

RCOphth and GIRFT Link Officer Role Description



1. Background

Getting It Right First Time (GIRFT) is designed to improve the quality of care within the NHS by reducing unwarranted variations. By tackling variations in the way services are delivered across the NHS, and by sharing best practice between trusts, GIRFT identifies changes that will help improve care and patient outcomes, as well as delivering efficiencies such as the reduction of unnecessary procedures and cost savings.

Importantly, GIRFT is led by frontline clinicians who are expert in the areas they are reviewing. This means the data that underpins the GIRFT methodology is being reviewed by people who understand those disciplines and manage those services on a daily basis. The GIRFT team visits every trust carrying out the specialties they are reviewing, investigating the data with their peers and discussing the individual challenges they face. This is a supportive developmental process.

2. Royal Colleges and GIRFT

The GIRFT programme works shoulder to shoulder with the Royal Colleges and specialist societies with the shared vision of ensuring the best standards of care for patients together with support for clinical staff, education and training.

The Royal College believes that everyone should have access to high quality patient care. The College champions excellence in the practice through development of guidance and appropriate standards for the delivery of care and the training and education of clinicians at all stages in their careers. Supporting the promotion of research and innovation throughout the clinical community is key to the role of each College.

GIRFT has already engaged with several Royal colleges to appoint a member of the Royal College to act as a link lead to facilitate communication between the two organisations.

The link is a joint appointment between the two organization to and the post holder will lead would work with the national co-leads for GIRFT workstreams to ensure that that those work streams are informed by and in tune with the work of the Royal College to which they are associated.

The link lead would provide a short report on the work of GIRFT for the Royal College Council as agreed with the President of the Royal College.

3. Role Purpose

The purpose of this role is:

- This is a joint position, to work with GIRFT and the College, to represent the Royal College and create links with GIRFT, GIRFT medical clinical leads, leads of medical specialist societies and other Royal College Link Leads.

- To ensure GIRFT, medical specialist societies, Royal College and other Royal College recommendations align in the planning and delivering of NHS quality improvement and service reconfiguration, to avoid unwarranted variation.
- To liaise with the College via the Professional Standards Committee to promote the delivery of best practice in the pursuit of delivering optimal patient care and outcomes which can be associated with delivering pathway and cost efficiencies.
- Report progress to the Royal College via the Professional Standards Committee and feedback to GIRFT and the other Royal Colleges.

4. Closest managerial relationships

The post holder will report to:

- The Professional Standards Committee of the RCOphth which reports to the Executive Committee, Council and the President of the Royal College of Ophthalmologists.
- National Director for Clinical Improvement
- GIRFT Clinical lead(s)

5. Board and committee membership

Report to Professional Standards Committee, which reports to the College Executive and Royal College Council. The Professional Standards Committee meets 3 times a year. The role holder will be a member of the RCOphth Professional Standards Committee (see PSC terms of reference in appendix B).

The role holder may from time to time be asked to attend meetings on behalf of the RCOphth represent the Royal College at meetings, where GIRFT and other quality improvement programmes in the NHS are a key focus of the meeting. These may include:

- Meeting with the GIRFT Ophthalmology national co-leads - monthly
- National Eye Care Board meetings (2 hours, every 2 months, evenings)
- Gateway meetings – optional
- RCOphth Professional Standards Committee (3 hours, every 4 months)

6. Engagement

The term of office for this role is 3 years.

7. Link Lead Meetings

The GIRFT link officer will attend the Link Lead meetings which will include all Royal College Link Lead representatives to discuss any generic improvement themes or concerns. The frequency of these meetings is bimonthly, see 'Terms of Reference' for the group in appendix A.

The Chair for these meeting is Tim Briggs or his representative and is the primary contact for the group which is responsible for producing a report for the purpose of briefing the National Clinical Improvement Board (NCIB) on relevant information for Board attention.

8. National Clinical Improvement Board

The National Clinical Improvement Board (NCIB) has been established to maintain oversight of National and Regional Clinical Improvement requirements and interventions across secondary care in the NHS. The Board will cover secondary care initially with a view to looking at other areas in the future e.g. primary care and community.

NCIB is responsible for providing clinical leadership for the identification and delivery of national and regional interventions which impact on NHS clinical activity. The Board will provide advice on

the clinical impact of change and specific recommendations for change across all surgical and medical specialties and also cross-cutting clinical change.

It is the intention to develop a number of stakeholder sub-groups for this Board, one of which would be the GIRFT Link Lead group. The Leads from both the Royal College of Physicians and the Royal College of Surgeons of England will represent the Link Leads in attending the NCIB and representing the Link Leads.

It may be relevant for other Link Leads to attend subject to relevant agenda items when appropriate. The attending representative would be chosen dependent on the theme of the meeting and if a certain specialty was the focus of the meeting agenda. For example, where a GIRFT workstream is commencing, or a National Report produced to discuss the recommendations or emerging themes etc. and possibly with attendance from a specific representative of the relevant Royal College.

9. Term of Office

The role would be recruited to, jointly between the RCOphth & GIRFT, through an open and competitive application process, advertised through NHSEI & the RCOphth.

The term of office for this role is 3 years. This role is for one term only.

The time commitment is estimated to be equivalent to 1 hour per week. (0.25 PA). This is a voluntary is non-remunerated role.

Notice period: 3 months on each side

10. Conflicts of Interest

The post holder should make declaration of any interests that might conflict with their Royal College work, in line with the Royal College declaration of interests' policy. The role holder must also at all times conduct themselves in accordance with the Royal College Code of conduct.

11. Title

The role holder may use the title Royal College Clinical Improvement and GIRFT Liaison Role in line with the agreed GIRFT/Royal College position.

Scope and Accountability

Legal, regulatory and compliance responsibility	<ul style="list-style-type: none">• Compliance with health and safety procedures, including prompt reporting of any defects, risks or potential hazards• Compliance with the organisation's data protection and privacy policies
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Person Specification

	Criteria	Essential (E) Desirable (D)
Eligibility	<ul style="list-style-type: none"> Fellow or Member of the Royal College of Ophthalmologists in good standing practicing in England 	E
	<ul style="list-style-type: none"> Current substantive NHS consultant or SAS appointment 	E
	<ul style="list-style-type: none"> UK License to Practice 	E
Knowledge, Qualifications and Experience	<ul style="list-style-type: none"> Experience of working in a committee environment 	D
	<ul style="list-style-type: none"> Experience of successful service management at a regional or national level in the last five years 	E
Skills and Abilities	<ul style="list-style-type: none"> Confident communicator with written and verbal communication skills; the ability to relay key routine information and handle ad hoc enquiries 	E
	<ul style="list-style-type: none"> Solves problems logically and seeks additional information where necessary 	E
	<ul style="list-style-type: none"> Good organisational, prioritisation and time management skills and meets deadlines in an accurate manner 	E
	<ul style="list-style-type: none"> Actively listens to what others say, responding positively in all interactions 	E
	<ul style="list-style-type: none"> Ability to build relationships and rapport, responding to enquires in a timely manner 	E
	<ul style="list-style-type: none"> Ability to respond flexibility and adapt approach in response to changing policy and changing priorities 	E
	<ul style="list-style-type: none"> Acts with honesty and integrity 	E
	<ul style="list-style-type: none"> Commitment to equality and diversity and understanding of how this applies to own area of work 	E
Other requirements	<ul style="list-style-type: none"> Committed to own continuing professional development 	E
	<ul style="list-style-type: none"> Occasional requirement to work evenings or weekends or travel 	E

Professional Standards Committee Terms of Reference



**The ROYAL COLLEGE of
OPHTHALMOLOGISTS**

Purpose / aims

1. Set standards of safe and high-quality ophthalmic care.
2. Liaise externally to ensure College standards and guidance have considered the views of relevant stakeholders and non-College standards and guidance have considered the views of the College and its members.
3. To communicate key standards to ophthalmologists and all those involved in the widest sense in ophthalmic healthcare and work to ensure they are utilised and upheld.
4. To support professionals and relevant stakeholders to deliver services which achieve College and national standards
5. To highlight and act to effect or support change where standards are not being met

Functions/delivery of aims

1. Produce and disseminate up to date standards and guidance, and support other organisations in producing their own relevant standards and guidance, in the areas of:
 - a. ophthalmic and eye care service delivery
 - b. commissioning of services
 - c. care for specific groups of disorders or for specific groups of patients
 - d. non-clinical /professional areas of ophthalmic service such as leadership and management, revalidation
2. Maintain active links and communication with key stakeholders including patients, other professions (clinical, managerial, commissioner) and national bodies such as healthcare regulators, to ensure appropriate College input into ophthalmic-relevant external guidance and regulatory activities, and to ensure College guidance is appropriately consulted.
3. Actively support commissioners, providers and professionals to follow College and other key standards, and provide advice on relevant standards, how to implement them and how to assess adherence.
4. Issue clinical practice support documents on eye conditions or treatments, working with the Scientific Committee where relevant. Such documents do not have the status or authority of full NICE-level guidelines.
5. Provide advice to providers or commissioners of ophthalmology services where external advice is sought for proactive quality assurance or quality improvement, or where something has gone wrong with a clinical service, where concerns have been raised about the clinical care provided by an ophthalmologist, or where an eye department is in dispute with its host trust. Although the College has no statutory right to inspect or accredit clinical services, it aims to provide rapid, high quality specialist advice when requested to do so.
6. Highlight issues, raise awareness and advise on potential action, where evidence emerges of poor standards or quality.

Composition

- Chair
- Chairs of subcommittees and working groups that report to the Professional Standards Committee
- Representatives that report to the Professional Standards Committee
- Ophthalmologist in Training Representative (nominated by the OTG)
- Council Member(s)/Regional Representative(s) by agreement and whilst on Council
- Other members can be drawn from College membership based on the demonstration of skills or knowledge that would be of value to the group at discretion of the Chair
- SAS Representative (nominated by the SAS Group)
- Lay Representative (nomination by the Lay Advisory Group)
- Representative from Association for Health Professionals in Ophthalmology
- Other College Officers may attend any committee, subcommittee or group

Members will generally serve for a period of three years, renewable once

Reporting groups

- Workforce Sub-committee
- Paediatric Sub-committee
- Informatics and Audit Sub-committee
- Ocular Tissue Transplant Standards Group
- Quality and Safety Group
- Clinical Leads Forum
- Healthcare Resource Group
- SAS Group
- Sustainability Group

Reporting representatives

- Chair of External Reviews
- Driving Standards
- Primary care and general ophthalmology
- British Ophthalmic Anaesthesia Society
- Dementia
- Revalidation
- Academic and Research Sub-committee

Other groups or representatives may report for time limited purposes or ad hoc e.g. Refractive Surgery Standards Group, Learning Disabilities advisor, British Standards Institute Ophthalmic Instruments Committee advisor. Members of the PSC may act as representatives for certain external meetings and report ad hoc e.g. AoMRC consultant to consultant referral group, ophthalmology / ENT CRG representatives.

Chair

The Chair will be appointed by an open application process. All UK based College members who hold a substantive NHS consultant or SAS post are eligible to apply.

Term – 3 years (renewable for three years)

Reporting and Committee Membership

The Committee shall report to the College Council.

Process

The committee will meet three times a year. Topics may be discussed by email in between meetings. Members are expected to read the meeting papers in advance of the meeting and these will be sent one to two weeks before by email and may include several enclosures.

The content of meeting will be minuted by a member of the College staff and will be placed before the next Council.

To promote free and open debate the discussions in meetings should be regarded as confidential. The minutes of meetings are a matter of record.

Key external relationships

- Department of Health
- NHS Improvement
- NHS England
- Academy of the Medical Royal Colleges (AoMRC)
- Individual Medical Royal Colleges
- General Medical Council (GMC)
- General Optical Council (GOC)
- Organisations representing other eye care professions e.g. College of Optometrists, Association of Optometrists, Association of Health Professionals in Ophthalmology (AHPO), BIOS
- Care Quality Commission (CQC)
- National Institute for Health and Clinical Excellence (NICE)
- National Clinical Assessment Service (NCAS)
- Medicines and Healthcare products Regulatory Agency (MHRA)
- National Patient Safety Agency (NPSA)
- Voluntary or charitable organisations with an interest in eye care
- Ophthalmology Clinical Reference Group (CRG)
- Clinical council for Eye Health
- Commissioners
- Health Quality Improvement Partnership
- British Standards Institute (BSI)

Conflicts of interest

The Chair is expected to complete and update regularly a declaration of interests. All other members are expected to declare any interests which may be (or which could reasonably be perceived by others to be) a conflict of interests in relation to matters under discussion in the committee, or when contributing to authorship of documents originating from the committee. Members should withdraw from any discussions where there might be a conflict, if appropriate.

Quorum

The quorum of the Professional Standards Committee shall be 6 members.

Voting

Decisions will generally be reached by consensus. Where it is necessary to vote, the decision will be carried by a simple majority and the Chair may choose to have the casting vote.

General

In accordance with College policy, all correspondence and other dealings with professional and other organisations will be prepared within the College by College staff or copies sent to College staff. Where appropriate, copies of correspondences will be sent to the chair of the relevant committee which covers the matter in question for comment and information.

Membership of the committee shall be terminated if there is repeated non-attendance at meetings.

No sponsorship may be sought or accepted without prior permission of the Honorary Treasurer.

Ordinarily, no member may be paid or accept payment in cash or kind for work undertaken on behalf of the subcommittee or the College. However, if this is necessary, under exceptional circumstances, it should be discussed in advance with the Honorary Treasurer and Chair of Professional Standards. Expenses to attend group meetings and committee meetings at the College will be met at the usual College rates. Expenses for all other meetings will only be paid with the prior approval of the Honorary Treasurer or the Chief Executive.

The Professional Standards Committee shall abide by the Charter, Ordinances and Bye-laws of the College.

Author: Bill Newman, Beth Barnes

Date: 14 March 2022

Review date: March 2023

Royal Colleges - GIRFT Link Officer Meeting

Terms of Reference

1. Introduction and Background

The GIRFT Link Officers Group is Chaired by Professor Tim Briggs, National Director for Clinical Improvement and Chair of the Getting It Right First Time Programme (GIRFT). The group has been established to provide a broad-spectrum clinical symposium for Royal College representatives to liaise with GIRFT over current clinical improvement initiatives and develop joint leadership at a national level to ensure GIRFT and the Royal Colleges align in their planning and delivery of quality improvement and transformation at a specialty level

2. Purpose

The Group provides a platform for both GIRFT and the Royal Colleges to share and align current national priorities, innovation, and transformation relevant to GIRFT business as usual and national elective Recovery (HVLC). The Group should promote standards for best practice to improve patient care and outcomes through collaboration and reduced variation in delivery. The monthly agenda should provide an opportunity for the individual colleges to deliver an update to GIRFT on national, specialty level programmes and initiatives and ensure GIRFT is sighted on any conflicts or potential barriers. The group should also offer representatives an insight to current GIRFT priorities for elective recovery across the 6 HVLC specialties and workstream delivery, including cross cutting themes and programmes of work. The group should follow a rolling programme with a focus upon 2-3 specialties per meeting. The Group should be aware of new GIRFT workstreams and receive progress updates on current clinical workstreams to include the publication of national reports and areas of sensitivity which could impact their publication. The relevant GIRFT Clinical Lead and Director of Workstream Delivery (or deputy) will be invited to each meeting to ensure the group encompasses all aspects of GIRFT workstream delivery (BAU) and the HVLC programme.

3. Programme priorities

- Ensure synergy and collaboration between the Royal Colleges and GIRFT BAU/HVLC.
- Discussion of any new clinical improvement programmes or proposed new clinical strategies in all secondary care clinical areas relating to the attendance of this group
- Regional & national updates covering all clinical improvement activity within each specialty represented by the colleges.
- Ensuring that clinicians across all disciplines represented by the colleges, work collaboratively on improvement and maintain an understanding of the clinical improvement activity underway alongside additional improvement requirements at a specialty or multi-disciplinary level.

4. GIRFT LINK OFFICERS Role and Responsibilities

These include but are not limited to the following:

- To represent the Royal College and its views to GIRFT and other key stakeholders, GIRFT clinical leads and clinical liaison officers from other Royal Colleges.
- To join regular meetings to receive briefing on national clinical improvement activity.
- To ensure the Royal College is informed about clinical improvement initiatives and collate the College's views for feedback.
- To share progress and plans for college clinical improvement activity.
- To ensure GIRFT, relevant specialist societies and the Royal College recommendations align in the planning and delivery of NHS quality improvement and service reconfiguration to avoid unwarranted variation.
- To, where appropriate, co-ordinate use of people and workstreams between GIRFT, the Royal College and medical specialist societies to reduce duplication of effort and make optimal use of care improvement resources.
- Ensure recommendations promote standards for best practice, improve patient care and outcomes delivering efficiencies and cost savings through collaboration.
- Engage with GIRFT and other national clinical improvement programmes and their work as required.
- Develop joint leadership programmes, skills assessment, and training programmes

5. Responsibilities of members

- To represent their Royal College and create links with GIRFT, GIRFT medical and surgical clinical leads, leads of medical and surgical specialist societies and other Royal College link leads.
- To ensure GIRFT, specialist societies and Royal College recommendations align in the planning and delivering of NHS quality improvement and service reconfiguration, to avoid unwarranted variation and duplication.
- Ensure recommendations promote standards for best practice, improve patient care and outcomes delivering efficiencies and cost savings through collaboration with GIRFT and other group members.
- Develop joint leadership programmes, skills assessment, and training programmes.

6. Core members Membership: GIRFT Link Officers

The following people are named as core members of the group:

Membership and Meeting Attendance		
	Name	Organisation
1	Prof Tim Briggs (Chair)	GIRFT/ NHSEI
2	Sarah Clarke	Royal College of Physicians of London
3	Stella Vigs	Royal College of Surgeons of England
4	Caroline Rubin	Royal College of Radiologists
5	Rajesh Krishnan	Royal College of Paediatrics & Child Health
6	Peter Johnston	Royal College of Pathologists
7	Tim Draycott	Royal College of Maternity and Gynaecologists
8	Felicity Laat	Royal College of Anaesthetists
9	Ian Higginson	Royal College of Emergency Medicine
10	Mohit Gupta	Royal College of Ophthalmologists
11	Wendy Preston	Royal College of Nursing
12	Jan Dudley	Royal College of Paediatrics and Child Health
13	Ruth Tyrrell	GIRFT National Delivery Director, GIRFT
14	Graham Lomax	National Implementation Director, GIRFT
15	Elena Bechberger	HVLC Programme Director, GIRFT

16	Georgina Godfrey	Senior Programme Manager, GIRFT
17	Edward Nickell	Senior Content Development Manager, GIRFT
18	Nicola Joyce	Director of Workstream Delivery, GIRFT

7. Additional attendees

Additional attendees may be invited to join meetings where their programmes/projects or work are relevant to planned delivery or when focus is upon a particular area of delivery.

8. Reporting

Reports will be provided in advance of each meeting as below:

- Regular progress updates on clinical improvement activity by NHSE&I
- Update on Improvement Directorate clinical improvement activity
- GIRFT progress update and actions as required
- Update reports on Royal College clinical improvement activity
- Sub-Group representative reporting as required

9. GIRFT Link Officers Meetings Arrangements

- a. The meeting will be quorate if at least 6 members are in attendance.
- b. Secretariat: The secretariat will be provided by the Senior Programme Manager to Professor Tim Briggs who will fully support the administration and running of the meeting.
- c. Papers written by members for future meetings should be sent to the Secretariat at least a week before each meeting.
- d. The Secretariat will collate all papers and ensure the Chair reviews them prior to being sent to all attendees at least three full working days ahead of each meeting.
- e. Where a paper has been delayed for unavoidable reasons, this will not prevent the sending of agenda and papers three working days prior to meeting and every effort will be made to ensure late papers are sent as soon as possible and ahead of the meeting.
- f. The Secretariat produces action notes and a log which is reviewed by the Chair. This is circulated to the group within a week of each meeting and may be shared with other groups as appropriate.
- g. GIRFT Link Officer meetings will be two monthly via Microsoft Teams - we will attempt to meet face to face once a year.