

# Patient Safety Steering Group

## Terms of reference

### 1. The College's mission statement

The Royal College of Pathologists' mission is to advance the science and practice of pathology, further public education in the field of pathology, and promote study, research and innovation in pathology and disseminate the results.

### 2. Purpose

The Patient Safety Steering Group (PSSG) has been established by the Royal College of Pathologists to oversee patient safety initiatives and support continuous improvement in the quality and safety of pathology services. This aligns with the College's Patient Safety and Quality Strategy 2024–2029, which aims to empower the pathology workforce to provide high-quality, safe services through innovation, collaboration and excellence.

The main goals of the PSSG are to:

- analyse data to find key risk areas that will inform relevant patient safety workstreams and resources
- report national pathology error trends to the College Council, relevant College committees and NHS organisations (including NHS England, NHS Scotland, NHS Wales, and Health and Social Care Northern Ireland), and share best practices with pathology professionals, healthcare providers and other stakeholders to foster learning, collaboration and improvements in patient safety.



- guide the development and implementation of patient safety projects, prioritising key areas of pathology identified through risk analysis, stakeholder feedback, and alignment with the College’s strategic objectives.

### **3. Oversight responsibilities**

- Guide the design and support the implementation of patient safety projects that align with the College’s Patient Safety and Quality Strategy 2024–2029, recognising that progress may depend on the availability of resources and external factors beyond the group’s direct control.
- Oversee the implementation of safety initiatives, ensuring they are delivered on time, within scope and meet established objectives.
- To monitor and evaluate the effectiveness of safety initiatives through key performance indicators (KPIs), data analysis from NHS England, NHS Scotland, NHS Wales, and Health and Social Care Northern Ireland, and other relevant metrics, identifying trends, patterns and areas requiring improvement to determine their impact on patient safety and service quality.
- Identifying and implementing best practices from within the NHS and external sources; promoting and supporting innovative approaches and technologies that enhance patient safety and service quality.
- Ensure all College patient safety initiatives comply with national and international safety standards, regulations and guidelines.
- Support the identification of potential risks to patient safety at a national level through data analysis and incident reports, and guide the development of strategies to mitigate these risks in collaboration with healthcare providers and other key stakeholders, thereby contributing to reducing the likelihood of adverse events.
- Regularly report progress updates, challenges and outcomes to the Group, College Council, and other relevant stakeholders, while maintaining open lines of communication to ensure transparency in safety efforts and foster trust.
- Work closely with other College committees, healthcare providers, industry partners, and research organisations to coordinate safety efforts and share resources.



## 4. Accountabilities

- The PSSG Chair is the Clinical Director of Quality and Safety.

The PSSG is accountable for the following tasks and activities, with specific responsibilities assigned as follows.

- Chair of the PSSG (Clinical Director of Quality and Safety):
  - **Leadership and oversight:** Ensures the group's activities align with the College's Patient Safety and Quality Strategy 2024–2029.
  - **Reporting:** Oversees the preparation and delivery of regular progress reports to the College Council and other relevant committees.
  - **Workplan delivery:** Ensures the group develops and adheres to a detailed workplan, outlining activities, deliverables and timelines.
  - **Stakeholder engagement:** Acts as the primary liaison with College committees, external stakeholders and healthcare providers to facilitate collaboration and promote the implementation of patient safety initiatives.
- Appointed group members:
  - **Project delivery:** Lead or contribute to specific patient safety projects within their area of expertise, as defined in the group's workplan.
  - **Data analysis and risk prioritisation:** Participate in analysing national error trends and identifying key patient safety risks to inform group activities.
  - **Resource development:** Collaborate on the creation of guidance, frameworks, and tools for pathology professionals to improve patient safety.
  - **Monitoring and KPIs:** Support the tracking and evaluation of KPIs to measure the effectiveness of patient safety initiatives.
- Professional Guidelines Team:
  - **Administrative support:** Provides logistical and administrative support to the group, including preparation and distribution of agendas, minutes and reports.
  - **Membership coordination:** Manages the recruitment, onboarding and continuity of PSSG members.



- **Integration with the Strategy:** Ensures the group’s activities and deliverables are integrated with the broader Patient Safety and Quality Strategy and College objectives.
- The Group as a whole:
  - **Strategic alignment:** Ensures all initiatives and deliverables support the objectives of the Patient Safety and Quality Strategy 2024–2029.
  - **Collaboration:** Works collectively to coordinate efforts with other College committees, healthcare providers and external stakeholders to maximise impact.
  - **Reporting and transparency:** Ensures clear and regular communication with the College Council and other relevant stakeholders regarding progress, challenges and outcomes.

## 5. Approval authority

The Chair is responsible for approving the minutes of the group.

## 6. Membership

- Members of the Group are appointed for a period of 3 years, being re-selected for up to 2 further terms, allowing a maximum total term of 9 years.
- The membership of the group will consist of College appointed members, with all appointments subject to approval by the Council. The group’s composition shall include a diverse range of individuals to ensure effective oversight and representation, as follows:

Chair	Clinical Director of Safety and Quality
Up to 7 appointed College members	College members with discretion to co-opt members from relevant SACs as needed by the group.
Honorary officer representation	VP for Professional Practice VP for Workforce and Corporate Engagement
Lay members to provide patient/public perspectives (1–2 representatives,	
Professional Guidelines staff (non-voting, for administrative and operational support)	



Co-opted external representation dependent on the committee. Each committee will recommend organisations they should be collaborating with for the approval by Council. (Co-opted members will not be entitled to vote on any committee matters.)	NHS England NHS Wales NHS Scotland Health and Social Care Northern Ireland UKAS UK SMI
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## Appendix

The current membership consists of the following:

<b>Name</b>	<b>Role</b>	<b>Start date</b>	<b>End of (3 years)</b>
Clinical Director of Safety and Quality	<b>Chair</b>	2025	2027 (End of term as Clinical Director)
	<b>Appointed member/Co-opted from SAC</b>	2025	2028
	<b>Appointed member/Co-opted from SAC</b>	2025	2028
	<b>Appointed member/Co-opted from SAC</b>	2025	2028
	<b>Appointed member/Co-opted from SAC</b>	2025	2028
	<b>Appointed member/Co-opted from SAC</b>	2025	2028
	<b>Co-opted representative</b> NHS England	2025	2028
	<b>Co-opted representative</b> NHS Wales	2025	2028
	<b>Co-opted representative</b> NHS Scotland	2025	2028
	<b>Co-opted representative</b>	2025	2028



	Health and Social Care Northern Ireland		
	<b>Co-opted representative</b> UKAS	2025	2028
	<b>Co-opted representative</b> UK SMI	2025	2028

The Royal College of Pathologists understands the value and strength that diversity brings and we are proud to be an organisation of members from a wide range of backgrounds. We are keen to encourage and enable more people of all identities and from all backgrounds to become involved in the College.

## 1. Meetings

- Meetings are held 4 times a year, up to 2 hours per meeting.
- Discussion and decision via email or other electronic means is encouraged outside of formal meetings.
- Administrative support is provided by the Professional Guidelines team.
- The Professional Guidelines team will collaborate with the group, keeping members informed through regular communication.
- Agendas and papers will be circulated at least 1 week before each meeting
- Minutes will be made available on the College website, with access restricted to College members only.
- A quorum for PSSG meetings shall consist of at least 5 members, including the Chair.
  - Decisions and approvals require a quorum to be present to ensure representative and valid outcomes.
  - If a quorum is not met, the meeting shall be adjourned and rescheduled, with all members notified of the new date and time.



## 2. Resources

- If travel is required for a face-to-face meeting expenses will be paid to members (but not observers) of the group in line with the College's expenses policy. The expenses policy is available on the website. Claims should be made through the College's on-line finance system.

Terms of reference agreed at group meeting 12 February 2025

Chair of group Dr Michael Eden Signed



Approved by Governance Committee\_\_\_\_\_

Approved at College Council meeting\_\_\_\_\_

Review date (3 years following Council approval) \_\_\_\_\_

