

Terms of Reference for MSI International Clinical Governance Committee

Authority

The Marie Stopes International (MSI) International Clinical Governance Committee (ICGC) is a subcommittee of the MSI Board of Directors and shall conduct all activities within these Terms of Reference

Purpose and Responsibilities

- 1. The purpose of the ICGC is to:
- Provide assurance to the MSI Board that there are robust systems, structures, processes and accountabilities in place for identifying and managing significant risks that the organisation and its clients face due to matters related to MSI clinical services
- Ensure adequate resources are made available to deliver safe, effective, efficient, and caring services to clients in line with MSI clinical policies, guidelines, and other MSI global clinical tools
- Hold country and regional leadership accountable for clinical quality and client safety standards defined in the MSI Partnership Manual and the MSI Policy on Clinical Quality and Accountability
- Issue enforcement notices and enact secession of services in circumstance where country directors fail to act upon prior ICGC guidance to safeguard their clients
- 2. The responsibilities of the ICGC are set out in the Appendix

Membership and Quorum

- 1. The International Clinical Governance Committee shall consist of at least 2 Trustees and the following shall be regular attendees:
- Chief Executive MSI
- Medical Director MSI
- Clinical Governance Lead MSI
- Chief Operating Officer MSI

Other MSI employees who may be invited to attend include:

- MSI Senior Technical Advisors
- Other members of MSI Executive Team (as appropriate)
- 2. The Chair shall be appointed by the board for a fixed term. All other Trustees shall have the right to attend.
- 3. The meeting will be quorate if at least 2 trustees are in attendance.



Attendance and frequency of meetings

The committee will meet three times a year and more frequently if required. The Chair may invite other members of the organisation or external advisers at the Company's expense, to present information or to answer questions as it considers necessary.

Reporting

□ The ICGC will report in writing to the board after each meeting. Minutes of each meeting will be made available to all relevant parties.

Review and evaluate

□ The Committee will carry out an annual review of its performance and remit and assess where change may be needed.

Approved	:	Reviewed by the Committee annually
Last Review	:	Reviewed by the Board on 6 July and approved on 21 December 2018



Appendix

The responsibilities of the Committee shall be:

Culture

□ Foster throughout MSI a culture of high quality client care, continuous improvement of client safety, and leadership accountability for client safety

Validate MSI clinical standards

- Review clinical governance system framework and performance, including Quality Technical Assistance, incident management, clinical competency assessments, and other clinical governance mechanisms (see overview of clinical governance systems attached)
- Review, and where required, ratify MSI clinical policies, guidelines, and other global clinical tools.
 Note that external experts will be consulted as necessary to affirm compliance with international best practice standards
- Through effective sector monitoring, enable MSI to recognize and adopt new clinical governance tools and mechanisms in a proactive manner, and promote opportunities for innovation and/or research
- Review systems in place to ensure quality of pharmaceutical products, surgical equipment, and medical commodities across the partnership
- Provide regular assurance reports to the MSI Board and elevate critical matters related to clinical standards and clinical governance systems

Safeguard MSI clients

- Review clinical service related risks that threaten the safety of clients or the achievement of MSI strategic objectives in all country programmes and service channels. Accordingly, the ICGC shall receive highlight reports regarding the following areas:
 - o Quality Technical Assistance assessments
 - o Clinical and product-related incident management
 - o Clinical Quality Quarterly Reporting with Medical Advisory Team meetings
 - o Clinical training and competency
 - Product quality including Q-Trak
 - o Client experience and clinical effectiveness
 - Clinical risk profiling
 - Other areas that affect, but may not be directly linked to MSI clinical governance systems. These include, but are not limited to, reports on specific service channels, service delivery statistics, and donor reports
- Agree on actions to mitigate clinical service related risks and monitor their implementation, underpinned by core MSI standards defined in the MSI Partnership Manual and the MSI Policy on Clinical Quality and Accountability



- Review in an emergency manner, critical client safety issues identified by MDT at field level (quorum fulfilled remotely as necessary). Note that in urgent or high risk cases, the MDT can apply for enforcement action and the CEO can approve without ICGC confirmation.
- Removal of an enforcement action will require ICGC approval during a regular committee meeting or an extraordinary session, as necessary

Effectiveness of Arrangements

The effectiveness of the ICGC will be validated in the following ways:

- Robust clinical governance systems covering all service channels in all MSI country programmes (including South Africa, and Mexico and Australia)
- Adequacy of regulatory compliance of core clinical services in more highly regulated countries (e.g. South Africa, Mexico and Australia). Note that country directors are responsible for disclosure of relevant requirements

Monitoring Compliance

The terms of reference of the ICGC shall be reviewed by the Committee and approved by the MSI Board annually.