

REGULATORY GOVERNANCE COMMITTEE (RGC)

TERMS OF REFERENCE

1. Purpose

It will be the RGC's responsibility to provide assurance to the Board that the systems, processes and accountabilities are in place for identifying and managing risks associated with delivering the regulatory programme. It will assure the Board that the surveillance model is robust and makes possible an effective inspection programme (including rating) that provides public confidence in the work of the CQC.

2. Role and Scope

To provide assurance to the Board that:

- There are robust and effective structures, processes and accountabilities in place for identifying and managing risks associated with delivering the regulatory programme, across each of the four components of the CQC Operating Model: registration; monitoring, inspecting, rating; enforcement; and Independent Voice;
- The approach to the delegation of authority relating to regulation within the CQC as expressed in the CQC Scheme of Delegation is kept under review
- Systems and processes are in place for receiving and responding to whistle blowers and concerns raised by the public.

3. Responsibilities

These may include:

- To review the risk, control and assurance processes for all risks associated with delivering regulatory activity, so being able to assure the Board that the surveillance model is robust, making possible an effective inspection programme that provides public confidence in the work of the CQC;
- To scrutinise and oversee the effective scheduling and planning of regulatory activity;
- To ensure effective engagement with the public and stakeholders and the effective use of information to inform when, where and what CQC inspects;
- To ensure the effective and efficient use of resources to carry out inspection activity;
- To ensure that inspection activity is appropriately deployed to cover all required and identified KLOEs and also any emerging concerns;
- To scrutinise and oversee the usage of, and performance against, quality standards in line with plans to review each element of the CQC operating model;
- To scrutinise agreed Board level KPIs that address regulatory governance, with particular focus on those which are red rated;
- To consider case examples, as appropriate, to inform discussions on the systems, processes and accountabilities in place for identifying and managing risks associated with delivering the regulatory programme;
- To oversee the handling of 'speaking up' (whistle-blowing) cases and concerns raised by either the public or staff in relation to registration; monitoring, inspecting, reporting and rating; enforcement; and Independent Voice;
- To commission work and reviews, when required, on behalf of the CQC relating to operational (regulatory) risk and assurance, while recognising that corporate financial

governance is primarily dealt with by the Audit and Corporate Governance Committee (ACGC);

- While ACGC retains oversight of the full internal audit programme, areas of the programme that focus specifically on regulatory decision making shall be for oversight and review by RGC;
- To submit an annual report on the work of the Committee to the Board for inclusion in CQC's Annual Report and Accounts;
- To provide appropriate input into the Annual Governance Statement, to align with input from ACGC;
- To ensure that the work of the RGC aligns with and complements the work of ACGC and the People and Values Committee (PVC).
- RGC will periodically review its own effectiveness and report the results of that review to the Board.

4. Governance

RGC is a committee of the CQC Board; the Board approves the Committee's Terms of Reference.

RGC operates within the CQC's Scheme of Delegation.

5. Accountability

RGC is accountable to the CQC Board.

The Chair of RGC will be accountable for ensuring that the recommendations to the Board reflect appropriate consideration of:

- I. Corporate priority
- II. User involvement
- III. Staff development
- IV. Equality, diversity and human rights
- V. Resources (including IT)
- VI. Value for Money
- VII. Evaluation
- VIII. Public Reporting
- IX. Environmental considerations
- X. Legal considerations
- XI. Risks/interdependencies

6. Reporting Relationships

Following each Committee meeting, the Committee Chair will present a written report to the Board informing it of the Committee's actions and detailing any recommendations to the Board.

The committee shall produce a report on its activities timed to support finalisation of the annual report and the Governance Statement, summarising the conclusions from the work it has done during the year.

7. Interconnections with Board and/or other Committees

The work of RGC should align with the Audit and Corporate Governance Committee and the Remuneration, People and Values Committee.

8. Evaluation

The criteria for success of the RGV will be:

- The provision of effective assurance to the Board on management assurance arrangements within the three inspection directorates, along with other specific aspects of 'regulatory interest', for example, intelligent monitoring, regulatory risk, and quality management;
- Timely and effective action taken to address identified deficiencies in regulatory governance;
- Effective responses to information of serious concern;
- Effective action taken to drive improvement in service providers and eliminate poor care;
- An effective range of tools and powers in place to protect the public from harm and promote improvement in the services that CQC regulates;
- Effective alignment with ACGC and RPVC.

9. Constitutional matters

i. Membership

Up to five non-executive CQC Board members, one of which should also be a member of ACGC.

ii. Quorum

The quorum for a meeting is a minimum of 2 members, one of which should be the Chair. The Chair will nominate a deputy to act as chair should he be unable to attend a meeting.

iii. In attendance

The Executive Director of Customer and Corporate Services, the Executive Director of Strategy and Intelligence and the Board Secretary will normally attend for all or part of the meeting. Other staff members and external advisors will attend as necessary for all or part of the meeting. One or more CI, DCIs and Heads of Inspection would attend every meeting depending on the area due for consideration as set out in the forward plan and accounting for any urgent matters on the regulatory agenda.

iv. Support arrangements

Secretariat support is provided by the Corporate Secretariat.

v. *Notice and minutes of meetings*

- Unless otherwise agreed, notice of each meeting confirming the venue, time and date together with the agenda of items to be discussed, will be forwarded to each member of the Committee, and any other person required or invited to attend, no later than five working days before the date of the meeting. Supporting papers will be sent to the Committee members and to other attendees, as appropriate, at the same time;
- The Committee Secretary will write minutes, including the key points and decisions of all committee meetings, including the names of those present at the meeting. The minutes of the previous meeting must be approved and signed off by the Chair as a true record at each meeting;
- The Chair will establish, at the beginning of each meeting, the existence of any conflicts of interest and they should be minuted accordingly;
- The minutes of the committee meetings will be circulated promptly to all members of the Committee.

10. Frequency or Pattern of Meetings

The Committee will meet as often as required, as determined by the Chair, to ensure the timely consideration of business, and at least quarterly.

Annexe on Functionality and Conduct of Meetings

The following guidelines for best practice in conduct of meetings apply equally to the Board, Executive Team and their sub-committees and are annexed to all terms of reference.

RGC meetings need to function in a purposeful, effective and efficient manner, and all Committee members have a responsibility to contribute to this objective. The following guiding principles for conduct of meetings will apply:

- i. Meetings will start and finish on time;
- ii. Meetings will work to time-allocated agendas;
- iii. Meetings will be supported by clear and succinct papers (guideline: 4 pages maximum), always including: an Executive Summary; stated purpose; and the decision/action required;
- iv. Drafters of papers should ensure their papers are fully ready for Committee deliberation before submitting them;
- v. Papers must be submitted by the established deadline of 5 working days before each meeting. Papers missing this deadline are carried forward to the subsequent meeting;
- vi. In concluding an agenda item, the Chair summarises the decision required and taken; the matter is not then re-opened;
- vii. Unnecessary iterations ('looping') are avoided: papers are ideally taken only once, and discussion does not reiterate points already made;
- viii. Fragmentation and/or duplication of effort in the drafting process is avoided through very clear allocation of drafting and approval responsibilities.