The Clinical Governance Committee shall be appointed by the Board on the recommendation of the Nomination committee in accordance with the company’s Articles of Association.

I REPORTING TO

NMC HEALTH BOARD

II RESPONSIBILITIES

The Committee will:

1. Oversee governance structures, processes and controls that are in place across the NMC Healthcare hospitals to:
   (a) Promote safety and excellence in patient care;
   (b) Identify, prioritize and manage risk arising from clinical care on a continuing basis;
   (c) Ensure the effective and efficient use of resources through evidence-based clinical practice;
   (d) Protect the Health & Safety of employees and all others;
   (e) Review of quality in relation to patient satisfaction.

2. Review the systems of clinical governance, monitoring that they operate effectively and that action is being taken to address any areas of concern;

3. Encourage continuous improvement and obtain assurance that systems are in place to deliver it;

4. Review clinical performance indicators quarterly to gain assurance;

5. Review and approve special reports;

6. Review compliance to local Health Authority requirements and standards.

7. Ensure that the Audit Committee undertake an annual review of the performance and functioning of the Quality Division of NMC Healthcare through the internal audit function.

8. The Chair of the Committee to liaise regularly with the Chair of the Audit Committee to ensure that any risks highlighted in the review work of each of the Committees is known within each committee in order that both committees can effectively challenge management in relation to key business risks
III  FREQUENCY OF MEETINGS

Meetings
The Committee shall meet quarterly and as needed.

Quorum
The Committee’s Meeting requires the minimum presence of the Chairperson and two of the members to constitute a formal forum for the committee.

Vote
In the event of a tie in voting the Chairperson’s vote shall be a casting vote.

Tenure
Each member shall hold office as a committee member for a period of two years. This may be extended to a maximum of another two years by a Board resolution.

IV  MEMBERSHIP

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
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</thead>
<tbody>
<tr>
<td>Ms. Heather Lawrence, OBE</td>
<td>Chairperson</td>
</tr>
<tr>
<td>Dr Ayesha Abdullah</td>
<td>Independent Non-Executive Director</td>
</tr>
<tr>
<td>Dr Nandini Tandon</td>
<td>Non-Executive Director</td>
</tr>
<tr>
<td>Mr. Binance Shetty</td>
<td>Chief Operating Officer, NMC Health plc</td>
</tr>
<tr>
<td>Invitees as required.</td>
<td></td>
</tr>
</tbody>
</table>

V  MEETING MINUTES

Minutes of the meeting are recorded and prepared by the Company Secretary or his nominee.

VI  DISTRIBUTIONS:

Agenda of the meeting is distributed One (1) week prior to the next meeting and minutes of the meeting is distributed One (1) week after the meeting.