a record of any offers of hospitality accepted by members of N-QI-CAN in relation to the group's business
  - To ensure that N-QI-CAN activities comply with relevant legislation
  - To act up in the absence of the chairman and cover duties where applicable
- 1.3 **Person Specification:**
  - Existing member of N-QI-CAN for at least 12 months
  - Must hold responsibilities for clinical audit/quality improvement in a health or social care organisation
  - The ability to present the work of the group cogently, accurately and confidently to commissioners and providers
  - Commitment to following due process, and a willingness to challenge actions and behaviours which deviate from this
  - Proven skills in delivering consensus
  - Being a completer/finisher
  - Ability to deliver complex tasks across a number of organisations or departments
  - Experience of identifying programmes of work using inclusive approaches
  - Understanding of the codes of behaviour required of staff in healthcare
- 1.4 **Accountability.** The general secretary is accountable to the N-QI-CAN chair and to core members of the N-QI-CAN group.
- 2 **Funding.** The general secretary post is resourced for up to two days a month by NHS England to undertake the elements of the role as outlined above. The monies are paid directly to the department / organisation of the postholder to enable backfill time. The funding is defined in the finance plan report for the current financial year, e.g. 2020/21.

- 2.1 **Appointment and period of office.** As outlined in the N-QI-CAN terms of reference, the general secretary will:
- appointment will be sought from within the existing membership of N-QI-CAN .
  - Be elected for a period of two years, after which they may seek re-election.
  - The post holder may reapply to stand for a further two year period of office. The total number of terms a post holder can stand is three periods.
  - Should there be no forthcoming suitable post holder for the position after the post holder has served three periods, they will continue until a suitable alternative post holder is identified.
  - The post holder is required to give two months' notice.
  - N-QI-CAN members reserve the right to give notice for the post holder to step down should the role description not be met.

## Role Description for Communications Lead National Quality Improvement (inc. Clinical Audit) Network (N-QI-CAN)



- 1 **Role summary.** The communications lead is an appointed post that in summary is responsible for supporting the Chair and General Secretary in the preparation and smooth running of the N-QI-CAN meetings. The communications lead is also responsible for ensuring effective timely communication regarding N-QI-CAN matters including meetings, internet website, social media and the National Quality Improvement (incl. Clinical Audit) Network (N-QI-CAN) - Networking and Sharing Forum (NNSF).

For full details of N-QI-CAN please refer <http://www.ngican.org.uk/>. Please note that at March 2020, members of N-QI-CAN are currently reviewing the Governance arrangements.

- 1.2 **Responsibilities.** The communications lead supports the Chair and General Secretary with the effective running of N-QI-CAN and has the following key responsibilities:

- Ensure consistent clear communication is made on behalf of N-QI-CAN, employing various methods of communication which support N-QI-CAN and enable the group to fulfil its objectives.
- Oversee the communication strategy for internal and external communication.
- Oversee the maintenance and development of a N-QI-CAN website, ensuring that content is up-to-date and relevant to the Group's audience.
- Ensure the effective timely circulation of agendas and papers for meetings at least one week before the meeting is due to take place.
- Ensure there is a maintained list of members, signed attendance and declaration of interest.
- Take meeting action points that identify and reflect key points of the meeting and actions required.
- Ensure timely availability of key documents and meeting papers via the N-QI-CAN website and the National Quality Improvement (incl. Clinical Audit) Network (N-QI-CAN) - Networking and Sharing Forum (NNSF)
- Support with N-QI-CAN social media channels (blog, twitter, Linked-In, Youtube)
- Commitment to following due process, and a willingness to challenge actions and behaviours which deviate from this

- 1.3 **Person Specification:** The communications lead should have the following knowledge, experience or qualities:

- Possess excellent communications skills
- Be a completer/finished
- Possess excellent IT skills
- Existing member of a regional network
- Must be in a clinical audit, quality improvement or other similar role for clinical audit/quality improvement in a health or social care organisation
- Understanding of the codes of behaviour required of staff in healthcare including Information Governance.

- 1.4 **Accountability.** The communications lead is accountable to members of the N-QI-CAN Steering Group (Chair and General Secretary), supporting the smooth and efficient running of the N-QI-CAN Group.

The communications lead should maintain the professional image of N-QI-CAN and has the delegated responsibility for communications and publicity.

- 2 **Funding.** The Role is resourced for up to two days per month (agreement on a yearly basis) remuneration to the post holders host organisation for their time. The post holder should have the agreement of their line manager to support them undertaking this post. Travel, accommodation and subsistence is funded with prior agreement of the chair / general secretary.

2.1 **Appointment and period of office.**

The communication lead is appointed for an initial two year period, with a view to this being extended for an additional two year period. The total number of terms a post holder can stand is three periods.

The communication lead is required to give two months' notice. N-QI-CAN members reserve the right to give notice for the post holder to step down should the role description not be met\*.

\*N-QI-CAN Chair and General Secretary to be in agreement to request the communications lead steps down.

N-QI-CAN Communications Lead v4 January 2021



## Generic Role Description for Regional Audit Network Chair of the National Quality Improvement (inc. Clinical Audit) Network (N-QI-CAN)

- 1 **Role summary.** To represent the regional network at N-QI-CAN To represent N-QI-CAN at national events To act as a conduit for information between regional network and NQICAN To arrange regional network meetings To support regional network members.
2. **ACCOUNTABLE TO:** N-QI-CAN Chair and N-QI-CAN members
3. **KEY RELATIONSHIPS:** N-QI-CAN colleagues Healthcare Quality Improvement Partnership National Audit providers Regional Network members Regional Network Officers
4. **HOURS OF WORK:** Required to work flexibly to meet the needs of the role  
**PAY BAND:** Not applicable –this is a voluntary position
- 5 **MAIN DUTIES AND RESPONSIBILITIES**
  - 5.1 **REGIONAL NETWORK MEETINGS**
    - Arrange meetings at frequency agreed, publicising dates and venues in advance
    - Contact members prior to network meetings for items to be included on agenda
    - Produce and circulate agenda and required papers prior to the meeting
    - Ensure minutes / notes are produced at each meeting, and include attendance
    - Act as Chairperson at network meetings
    - Arrange speakers / trainers for network meetings
    - Escalate issues raised at network meetings to N-QI-CAN
    - Co-ordinate sub groups / Task and Finish Groups as required
    - Ensure network activity supports the N-QI-CAN work plan / objectives
    - Ensure timely feedback from N-QI-CAN meetings / mailings to region
    - Respond to requests for support from network members
    - Delegate duties to other network officers (where present)
  - 5.2 **FINANCE**
    - Obtain funding for venues for network meetings / training events
    - Produce annual financial report if subscription model is used
    - Ensure effective use of resources
  - 5.3 **ADMINISTRATION**
    - Maintain a list of members and contact details
    - Ensure Terms of Reference are reviewed annually
    - Arrange elections for network officers at prescribed frequency
  - 5.4 **N-QI-CAN DUTIES**
    - Represent regional network at N-QI-CAN, arranging a deputy if unable to attend
    - Convey information between N-QI-CAN and regional network
    - Co-ordinate regional activities for Clinical Audit Awareness Week
    - Ensure regional network activity supports the N-QI-CAN work plan / objectives
    - Represent N-QI-CAN at meetings / conferences as requested
    - Promote utilisation of N-QI-CAN Forum, Twitter and other social media
    - Respond to requests for information, acting as a focus for responses from network
    - Support national initiatives to promote Clinical Audit

This Role Description will be reviewed by N-QI-CAN annually V1. November 2019



## Policy on Interests & Sponsorship

### National Quality Improvement (inc. Clinical Audit) Network (N-QI-CAN)

1. **Author:** Sue Venables, General Secretary

**Version:** 4.1

**Date:** December 2019

**Review:** by end of 2022

## 2. Objectives

2.1 N-QI-CAN members need to be confident that all business is conducted in an open and honest way that is beyond reproach. It is the responsibility of all N-QI-CAN members to ensure that they are not placed in a position which risks, or appears to risk, conflict between their N-QI-CAN duties and other personal interests, or those of their employing organisation.

2.2 When considering any offers of hospitality, sponsorship or gifts, N-QI-CAN members need to be mindful of the following:

- Seven principles of public life, Nolan Committee (May 1995)
- Bribery Act (2010)
- Standards of business conduct for staff, HSG(93)5
- Commercial sponsorship: ethical standards for the NHS, DH (Nov 2000)

2.3 This policy aims to ensure that potential conflicts of interest or accusations of inappropriate behaviour are avoided.

## 3. Register of Interests

3.1 N-QI-CAN members should declare any relevant interests or positions of responsibility which they hold in their 'host' health or social care organisation, and outside of this (i.e. personal interests). An interest is defined as any personal or financial interest in an outside organisation, including a private company, public sector organisation, NHS employer or voluntary organisation which may compete for a contract to supply either goods or services in relation to the business of clinical audit. It is important that for all declarations, the name of the company or organisation is clearly stated, together with the nature of the relationship.

## 4. Procedure

4.1 A register of interests will be maintained by the General Secretary.

4.2 A record should be maintained on an ongoing basis for each member in the format at Appendix 1. Each member will be asked to notify the network of any new conflicts of interest at the start of each network meeting.

- 4.3 Returns should be made electronically via email to simplify the process and facilitate easy compilation of information. The email return should be sent from the email address of the person completing the form, which will serve as a signature.
- 4.4 The General Secretary will be required to provide assurances to N-QI-CAN on an annual basis that the Register of Interests has been updated. This would normally be done at the March meeting, covering the Register of Interests for the previous financial year.

The Register of Interests will be published on the N-QI-CAN webpage as part of N-QI-CAN's commitment to transparency in all its dealings.

## 5. Collaborations and sponsorship

### 5.1 Offers of collaboration and sponsorship

- Collaborations and Sponsorship of events, including courses, conferences and meetings, by external bodies should only be approved if it can be demonstrated that the outputs / event will result in clear benefits for N-QI-CAN & other regional networks, NHS England and the wider NHS. Any sponsorship would require the approval of the N-QI-CAN chair or relevant Regional Chair in advance. Sponsorship should not in any way compromise any decisions of N-QI-CAN and our networks, or be dependent on the purchase or supply of goods or services. Sponsors should not have any influence over the content of an event, meeting, seminar, publication or training event. N-QI-CAN / Regional networks will not endorse individual companies or their products or services as a result of the sponsorship.
- During dealings with sponsors there must be no breach of patient or individual confidentiality or data protection (or other) legislation. As a general rule, information which is not in the public domain should not be supplied and no information should be supplied to a company for its commercial gain.
- At our discretion, sponsors or their representatives may attend or take part in the event, but they should not have a dominant influence over the content or the main purpose of the event.
- The involvement of a sponsor/commercial company in an event or collaboration should always be clearly identified in the interests of transparency including discounts offered and donations made.

### 5.2 What to Declare

- N-QI-CAN members should declare any sponsorship for regional network events
- Offers of meeting rooms at reduced rates by organisations other than the employing NHS trusts/care provider of network members.
- Offers of hospitality at reduced rates by organisations other than the employing NHS trusts of network members.
- N-QI-CAN members should declare any gifts offered or received in their capacity as a member of N-QI-CAN with a monetary value greater than £25.

### 5.3 Procedure

- A Register of Sponsorship will be maintained by the General Secretary.
- A record should be maintained on an ongoing basis in the format at Appendix 2. Each member will be asked to keep a record of any sponsorship received and submit this to the General Secretary on an annual basis.
- If there is any doubt about the appropriateness of accepting any sponsorship, this should be discussed with the General Secretary at the time, and preferably prior to acceptance, i.e. N-QI-CAN members have a personal responsibility to highlight any matters where there is doubt, and not simply leave these until the time of the

annual return.

- If the General Secretary has any cause for concern about reported sponsorship, this will be discussed with the Chair.
- Returns should be made electronically via email to simplify the process and facilitate easy compilation of information. The email return should be sent from the email address of the person completing the form, which will serve as a signature.
- The General Secretary will be required to provide assurances to N-QI-CAN on an annual basis that the Register of Sponsorship has been completed. This would normally be done at the March meeting, covering the Register of Sponsorship for the previous financial year.
- The Register of Sponsorship will be published on the N-QI-CAN webpage as part of N-QI-CAN's commitment to transparency in all its dealings.
- If a member leaves N-QI-CAN, he or she is expected to complete and submit an updated Register of Sponsorship up to the date of their leaving.

## 6. **Invitations to speak at international, national and regional events**

### 6.1 **What to declare**

- Any invitations to speak at international, national or regional events in their capacity as a member of N-QI-CAN.

### 6.2 **Procedure**

- All plans for members to present in their capacity as a member of N-QI-CAN should be agreed by a majority of N-QI-CAN members, along with any associated expenses and gratuity.
- Where it is not possible, due to time constraints, to gain the approval of the wider network, the chair may make an executive decision.

## 7. **Responsibilities of the General Secretary & Chair**

- The General Secretary will remind members of the above requirements on a regular basis (at least annually). He or she will discuss the contents of the Registers of Interests and Sponsorship with the chair prior to publication on the website. If anything declared appears inappropriate, it is the responsibility of the Chair to take appropriate action.

## 8. **Responsibilities of all members**

- It is the responsibility of all members of N-QI-CAN to be aware of and act in accordance with this policy.

## Appendix 1. Declaration of Interests Form



### Policy on Interests & Sponsorship

### National Quality Improvement (inc. Clinical Audit) Network (N-QI-CAN)

**Name:**

**Region Represented:**

The following are judged to be material interests. Please indicate any that apply, or have applied in the last year, and give brief details in the box below:

\*Organisations are defined as HQIP; Royal Colleges; NICE; Clinical Audit Support Centre; Healthcare Quality Quest, and other similar organisations

<input type="checkbox"/>	<b>1</b>	Work as paid adviser to above organisations.
<input type="checkbox"/>	<b>2</b>	In receipt of lecture fees of £150 in the last year from above organisations.
<input type="checkbox"/>	<b>3</b>	In receipt of equipment or support staff funded, all or in part from above organisations.
<input type="checkbox"/>	<b>4</b>	In receipt of educational/research grant for self or department from above organisations.
<input type="checkbox"/>	<b>5</b>	In receipt of travel and similar expenses for self or department from above organisations.
<input type="checkbox"/>	<b>6</b>	Received gifts, benefits or sponsorship of any kind, whether refused or accepted worth over £25 or several small gifts worth a total of over £100 from the above or closely related organisations within the last twelve months.
<input type="checkbox"/>	<b>7</b>	Any other interest (other than personal or family medical conditions) which could be seen as influencing the actions of N-QI-CAN .
Please give brief details of any declared material interest		
<input type="checkbox"/>	<b>8</b>	I have no material interest to declare

<b>Signature:</b>	
<b>Date:</b>	

Any interests declared in this document will be added to the N-QI-CAN Declaration of Interests, and published on the N-QI-CAN website.

Appendix 2

<p><b>Sponsorship Register</b>  <b>National Quality Improvement (inc. Clinical Audit) Network (N-QI-CAN)</b></p>	
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Name:

<i><b>Date sponsorship received</b></i>	<i><b>Name of N-QI-CAN member</b></i>	<i><b>Person or Body making the offer</b></i>	<i><b>Nature/value of gift/ sponsorship offered/given/received</b></i>	<i><b>Circumstances in which offer was made</b></i>