

Mortality Review Group Terms of Reference

Ratified by:	Quality and Safety Committee
Date ratified:	18 April 2024
Responsible Executive Director:	Chief Medical Officer
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Review date:	30 June 2025

Mortality Review Group Terms of Reference

1. CONSTITUTION

- 1.1 The Mortality Review Group is a sub-group of the Quality and Safety Committee. There is a clear link between the Clinical Incident and Safety Group (CISG) and the Mortality Review Group with the latter updating CISG at each meeting.

2. PURPOSE

- 2.1 The purpose of the Mortality Review Group is to function as the lead group for the Trust in relation to the practice of reviewing and learning from patient deaths, focusing in particular on any emerging themes.
- 2.2 The core function of the Mortality Review Group is to ensure that the Trust has clear processes in place to review and learn from patient deaths and to disseminate learning in line with the Patient Safety Incident Response Framework.
- 2.3 The Mortality Review Group will provide a challenge where there is evidence of the need for improvement particularly in relation to patient safety and patient care.
- 2.4 The Mortality Review Group will develop sharing and learning with other organisations.
- 2.5 The Mortality Review Group will ensure that the Trust remains fully aligned with national guidance and recommendations around the review process for deaths.

3. OBJECTIVES

The principal duties and responsibilities of the Mortality Review Group are set out below:

- To ensure there are robust processes, policies, and procedures in place to report, review and investigate patient deaths.
- To review data relating to patient deaths including any local mortality reports and to ensure learning is shared and any advised improvements are enacted and monitored.
- To review mortality rates by service and report on any emerging themes.
- To consider mortality data and findings from investigations in conjunction with other qualitative data and identify any areas for further investigation.
- To ensure that data collection in relation to mortality is timely, robust, and aligned with national best practice.
- To ensure that Duty of Candour has been considered and enacted where appropriate.
- To monitor themes, trends, audits, actions taken and share learning across the Trust.
- Where applicable to monitor and review reports to Prevent Future Deaths and to ensure action plans are completed.
- To work closely with other Trust subgroups to ensure that the work of the Mortality Review Group aligns with other Trust patient safety initiatives.
- Ensure that the Trust is sighted on, taking part in, and reporting relevant National Mortality Audits.
- Undertake any other tasks delegated to the Mortality Group by the Quality and Safety Committee.

4. MEMBERSHIP AND ATTENDANCE

4.1 Membership of the Mortality Review Group shall be as follows:

- Deputy Chief Medical Officer (D CMO) – *Chair*
- Associate Director of Nursing
- Associate Director of Quality
- Associate Clinical Directors
- Associate Directors Clinical Governance and Quality Improvement
- Relevant Clinical Team Manager/Clinical Lead
- Clinical team members as needed.
- Patient Safety Partners
- Other professionals (internal) as required.

4.2 The Chair may require or request others to attend the meetings either in full or for specific agenda items.

4.3 The Chair or their nominated deputy will be expected to attend 100% of the meetings. Other Mortality Review Group members will be required to attend a minimum of 80% of all meetings and be allowed to send a Deputy to one meeting per annum.

5. QUORUM

5.1 The Mortality Review Group will be quorate with five members present.

5.2 If the meeting is not quorate the meeting can progress if those present, determine it is appropriate to do so based on the items for discussion. However, no business shall be transacted and items requiring approval may be approved by e-Governance (virtually by members) and ratified at the subsequent meeting of the Group.

6 ADMINISTRATION OF MEETINGS

6.1 An Administrator shall provide support services to the group and meetings of the Mortality Review Group shall be called by the administrator at the request of the Chair.

6.2 Unless otherwise agreed, notice of each meeting confirming the venue, time, and date, together with an agenda of items to be discussed, shall be made available to each member of the group and any other person required to attend, no later than five working days before the date of the meeting.

7 FREQUENCY

7.1 The Mortality Review Group shall meet at least quarterly. (April, July, Oct, Jan). The Chair may call additional meetings to ensure Group business is undertaken in a timely way.

8. ACCOUNTABILITY AND REPORTING

8.1 The Mortality Review Group is a subgroup of the Quality and Safety Committee accountable to the Quality and Safety Committee.

8.2 The minutes of Mortality Review Group meetings shall be formally recorded, and an assurance report will be drafted by the Administrator on behalf of the Chair and submitted to the next Quality and Safety Committee (QSC). This assurance report will draw the QSC attention to any issues requiring disclosure, escalation, or action.

8.3 The Mortality Review Group will submit an Annual Report to the Quality & Safety Committee, incorporating progress against its work plan, reporting arrangements, frequency of meetings and attendance records.

9. AUTHORITY

9.1 The Mortality Review Group has the authority to establish task and finish groups, as are necessary, to fulfil its responsibilities within its Terms of Reference. The Mortality Review Group may not delegate executive powers (unless expressly authorised by the Group) and remains accountable for the work of any such group.

9.2 The Group is authorised by the Quality and Safety Committee to investigate any activity within its Terms of Reference. It is authorised to seek any information it requires from any member of staff and all members of staff are directed to co-operate with any request made by the Mortality Review Group.

9.3 The functions and actions of the Mortality Review Group do not replace the individual responsibilities of its members as set out in job descriptions and other forms of delegations. Individuals remain responsible for their duties and accountable for their actions.

10. RELATIONS WITH OTHER COMMITTEES/GROUPS

10.1 The Mortality Group may receive escalations from other Quality & Safety Committee sub-groups in relation to matters identified at these meetings within its Terms of Reference.

10.2 The Mortality Review Group may receive reports, assurance, and escalations from service line Clinical Governance meetings.

11. MONITORING EFFECTIVENESS AND REVIEW

11.1 The Mortality Review Group will provide an annual report outlining the activities it has undertaken throughout the year. This report will be presented to the Quality & Safety Committee

on the work the group has undertaken in discharging its responsibilities, delivering its objectives, and complying with its Terms of Reference.

- 11.2 At least once a year the Mortality Review Group shall undertake a self-assessment of its effectiveness, and the outcome of this assessment shall be reported to the Quality & Safety Committee.
- 11.3 The Terms of Reference for the Group shall be reviewed at least annually and approved by the Quality & Safety Committee.