Salisbury
NHS Foundation Trust

Medical Devices Committee

Terms of Reference

Document Change Control				
Date of version	**Version number**	**Type of Revision Major/minor**	**Description of Revisions**	**Author**
30/10/2018	1	Format	New Template	Mandy Cripps
4/10/2021	2	Minor	Revised content, role of group. New template	Mandy Cripps
26/09/2024	3	Minor	Revised content	Alex Sims
17/04/2026	4	Minor	Changes to meeting frequency	Alex Sims

Date Adopted	July 2026
Review Frequency	Every two years
Terms of Reference Drafting	Head of Service Medical Device Management Service
Review and Approval	Medical Devices Committee
Adoption and ratification	Capital Control Group

1. Purpose

1.1 The Medical Devices Committee (MDC) will focus on the achievement of the standards relating to Medical Devices Management, Care Quality Commission Requirements, and the Decontamination of Re-usable Medical Devices.

1.2 The aim of the group is to ensure the procurement of medical equipment to provide safe, high quality and efficient patient care.

1.3 The Medical Devices Committee will be responsible for coordinating the activity within the Trust of all capital medical device related matters.

1.4 To achieve this aim, six Technology Working Groups are established as sub-groups of the MDC. The portfolio areas for these groups are:

- Critical Devices
- Imaging
- Assistive Technology
- Pathology and Laboratory
- Operating Theatres and Endoscopy

These groups report directly to the Medical Devices Committee. To this end, the Chair of each of the above groups is a member of the Medical Devices Committee. The Chairs will each submit an update of their TWG to the MDC.

1.5 The Medical Device Safety Officer and Decontamination Lead provides an update to the MDC on wider medical device safety topics to include:

- updates on local or national policy, governance and guidance
- incident reporting trends and learning from relevant Patient Safety Reviews
- medical device risks
- national safety alerts and manufacturers Field Safety Notices
- training data
- specific MDSO/DL activity

2. Authority

2.1 The MDC is a sub-committee of the Capital Control Group which is a standing committee of the Strategic Capital Group and then Trust Management Committee.

2.2 The MDC is authorised by the Capital Control Group (Cap.CG) to conduct its activities in accordance with its terms of reference.

2.3 The MDC can provide assurance to the Health and Safety Committee and the Patient Safety Steering Group as required.

3. Membership and Attendance

3.1 Membership

- Chair
- Technology Working Groups Chairpersons or representative
- Head of Medical Device Management Services – Deputy Chair
- Medical Devices Safety Officer and Trust Decontamination Lead
- MDMS Operational Manager – administrative support
- Medical Electronics Representative
- Director of Finance or Representative
- Divisional Management Representative(s)
- Procurement Lead
- IG Representative
- IT Representative
- Estates Representative

3.2 Each member must nominate a deputy to attend in their place when they are unable to. These deputies will have voting rights.

3.3 In the event of the Chairperson being unable to chair a meeting, the meeting will be chaired by the Head of Medical Device Management Services. Meetings will only be cancelled under exceptional circumstances.

4. Quorum

The Group shall be quorate when a minimum of the following members are present: The Chair (or deputy), a Finance representative, representatives from a minimum of three Technology Working Groups, a member of Medical Device Management Services (MDMS) Team and a Procurement representative.

5. Attendance

Only members of the Committee or their nominated representatives have the right to attend meetings. However, other individuals and officers of the Trust may be invited to attend for all, or part of any meeting as deemed appropriate. All members are required to notify the MDMS in advance of non-attendance.

6. Role and Function

The objectives of the Committee can be categorised as follows:

6.1 Supporting MDMS, Procurement and clinical teams to ensure patient and staff safety throughout the whole lifecycle of a medical device.

6.2 The annual prioritisation for both capital and non-capital medical device acquisition.

6.2 Approval of bids in relation to available funding and strategic direction, to inform the Capital Control Group.

6.3 Facilitating equipment bids to support agreed service developments.

6.4 Developing a strategic plan for replacement of medical equipment.

6.5 Ensuring NICE guidelines are taken into account in procurement decisions.

6.6 Ensure compliance with Health and Safety guidance.

6.7 Ensuring training and decontamination issues are taken into account in procurement decisions.

6.8 Ensuring equipment is purchased in line with the agreed criteria for the Trust.

6.9 Support the acquisition and implementation of new Technology.

6.10 Submitting a progress report to Cap.CG, as requested.

6.11 Ensure recommendations from Field Safety Notices and National Patient Safety alerts are considered in the prioritisation of procurement of medical devices.

6.12 Ensuring charitable medical equipment purchases conform to the same standards as non-charitable.

6.13 Consider, and escalate as required, MDMS reporting on the activity regarding service, maintenance, training, incidents & risks on medical equipment.

7. Conduct of Business

7.1 **Administration**

7.1.1 The administrative support shall be provided by MDMS. The secretary to the committee shall attend to take minutes of the meeting and provide appropriate support to the Chair and Committee members.

7.1.2 The Committee shall have procedural support administrated by the Head of Service MDMS, Procurement lead and Finance lead.

7.1.3 Meeting dates will be arranged annually in advance and be supported by a work program.

7.2 **Frequency**

The Committee must consider the frequency and timing of meetings needed to allow it to discharge all its responsibilities. Meetings will be held quarterly as a minimum or more frequently as determined by the Chair.

7.3 **Notice of meetings**

7.3.1 An agenda of items to be discussed will be made available to each member of the Committee and any other person required to attend, no later than five working days before the date of the meeting. Supporting papers will be shared with Committee members and to other attendees as appropriate, at the same time.

7.3.2 In normal circumstances, a minimum notice period of two weeks must be given for any other meetings of the Committee. Emergency meetings can be arranged, at shorter notice, if this is approved and evidenced as such, by the majority of the members of the Committee.

7.4 **Reporting**

7.4.1 Formal minutes of Committee meetings will be recorded; and will normally be confirmed as accurate at the next meeting of the Committee.

7.4.2 The Chair of the Committee or their nominated deputy shall draw to the attention of the Cap.CG and Health and Safety Committee any issues that require disclosure.

7.4.3 Matters of concern will be escalated to the appropriate Executive Director.

8. Review

7.5 These Terms of Reference will be subject to a bi-annual review.

7.6 As part of this assessment, the Committee shall consider whether it receives adequate and appropriate support in fulfilment of its role and whether its current workload is manageable.