

### Quality, Audit and Standards Committee *–* Terms of Reference

1. **Purpose**

The purpose of the Quality, Audit and Standards Committeeis to set, maintain and improve standards of safe and high-quality ophthalmic care in the UK. The committee will work to support professionals to improve their services and highlight the resources needed to deliver safe ophthalmic care. The committee’s activities are driven by patient need and the desire to facilitate the best possible care for ophthalmic patients. It is accountable to the Trustee Board.

1. **Main Activities**
   1. To support members and stakeholders in the delivery of high-quality ophthalmology services for patients in the UK. The committee will primarily achieve this through the development and dissemination of RCOphth standards and guidance or advice and support other organisations in producing their own in the areas of:

* ophthalmic and eye care service delivery
* care for specific groups of disorders or for specific groups of patients, in conjunction with the scientific and research committee
* non-clinical /professional areas of ophthalmic service such as leadership and management, revalidation etc. working with the Professional Development Committee
* job description and advisory appointment committee assistance (for consultant and SAS doctor posts)
* Identify and determining which national clinical audits are required and their prioritisation, together with making recommendations based on the results of such audits.
* Oversee the delivery and development of the National Ophthalmology Database.
  1. To support stakeholders to implement guidance and make improvements to ophthalmic service provision by providing advice on relevant standards, how to implement them and how to assess adherence through:
* the provision of the RCOphth review service
* raising awareness and advise on potential actions, where evidence emerges of issues which may cause poor standards or quality of care
* promoting the design and delivery of sustainable eyecare as part of the resources and standards that the committee publishes
  1. In conjunction with the College’s policy and communication teams, to 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.
  2. To promote diversity in all its forms, ensuring that decisions and outputs are inclusive and consider a range of perspectives, and that representation on the committee is appropriate to achieve this.

1. **Status of Committee**
   1. The Quality, Audit and Standards Committee is not authorised to make decisions other than in accordance with these terms of reference.
   2. The Quality, Audit and Standards Committee is a Standing Committee.
   3. The following groups report to the Quality, Audit and Standards Committee:

* NOD/AMD project working groups
* Informatics Working Group
* Healthcare Resource Group
* Short life guideline development groups as required by QSC workplan

1. **Membership**

The Quality, Audit and Standards Committee shall consist of a maximum of 15 members. All members serve a 3 year term, with a further 3 years subject to confirmation. Those members shall be

* + 1. Chair
    2. College Diabetic Eye Screening Programme Link Officer
    3. College Getting it Right First Time Link Officer
    4. UK Ophthalmology Alliance Chair
    5. Paediatric Ophthalmology Sub-Committee Chair
    6. Lead for Clinical Leadership
    7. Lead for Medicines, Devices and Safety
    8. AAC and job planning Subcommittee Chair
    9. Health Resource Group Working Group Chair
    10. Representative of Ophthalmologists in Training Committee
    11. Representative of the Scientific and Academic Committee
    12. Representative of the SAS Committee
    13. Representative of the Lay Advisory Group
    14. 2 Co-opted members of Council

The Chair shall be responsible for chairing meetings, liaising effectively with the Quality Improvement and Research team, and ensuring it meets the key progress indicators outlined in the annual workplan.

1. **Meetings**
   1. Meetings will occur in person, hybrid, virtually, or a combination annually. The majority of work is expected to be undertaken in-between meetings.
   2. Notices of meetings shall be given in writing/email.
   3. Repeated absence of 2 or more missed meetings and/or inability to contribute to the work of the Committee will result in removal subject to review by the Chair.
   4. The Chair shall preside at every meeting or if they are unable or unwilling to do so, another member appointed shall preside as Chair in their place for that meeting.
2. **Quorum**

All members are expected to attend meetings; however, the quorum is half the members plus one.

1. Representation on College Committees
   1. The Chair shall also attend meetings of Trustees and Council
   2. Where appropriate members of Quality, Audit and Standards Committee may be asked to attend other College committees as representatives. Representatives shall serve on committees throughout their tenure, unless otherwise agreed with the Chair. It is permissible to send deputies where necessary.
2. Reporting requirements
   1. The Quality, Audit and Standards Committee shall keep minutes of its meetings and a copy of these minutes shall be sent to the Trustee Board
   2. The Quality, Audit and Standards Committee shall adhere to the key progress indicators outlined in its annual workplan including the reporting of risk through the completion of a risk register.
   3. The Quality, Audit and Standards Committee shall report 2 times per year to the Trustee Board.
   4. Quality, Audit and Standards Committee may, from time to time at their discretion seek any further information in relation to the discharge of its functions.
3. **Confidentiality**

All discussions and materials related to the selection process are considered confidential and should not be disclosed outside of meetings or meeting related work.

1. **Conflicts of Interest**

All members must submit a declaration of interest. It is the responsibility of members to inform the Chair if a new conflict of interest arises. Members with a direct or perceived conflict of interest shall recuse themselves from the meeting.

1. **General**
   1. All correspondence and other dealings with professional and other organisations shall be prepared by College staff and shall have the approval of the Chief Executive officer, Honorary Secretary or, in their absence, the Vice- President, whose committee(s) cover the matter in question.
   2. The operational management of the Committee/Sub-Committee/Working group, and any work arising from it, are the responsibility of College staff; the role of members is to advise and provide a wider perspective.
   3. No sponsorship shall be sought or accepted without the involvement and agreement of the Partnerships and Sponsorship Manager or the Chief Executive.
   4. No member may be paid or accept payment in cash or kind for work undertaken on behalf of the Committee/Sub-Committee/Working Group without the prior approval of the President, Vice President, Honorary Treasurer, Honorary Secretary, or Chief Executive officer.
   5. Expenses to attend meetings shall be met at the usual College rates. Expenses for any other meetings either in the College or outside will only be paid with the prior approval of the President, Vice President, Honorary Treasurer, Honorary Secretary, or Chief Executive officer.
   6. As a group set up within the College, and under the terms of its Charter, the Committee/Sub-Committee/Working Group may not support any objective that would make it a Trade Union, nor shall its objectives extend to the regulation of relations between workers and employers or organisations of workers and organisations of employers.
2. **Variation or Termination**

These terms of reference shall be reviewed every 2years and shall remain in force until varied or revoked by the Board of Trustees.

**Date of publication**: February 2025

**Review date**: January 2027