Board of Directors Meeting in Public - Cover Sheet

Subject:	Quality Committee Annual Report		Date: May 2022	
Prepared By:	Patrick McCormack – Head of Regulation and Deputy Head of Clinical			
	Governance		· ·	
Approved By:	Barbara Brady, Non- Executive Director and Committee Chair			
Presented By:	Barbara Brady, Non-	Executive Director a	and Committee Chai	•
Purpose				
To provide assura	ances the Quality Corr	nmittee is performing	Approval	
its responsibilities as set out within its Terms of Reference.			Assurance	Х
			Update	
			Consider	
Strategic Object	ives			
To provide	To promote and	To maximise the	To continuously	To achieve
outstanding	support health	potential of our	learn and	better value
care	and wellbeing	workforce	improve	
X			X	
Overall Level of				
	Significant	Sufficient	Limited	None
		Х		
Risks/Issues				
Financial				
Patient Impact				
Staff Impact				
Services				
		is an element of ove		
Services	Failure to apply ag	reed governance arra		
Services Reputational	Failure to apply age reputational consec	reed governance arra quences.	angements could res	
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Services Reputational Committees/gro This report has I Executive Summ This report provid carried out its obl 2021 calendar ye It provides assura 2022 year. The tin	Failure to apply age reputational consec ups where this item been approved in its nary les a description of the igations in accordance ar.	reed governance arra quences. has been presented current form by the e activities and assur e with its terms of reference of activity undertaken of the annual governa	angements could res d before e Quality Committe rance that the Quality erence and work pro- throughout the year ince timetable to ena	e prior to board / Committee has gramme for the objectives for the