

MAJOR PROJECTS AUTHORITY

Terms of Reference

1. CONSTITUTION

- 1.1 The Board hereby resolves to establish a Committee of the Board to be known as the Major Projects Authority (The Committee). The Committee has no executive powers, other than those specifically delegated in these Terms of Reference. Its terms of reference are set out below and can only be amended with the approval of the Trust Board.

2. AUTHORITY

- 2.1 The Committee 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 employee and all employees are directed to co-operate with any request made by the Committee.
- 2.2 The Committee is authorised by the Board to instruct professional advisors and request the attendance of individuals and authorities from outside of the Trust with relevant experience and expertise if it considers this necessary or expedient to carrying out its functions.
- 2.3 The Committee is authorised to obtain such internal information as is necessary and expedient to the fulfilment of its functions.

3. PURPOSE

- 3.1 The purpose of the Committee is to provide the Board with assurance concerning the strategic direction to support the project to establish the Midland Metropolitan Hospital (MMH) and that the programme of interim reconfigurations is consistent with the long term direction towards the new hospital. The Committee will focus specifically on the delivery of the MMH business case *NOTE: Proposals to establish any material new performance objectives or milestones will be considered by members at Clinical Leadership Executive (CLE) and resolution agreed by the Chair and lead director.*

4 MEMBERSHIP

- 4.1 The Committee will comprise of not less than three Non-Executive Directors, the Director of Strategy & Organisational Development, Chief Executive, Chief Operating Officer, Director of Finance & Performance Management and Medical Director.
- 4.2 The Chair of the Committee will be a Non-Executive Director and will be appointed by the Trust Chair. If the Chair is absent from the meeting then another Non-Executive Director shall preside.

- 4.3 A quorum will be 3 members, of which there must be at least one Non-Executive Director and one Executive Director.
- 4.4 Members should make every effort to attend all meetings of the Committee and are mandated to attend 80% as a minimum annually.

5 ATTENDANCE

- 5.1 The MMH Project Manager and the Redesign Director -'Right Care, Right Here' will attend the meetings.
- 5.2 All other Non-Executive Directors shall be welcome to attend and all members of the Trust Board will receive papers to be considered by the Committee.
- 5.3 The Chairman and Chief Executive will be given a standing invitation to the meetings.
- 5.4 Other Executive Directors or any other individuals deemed appropriate by the Committee may be invited to attend for specific items for which they have responsibility.
- 5.5 The Head of Corporate Governance shall be secretary to the Committee and will provide administrative support and advice.

The duties of the Head of Corporate Governance in this regard are:

- Agreement of the agenda with the Chair of the Committee and attendees with the collation of connected papers
- Taking the minutes and keeping a record of matters arising and issues to be carried forward
- Advising the Committee as appropriate

6 FREQUENCY OF MEETINGS

- 6.1 Meetings will be held on alternate months, with additional meetings where necessary.

7 REPORTING AND ESCALATION

- 7.1 Following each committee meeting, the minutes shall be drawn up and submitted to the Chair of the committee in draft format. The draft minutes will then be presented at the next Committee meeting where the person presiding at it will sign them. The approved minutes will be presented to the next immediate public Trust Board meeting for information.
- 7.2 The Chair of the Committee will provide an oral report to the next Trust Board after each Committee meeting, highlighting the matters on which future focus will be directed.
- 7.3 The Chair of the Committee shall draw to the attention of the Trust Board and issues that require

disclosure to the full Board or require Executive action.

7.4 The Committee will provide an annual report to the Trust Board on the effectiveness of its work and its findings, which is to include an indication of its success with delivery of its work plan and key duties.

7.5 In the event that the Committee is not assured about the delivery of the work plan within its domain, it may choose to escalate or seek further assurance in one of five ways:

- (i) insisting on an additional special meeting;
- (ii) escalating a matter directly to the full Board;
- (iii) requesting a chair's meeting with the Chief Executive and Chairman;
- (iv) attending the relevant Executive committee to challenge progress directly; and
- (v) asking the Audit Committee to direct internal, clinical or external audit to review the position

8 REVIEW

8.1 The terms of reference should be reviewed by the Committee and approved by the Trust Board annually.

9 DUTIES

9.1 The Committee shall draw on the standing data set within the integrated performance report that relates to long term goals, Trust objectives, the annual corporate & financial plans and national requirements to seek assurance through:

9.1.1 The receipt of reports at each meeting outlining progress with the long term delivery plan appropriate to the domain in which the Committee is providing assurance, paying attention to the depth and breadth of delivery in the Trust, principally through Group level performance within its domain.

9.1.2 The receipt of reports on compliance with key national and local targets relevant to the remit of the Committee

9.1.3 The receipt of reports which focus on improvement or recovery to address areas of material deviation from the long term delivery plan or areas where poor performance against national or local targets is identified

9.3 To receive all external reports on the Trust that are deemed to fall within the remit of the Committee, seeking assurance that actions are being taken to address recommendations and other issues identified and that learning is promulgated and acted upon

9.4 To seek assurance that the Trust is complying with relevant policies and statutory guidance that falls within the remit of the Committee

9.5 To receive reports on key risks to the Trust which fall within the remit of the Committee and seek assurance that sufficiently robust mitigating actions are in place to manage these

9.6 To seek assurance on the development of the long term financial model (LTFM) and business case to

facilitate Trust Board sign off prior to submission for approval at each stage.

9.7 To seek assurance that the Trust is actively engaging with Clinical Commissioning Groups (CCGs), Trust Development Agency (TDA), Department of Health (DH), Monitor and HM Treasury (HMT) throughout the MMH project to support timely approvals at each stage.

9.8 To seek assurance on the adequacy of preparation for the Competitive Dialogue (CD) process ensuring that best practice will be carried out in line with EU regulations.

9.9 To facilitate Trust Board approval of MMH project procurement documents by providing robust assurance and guidance as required.

9.5 To seek assurance on the robustness of the approval process for the MMH and reconfiguration project plans and the arrangements for monitoring progress against plan.

9.6 To seek assurance on the robustness of the approval process for the MMH and reconfiguration project budgets and monitor expenditure against plan.

9.7 To seek assurance on the robustness of the mechanism for escalation of risks to the Corporate Risk Register as they arise to ensure successful delivery of the project and reconfigurations.

9.8 To seek assurance that the relationships with key stakeholders are well managed to maintain positive support for the MMH Project and reconfigurations, including consultation where necessary.

9.9 To seek an awareness of how the broader political, economic and policy context may affect the MMH project and reconfigurations to ensure continuing alignment.

9.10 To seek assurance that a continuous review of performance against the agreed activity and capacity model is in place and that the clinical service model that underpins the MMH business case in order to provide assurance to the Trust that progress is in line with expected trajectories.

9.11 To seek assurance on any additional matter referred to the Committee from the Board