NHS Fife
Patient Safety Implementation Group
Draft Role and Remit

1. Purpose

The Scottish Patient Safety Alliance launched in March 2007 has now set out its expectations of NHS Boards. The programme is aimed at making healthcare safer by creating a culture of safety in NHS Organisations through the implementation of a series of evidence-based interventions, processes and continual monitoring to improve the reliability and safety of healthcare throughout Scotland. The establishment of a patient safety implementation group will ensure that there is a forum to support work stream leaders and the programme (PSP) manager and a reporting mechanism that provides assurance to the NHS Fife Clinical Governance Committee, and ultimately the Board that progress is being made towards the overall aims and objectives of the programme which is to:

- Reduce adverse events by 30%
- Reduce mortality by 15%

2. Composition

The group members will be:
The NHS Board Medical Director and Executive Sponsor for the Patient Safety Programme - Chair
The executive leads for each work stream
The team leaders for each work stream
CHP representatives as identified by the Clinical Directors
Clinical Governance and Risk Management representatives
Lay members
PSP Programme Manager
In the absence of the Chair the NHS Fife Deputy Chief Executive will take the Chair

3. Meetings

2.1 Meetings will be held bi-monthly following the Clinical Governance Steering Group.
2.2 Agenda items will be submitted to the PSP Programme Manager no later than nine working days prior to the meeting date.
2.3 Circulation of agenda/papers will be done electronically seven working days prior to the meeting date.

2.4 The Clinical Governance Support team will administer the meeting.

4. Remit

4.1 The group will consider:
- baseline and ongoing data submissions to the Scottish Patient Safety Alliance
- bi-monthly reports from each work stream team leader

5. Reporting Arrangements

The Group will report to the NHS Fife Clinical Governance Committee by way of the minutes of the meeting.

Regular reports to the Clinical Governance Committee will be provided on a quarterly basis or on a timescale that fits with that expected by the SPSP.