

Governing Body Terms of Reference

Policy | GOV-POL-001

Document type	Policy
Title	Governing Body Terms of Reference
Document ID	{{facility.code}}-GOV-POL-001
Version and status	1.1 Approved by the ASF Expert Committee
Prepared by	{{roles.quality_lead.name}}, Quality lead
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Effective date	{{document.effective_date}}
Next review	{{document.review_date}} (12 months, or sooner after any incident or change)
Replaces	Adapts SOP-092 (Governing Body Terms of Reference, generic) and ASF Policy 51
Standards and criteria supported	Standard 2A, criterion 2A.1 (non-negotiable)
Evidence basis	E-006, E-009
Status of this document	Recommended best-practice model. A hospital may adopt, adapt or replace it with an equivalent that meets the same criteria.

At a glance: what to do

1. Name every member of the governing body in writing, with their role and term.
2. Set out the authority of the body over safety and quality, clinical governance and financial stewardship.
3. Agree how often the body meets and what goes on the agenda each time.
4. Review the terms of reference and the membership once a year.

Stop and get help straight away if: the governing body has no named members, no written authority, or makes decisions on safety or money without a record.

1. Purpose

To set out who governs {{facility.legal_name}}, what authority they hold, and how they hold the service to account for safety, quality and money [E-006, E-009].

2. Scope

Applies to	All members of the governing body and the chief executive, who attends as an adviser
Locations	Governing body meetings and the facility's governance records
When	At all times; reviewed yearly and after any change in membership or structure
Does not apply to	Clinical decisions about individual patients, which are made under the clinical policies

3. Definitions and abbreviations

Term	Meaning in this SOP
Governing body	The board or equivalent body with legal and final responsibility for the facility
Clinical governance	The system through which the facility is accountable for the quality and safety of its clinical care

Term	Meaning in this SOP
Quorum	The minimum number of members needed for a valid decision

4. Background and rationale

A governing body that has no written authority, or whose membership is unclear, cannot be held to account for safety. The body must be able to show who decides, how decisions are recorded, and how it knows what is happening in the service.

This SOP is the working document for criterion 2A.1. Evidence is the terms of reference, the list of named members, and the minutes of the last 12 months (see GOV-REG-001 and GOV-FRM-003).

5. Responsibilities

Role	Duties in this SOP	Competence needed
Chair of the governing body	Leads meetings, makes sure safety and quality are on each agenda, signs the minutes	Governance training
Members	Attend, prepare, decide on safety and quality matters, declare conflicts (GOV-FRM-002 of the conflicts policy)	Induction to the role
Chief executive	Reports to the governing body on safety, quality and finance; implements decisions	Executive leadership
Company secretary or governance lead	Keeps the membership register and minutes; checks the terms of reference yearly	Administrative governance competence

6. Equipment, materials and resources

Item	Specification or standard	Check before use
Terms of reference (this document)	Current signed version	Dated, signed, version shown
Membership register (GOV-REG-001)	Current names, roles and terms	Matches the people who attend
Minutes template (GOV-FRM-003)	Standard headings	Used for every meeting

7. Safety and infection prevention

- Members must declare any personal interest in a decision before the decision is taken (see the conflict of interest policy, SOP-N01).
- Confidential patient information is not discussed at governing body level unless needed to make the decision, and then only in anonymised form.

8. Before you start

- Check the membership register is current before each meeting.
- Circulate the agenda and papers at least five working days before the meeting (EC).

9. Procedure

Follow the steps in order. Where a step says "If", take the action for the case that applies. Do not skip a step. If a step cannot be done, use section 11 and section 12.

Step	Action	How to do it	Key point
1	Write and approve the terms of reference.	- Set out the purpose, the authority, the membership, the quorum and the reporting lines. - State the areas of authority: safety and quality, clinical governance, financial stewardship, and appointments. - Have the terms signed by the chair and the chief executive, and record the approval date.	A written authority is the basis for every decision the body takes. Without it, the body cannot be held to account.

Step	Action	How to do it	Key point
2	Name the members.	- List each member on GOV-REG-001 with name, role, start date, term end and any declared interest. - Record the chair and the vice chair. - Update the register within 10 working days of any change.	Named members give accountability. An unnamed group cannot be held responsible.
3	Hold meetings on a set schedule.	- Hold at least four meetings a year, with at least one dedicated to safety and quality (EC). - Check the quorum at the start of each meeting and record it on GOV-FRM-003. - Record every decision on safety and quality, with the name of the member who raised it and the action owner.	Decisions that are not minuted are not decisions. Record them as they are taken.
4	Keep and approve the minutes.	- Complete GOV-FRM-003 for each meeting: attendance, declarations, decisions, actions, owners and dates. - Circulate draft minutes within 10 working days, and approve them at the next meeting. - File signed minutes for the period in section 13.	Signed minutes are the evidence the auditor will ask for first.
5	Review the terms of reference each year.	- Review the terms, the membership and the attendance record once a year. - Record the review on the change history and the next review date. - If the structure changes, update the terms before the change takes effect.	Structures drift. The yearly review keeps the written authority matched to the real one.

Decision points

- If a member has a declared interest in an item, they do not vote on it and the minutes record this.
- If the quorum is not met, the meeting may receive information but may not take decisions; the decisions are taken at the next quorate meeting or by written resolution where the terms allow (EC).

10. Special situations

Situation	What to do
Emergency decision between meetings	The chair and the chief executive may act within delegated authority, and the decision is ratified at the next meeting. Record the reason (EC).
Change of membership	The register is updated, and the new member signs the declaration of interests before first attendance.

11. Problems and escalation

- Concerns about the governing body's own conduct go to the chair; if the concern involves the chair, to the vice chair or the regulator.
- Serious safety concerns are reported to the governing body within 24 hours of the chief executive becoming aware.

12. Monitoring and compliance

What is checked	Target	How often	Who	If the target is missed
Terms of reference reviewed in the last 12 months	Yes	Yearly	Governance lead	Escalate to chair; complete within 30 days
Membership register matches attendance	100%	Each meeting	Governance lead	Correct register; report to chair
Safety and quality decisions minuted with an owner and a date	100%	Each meeting	Governance lead	Minutes corrected before approval

13. Records

Record	Where it is kept	Kept for
Terms of reference (signed)	Governance file	Current version kept, plus {{facility.records_retention_years}} years
GOV-REG-001 Register of Governing Body Members	Governance file	{{facility.records_retention_years}} years
GOV-FRM-003 Minutes	Governance file	{{facility.records_retention_years}} years

14. Training and competence

- Each new member receives an induction covering the terms of reference, safety and quality duties, and declarations (EC).
- Refresher training on governance responsibilities every two years (EC).

15. Related documents

ID	Title	Relationship
GOV-REG-001	Register of Governing Body Members	Membership record
GOV-FRM-003	Governing Body Minutes Template	Used for each meeting
GOV-SOP-001	Governing Body Meetings and Decisions on Safety and Quality	How meetings are run
SOP-N01	Conflict of Interest and Impartiality Policy	Declarations
SOP-092	Governing Body Terms of Reference (generic)	Source document

16. Evidence

ID	Source and status
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus. Quorum rules and meeting frequency are EC decisions. Legal requirements under national law set by the ASF Expert Committee.

EC = ASF Expert Committee consensus. Items marked EC are reviewed by the Committee each year.

17. Change history

Version	Date	What changed	Approver and signature
1.0	{{document.effective_date}}	First version, adapted from generic SOP-092 and ASF Policy 51	Approved by the ASF Expert Committee
1.1	{{document.effective_date}}	Internal quality review: corrected cross-references, status wording and document control	Approved by the ASF Expert Committee