

East Kent Hospitals University

NHS Foundation Trust

TERMS OF REFERENCE

IMPROVEMENT PLAN DELIVERY BOARD

1. CONSTITUTION

The Improvement Plan Delivery Board (Delivery Board) is constituted as a time-limited committee of the Board of Directors and has no executive powers, other than those specifically delegated in these terms of reference.

2. PURPOSE

The purpose of the Delivery Board is to manage and monitor progress against the CQC High Level Improvement Plan (HLIP) (and associated action plans) to ensure that the Trust delivers the plan on time and within budget. The Delivery Board will also take the lead on communication with staff, regulators and external stakeholders.

3. OBJECTIVES

- 3.1. Maintain, update and review progress of the HLIP against the key dates and deliverables working with Divisions to ensure progress is being made in a timely way.
- 3.2. Develop a system for co-ordinating, monitoring and evidencing progress against the HLIP and underpinning plans, e.g. We Care, Delivering Our Culture.
- 3.3. Identify and review key issues and risks that may prevent or delay the achievement of the HLIP, gaining assurance that they are being appropriately logged, managed and mitigated. Receive escalation reports where viability of key deliverables is considered to be at risk and advise on contingencies. Ensure that the significant risks are escalated appropriately to the Corporate Risk Register.
- 3.4. Co-ordinate with other internal action plans to ensure consistency and that there are no conflicts or duplications.
- 3.5. Receive external governance review reports and agree an action plan for delivery with the review sponsor. The Delivery Board will then maintain, update and review progress of these action plans against the key dates and deliverables, working with the action owners to ensure progress is being made in a timely way. (These plans should then be considered “underpinning plans”, and should map directly to CQC recommendations).
- 3.6. Provide assurance that the detailed action plan is being managed within the Divisions to enable the HLIP to be delivered, including support required from partners, and where necessary escalate any issues.
- 3.7. Establish a methodology for prioritising bids for resources directly related to implementation of the HLIP.

- 3.8. Management of the CQC Improvement Plan budget.
- 3.9. Develop and manage the change management process, the issues log and the risk register.
- 3.10. Oversee preparation of the Progress Review Meetings with Monitor and manage the resulting actions
- 3.11. Develop and manage the process to ensure that the monthly update of the NHS Choices website to ensure that the return is signed off and delivered to Monitor in a timely way.
- 3.12. Create a system for collating and auditing the evidence that actions have been completed.
- 3.13. Produce a communications plan to ensure staff and stakeholders are regularly informed of progress made against the HLIP.
- 3.14. Respond to and manage all requests for information relating to the HLIP particularly requested from Monitor and the CQC.

4. MEMBERSHIP AND ATTENDANCE

4.1. Members

Programme Director / Clinical Chair (Chair)
Programme Manager
Chief Executive
Chief Nurse and Director of Quality
Director of Operations
Medical Director
Director of Finance and Performance Management
Director of Strategy and Capital Planning
Director of Human Resources
Director of Communications
Divisional Representation from Urgent Care and Long Term Conditions
Divisional Representation from Surgery
Divisional Representation from Specialist Services
Divisional Representation from Clinical Support Services

4.2. Attendees

Improvement Director
CCG Chief Nurse
CCG Clinical Chair
Staff Side Named Representative
Staff Governors (4)

4.3. Quorum

The intention is to reach decisions through consensus and once decisions are taken, to sustain a 'corporate position'. However, should it be necessary to vote on issues, at least 2 Executive Directors' (or their deputies), two Divisional Representatives' plus the Chair or their deputy.

4.4. Attendance by Members'

The Chair or their nominated deputy of the Committee will be expected to attend 100% of the meetings. Other Committee members will be required to attend a minimum of 75% of all meetings and be allowed to send a Deputy to one meeting per annum.

4.5. Attendance by Officers'

Other staff may be co-opted to attend meetings as considered appropriate by the Committee on an ad-hoc basis.

5. FREQUENCY

- 5.1. The Delivery Board shall meet monthly. The Chair may call additional meetings to ensure business is undertaken in a timely way.

6. AUTHORITY

- 6.1. The Delivery Board is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any member of staff and all members of staff are directed to co-operate with any request made by the Delivery Board.
- 6.2. The Delivery Board is authorised to create sub-groups or working groups, as are necessary to fulfil its responsibilities within its terms of reference. The Delivery Board may not delegate executive powers (unless expressly authorised by the Board) and remains accountable for the work of any such group.
- 6.3. The Delivery Board is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experience if it considers this necessary or advantageous to its work.

7. SERVICING ARRANGEMENTS

- 7.1. The Delivery Board will be serviced by the Delivery Board Executive Assistant.
- 7.2. Papers will be sent prior to meetings and members will be encouraged to comment via correspondence between meetings as appropriate.

8. ACCOUNTABILITY AND REPORTING

- 8.1. The Delivery Board is accountable to the Board of Directors.
- 8.2. Minutes will be reported to the Board of Directors once they have been approved by the Chair along with exception reports as agreed by the membership of this Delivery Board.

9. MONITORING EFFECTIVENESS AND REVIEW

- 9.1. The terms of reference will be reviewed and approved by the Board of Directors' on an annual basis.