



## Nomination for APM Clinical Quality Committee | Trainee Rep

Nominations for election as an APM Clinical Quality Committee Member are now open. The Member will be elected to the committee for a period of four years.

Please return the nomination paper by email or post with a statement from the nominee of no more than 200 words describing her/himself. This will be sent out with the ballot paper.

Please obtain the signatures of one nominator and one seconder.

<b>I wish to nominate</b>		<b>APM No.</b>	
<b>Address</b>			

<b>Nominated by</b>		<b>APM No.</b>	
<b>Signature</b>		<b>Date</b>	
<b>Address</b>			

<b>Seconded by</b>		<b>APM No.</b>	
<b>Signature</b>		<b>Date</b>	
<b>Address</b>			

<b>I confirm that I am willing to be nominated to the APM Clinical Quality Committee.</b> (Signed by Nominee)			
<b>Signature</b>		<b>Date</b>	
<b>Email Address</b>			

## About the Committee

The Clinical Quality Committee' is an advisory committee to the Executive Board of the APM, on clinical quality matters. The committee aims to:

- Encourage the use of data, such as dependency scores and outcome measures, to improve the quality of medical practice and explore their role in benchmarking the promotion of quality improvement activities including audit and service evaluation such as FAMCARE and the audit /QiP prize.
- share intelligence relating to in Palliative Care and Medicine across the membership such as relevant national reports, NICE guidelines, Cochrane reviews etc.
- support consultants who are young in post (first 5 years), that is, within the committee's remit.
- support processes and standards of medical appraisal and revalidation and will liaise with appropriate bodies including RCP, NHS England and Hospice UK.

The committee will serve as a reference source to the Executive, and in partnership with other APM committees and other organisations, to co-ordinate quality and effectiveness, and all related matters.

## About the Role

### Key Accountabilities and Areas of Responsibility

- to be an advisory Committee to the APM Board
- to relay progress from the CQC to the trainees committee via attendance at regular meetings (virtual + 1 face to face).
- support the APM membership with respect to the processes and standards of appraisal and revalidation
- oversight of the APM programme of benchmarking, audit and data gathering
- to propose and establish a mechanism for signposting to clinical guidelines that are relevant for APM members
- continuance and development as required of the APM mentoring scheme
- to monitor intelligence relating to outcomes in Palliative Medicine
- to advise the APM Board on matters pertaining to workforce planning to enable provision of accurate and appropriate advice to relevant bodies on workforce requirements for delivering specialist palliative care services
- to collect, analyse and present workforce and workload data relating to the Palliative Medicine workforce
- to support workforce strategic planning and, where appropriate, advise on commissioning of services
- to work closely with the RCP SAC in Palliative Medicine on all issues related to workforce planning
- to work synergistically with other professional groups about specialist palliative care workforce needs
- the Committee will elect a Chair from among its members at the first meeting of the year after the APM AGM

### Time Commitment

- the workload of the Committee varies throughout the year depending on both Committee priorities and national topical issues but should not be onerous
- frequency of meetings: 4 times per year (1 face to face; 3 teleconference)
- the Committee can have a maximum of 1 face to face meetings per year

### Remuneration and Expenses

- this is a non-remunerated role
- reasonable expenses, in line with the APM Expenses Policy, are paid for attendance at meetings related to the work of the Committee