

Significant Concerns Group

Terms of reference

Purpose and role

1. The overarching purpose of the Group is to support the prompt and effective management of significant concerns¹ identified by individual NHS Resolution service functions ('functions') where these give rise to the need for a coordinated organisational response. In all cases, NHS Resolution's primary concern is patient and staff safety, and public protection, with a view to supporting the reduction of risk of harm or further harm. The following should also be noted in relation to the Group's role:
 - To consider notifications from individual functions and ensure a coordinated and consistent response at a corporate level where this is required.
 - To decide, for each notification, whether NHS Resolution should take any further steps, in addition to any actions taken at local function level, to support the reduction in the risk of harm or further harm.
 - Where action is required, to agree what specific action should be taken and who will be responsible for it.
 - To monitor progress on actions agreed by the Group.
 - To provide support to individual functions on the ongoing development of effective local arrangements to identify, consider and escalate significant concerns by sharing learning and expertise. All Group members are responsible for acting as strong advocates for this organisational initiative, as well as ensuring that their respective functions are informed of ongoing developments and learning, and that these are acted upon.
 - It is not the Group's role to consider general issues of concern relating to healthcare provision. (Where such issues are raised with, or within, individual NHS Resolution functions, they should be considered and responded to separately.)
 - It is not the Group's role to consider, in isolation, broader evidence or data available to NHS Resolution (for example, themes arising from information requests or other research).

¹ A significant concern is where we identify that there is the potential for significant harm to be caused, or where significant harm has actually been caused, in relation to: a patient or a healthcare practitioner or other employee or a service or an organisation; **and** we hold information which we consider, if shared with an appropriate individual(s) within the organisation using our services and/or third parties, would support the prevention of harm or further harm.

2. It is not the role of the Group to replace local protocols for significant concerns within individual NHS Resolution functions: it is incumbent upon each function to have its own robust and documented arrangements for identifying and managing significant concerns and promptly notifying the Group.

Chair

3. Deputy Director, Advice and Appeals (if the Chair will be absent for any meeting, then the Deputy Chair will take their place.)
4. In exceptional circumstances, if neither the Chair nor Deputy Chair are available, then the Chair may nominate another permanent Group member to chair the meeting in a temporary capacity.

Membership

5. The Group's permanent membership (in addition to the Chair) is:
 - Deputy Director, Claims Management (Deputy Chair)
 - Deputy Director, Safety & Learning
 - Deputy Technical Claims Director
 - Head of Technical Claims
 - Deputy Director for Maternity and Neonatal Programmes
 - Head of Appeals, Primary Care Appeals
 - Deputy Director of Corporate and Information Governance
 - Responsible Officer and HPAN Lead
6. Members who are unable to attend can nominate a deputy to attend in their place. Deputising attendees may take part in the Group's decision-making but may not chair the meeting.

Additional attendees and access to advice

7. Additional NHS Resolution staff may be invited by the Chair to attend the meeting as required, for example, to:
 - to present case-specific information or
 - to provide specialist advice (Information Governance, Policy, Strategy and Communications, legal advice) or
 - for learning or development purposes.
8. Additional attendees will not have a decision-making role.

Quorum

9. The Group will be considered quorate when the Chair (or Deputy Chair) and three other members are present. In the exceptional circumstances (see paragraph 4 above) where another Group member is chairing the meeting, then

the meeting will be considered quorate where the temporary chair and three other members are present.

Secretariat and administration

- 10.** Papers for each meeting will be circulated two working days before the meeting. Notes and action points of the meeting will be sent to the Chair or Deputy Chair for review within five working days and then circulated to the wider Group following the Chair or Deputy Chair's review.
- 11.** Secretariat for the Group will normally be provided by the Casework Systems & Guidance Manager, Practitioner Performance Advice.

Conflicts of interest

- 12.** Group members are required to promptly and proactively declare (to the Chair or Deputy Chair) any potential conflict of interest in relation to the Group's business (whether relating to specific case notifications or other matters).
- 13.** Conflicts of interest will be flagged as a standing item at the Group's meetings.

Accountability, reporting and process

- 14.** The Group is accountable, via the Chair, to NHS Resolution's Senior Management Team.
- 15.** The Group Chair will submit to the Senior Management Team a six-monthly report on its work and wider organisational activity in respect of significant concerns. The report will address (but not be limited to) the following areas:
 - The number and type of notifications received, and their outcomes
 - Any themes or patterns identified from the notifications
 - Learning and areas for ongoing development in relation to NHS Resolution's approach to managing significant concerns
 - Actions taken by function leads to share learning and embed an effective approach to managing significant concerns in their respective areas
 - Summary of activity within local function concerns groups and processes
 - Any proposals, for consideration by the Senior Management Team, to share learning more widely with users of our services and other external stakeholders.
- 16.** The Group operates in line with its supporting guidance.

Frequency of meetings

- 17.** Monthly (with the possibility of additional/urgent ad hoc meetings as required).

Terms of reference review

18. Every twelve months or as need arises.

Version control

Date approved/reviewed (plus implementation date if different)	Version number	Main changes	Next review date
01/03/2019	1.0	New guidance	01/09/2019
08/04/2019	2.0	Tinku Mitra added to Group membership	01/10/2019
11/12/19 (19/12/19)	3.0	Updated following review and report to SMT. Introduction updated; two additional bullets added to para 1 (general concerns/broader data); job title updated (Deputy Director) and membership amended (Appeals representative and addition of RO) (paras 3 and 4).	30/04/2020
21/10/20	4.0	No substantive changes but reviewed as part of reporting to SMT	30 April 2021

Date approved/reviewed (plus implementation date if different)	Version number	Main changes	Next review date
26/05/2021	5.0	No substantive changes but reviewed as part of reporting to SMT	26 November 2021
08/12/2021	6.0	Change of Deputy Chair	08/12/2022
28/09/22	7.0	Amendment of membership – change of S&L representative	28/09/23
25/01/23	8.0	Amended job title for TCU representatives	25/01/24
18/05/23	9.0	Amendment to Group membership to represent new Deputy Director post and correction of job title for Appeals representative	18/05/24
16/11/23	10.0	Amendment to job title: Deputy Director, Safety and Learning	16/11/24
22/05/24	11.0	No substantive changes other than footnote regarding S&L representative. Reviewed as part of SMT reporting.	22/05/2025

Date approved/reviewed (plus implementation date if different)	Version number	Main changes	Next review date
20/08/2024	12.0	Amended text to allow for temporary chair if Chair and Deputy are not available. Changed MSE to PSC. Updated job title of EN representative	20/08/2025
06/02/2025	13.0	Addition of text about COI Amended text about circulation of meeting outcome (Chair review first) Membership change – addition of DD for Maternity Programmes and Evaluations and removal of EN clinical lead.	06/02/2026
09/10/2025	14.0	Reviewed at the same time as update to corporate guidance. Removal of footnote re: S&L membership	09/04/2026

Date approved/reviewed (plus implementation date if different)	Version number	Main changes	Next review date
17/08/2026	15.0	Removed historical intro text regarding introduction of SC framework in 19/20 Amended job title: Deputy Director for Maternity and Neonatal Programmes Added to para 15 (SMT reporting): Summary of activity within local function concerns groups and processes Changing ToR review period from 6 to 12 months or as need arises	17/08/2027