# Integrated Urgent Care (IUC) Clinical Leads Group

# Terms of Reference (TOR)

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| **Version:** | **Owner:** | **Created:** |
| 1.1 | Louise Whyte (Lead GP) | 1st October 2021 |
| **Published:** | **Approving Director:** | **Next Review** |
| 22nd September 2022 | Rhys Hancock (Director of Nursing, AHPs and Governance) | 22nd September 2023 |

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## Purpose

* To provide a discussion forum for difficult clinical leadership issues, including challenging clinical cases
* To offer peer support as Lead Clinicians for the IUC service
* To enable shared learning, including sharing of publications and evidence relevant to urgent primary care
* To enable the Senior Leadership Team, SevernSide Quality Group and the BrisDoc Urgent Care Services Leadership and Operational Board (UCSLOB) to delegate actions with an exclusively clinical focus for action and feedback
* A decision making group to sign off solely clinically based decisions (for example clinical policies / equipment decisions)

## Responsibilities

* The Urgent Care Clinical Leads group will hold responsibility for developing and signing off the clinical content for pathways, policies and SOPs as required

## Co-owners Council Engagement

The Urgent Care Clinical Leads group will maintain a clear channel of communication with the co-owners’ council, so that both parties are able to share information and consult one another as appropriate. This will ensure that the co-owners’ council remains part of this group’s consciousness when making key decisions.

## Membership

The membership of the Board will be comprised of;

* IUC Head of Nursing and AHPs
* IUC Nurse and AHP Leads
* BrisDoc Clinical Pharmacist
* IUC Lead GPs
* (Clinical Guardians GPs to be included by exception according to agenda).
* Urgent Care Deputy Medical Directors – As required by request
* Medical Director – As required by request
* Director of Nursing, AHPs and Governance – As required by request

Meetings will be chaired on a rotating 2 monthly basis. A record of decisions/ actions will be maintained from each meeting will be kept by the preceding chair.

In addition, members will be co-opted into the group if particular issues or projects arise that require expertise from individuals other than substantive members. This includes a representative of the co-owners’ council if required or is requested by the council.

## Frequency

The Urgent Care Leads will meet for one hour every month.

Additional exceptional meetings can be called by the chair as required.

## Quoracy

A minimum of 3 members, with at least a Lead GP and Nurse/AHP representative to be present for a decision to be made.

## Reporting and Accountability

The Clinical Leads group is accountable to the Service Delivery and Improvement Board, and will ensure close links and communication with the Urgent Care Services LOB, Severnside Quality Group and Quality Board, and Medicines Management group as required. The leads group can feed into any of these groups/teams, and receive actions which have an exclusively clinical focus.

## Review

The purpose value and outcomes of the TOR for the Urgent Care Clinical Leads group will be reviewed annually, with the opportunity to disband or further refine the way the group works.

### Version Control

|  |  |  |  |
| --- | --- | --- | --- |
| **Version** | **Date** | **Author** | **Changes Overview** |
| V1.0 | 1st October 2021 | Rani Robson | New TOR |
| V1.1 | 1st September 2022 | Louise Whyte | Awaiting group review |

## Agenda Template

|  |  |  |
| --- | --- | --- |
| **Number** | **Item** | **Presenter** |
| 1 | Introductions, Apologies & Conflicts of Interest | Chair |
| 2 | Previous Minutes and Action log | Chair |
| 3 | Items for Discussion | All |
| 4 | Risks | All |
| 5 | AOB | All |
| 6 | Comms from the meeting/Items for Escalation | Chair |