

Trust Management Committee

DRAFT Terms of Reference

1. CONSTITUTION

- 1.1 The Trust Management Committee has been constituted by the Trust Board and is the executive decision-making committee of the Trust. It has the executive powers specifically delegated in these terms of reference.

2. AUTHORITY

- 2.1 The Trust Management 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 colleague and all colleagues are directed to co-operate with any request made by the Trust Management Committee.
- 2.2 The Trust Management Committee is authorised by the Board to obtain outside legal or other independent professional advice and to secure the attendance of outsiders with relevant experiences and expertise if it considers this necessary and expedient to the fulfilment of its duties.

3. PURPOSE

- 3.1 The purpose of the Trust Management Committee is to provide the Board with assurance concerning all aspects of delivering the strategic direction of the Trust and its associated plans.
- 3.2 The Trust Management Committee will set appropriate frameworks and policies to support delivery of the organisation's Strategic Objectives – Patients, People, Population. Using the frameworks in place the Trust Management Committee will continually monitor and review the performance of the Trust and put in place corrective measures where necessary in line with the local Accountability Framework.
- 3.3 The Trust Management Committee will oversee development of the Trust's annual plan so that when presented to the Board for approval it is robust in terms of its objectives, performance and improvement measures, investment priorities and affordability.

- 3.4 The Trust Management Committee will enable alignment between the Core Organisation and MMUH Programme Company in pursuit of the Strategic Objectives.
- 3.5 The Trust Management Committee will ensure that there is appropriate integration, connection, and liaison among individual clinical services, between clinical groups and corporate functions and between strategic and operational matters within the Trust and between system / Place partners.
- 3.6 The Trust Management Committee will support individual Chief Officers to deliver their delegated responsibilities by providing a forum for briefing, exchange of information, mutual support, resolution of issues and achievement of agreement.
- 3.7 The Trust Management Committee will assure the Board through consultation with appropriate Board Committees, as necessary, that the structures, systems, and processes are in place and functioning to support the Committees' work as set out in the terms of reference.
- 3.8 The Trust Management Committee will promote and embed the Trust values - Ambition, Respect and Compassion - and reinforce a culture of quality improvement, compassionate leadership and engagement.
- 3.9 The Trust Management Committee is the formal route to support the Chief Executive Officer in effectively discharging their responsibilities as Accountable Officer.

4. MEMBERSHIP

4.1 The list below constitutes the members of the Trust Management Committee.

- Chief Executive Officer
- Chief Finance Officer
- Chief Nursing Officer
- Chief Medical Officer
- Chief Operating Officer
- Chief Governance Officer
- Chief Development Officer
- Chief Strategy Officer
- Chief People Officer
- Chief Integration Officer
- Managing Director - MMUH Programme Company
- MMUH Delivery Director
- Executive Director of Communications
- Executive Director of IT and Digital
- Clinical Group Directors x5
- Clinical Group Directors of Operations x5
- Clinical Group Directors of Nursing x4
- Head of Midwifery
- Director of Midwifery
- Group Director of Healthcare Professionals
- Chief Allied Health Professional
- Director of Estate Development
- Head of Improvement
- Trust Convenor
- FTSU Lead Guardian

- 4.2 The Chair of the Trust Management Committee will be the Chief Executive Officer who will have overall responsibility for the performance of the Committee and the final decision on action required to comply with the terms of reference.

Attendance

- 4.3 Committee members are expected to attend at least three quarters of all meetings each financial year. An annual register of attendance of members will be published by the Committee.
- 4.4 If members are unable to attend, a deputy may attend with the agreement of the Chair of the Committee. The nominated deputies for each Chief Officer or Group Director should be specifically identified and should not be different for each meeting of the Committee they attend. This should only happen because of unforeseen absence or by special arrangement agreed in advance with the Chief Executive Officer. Deputies will be counted for the purpose of the attendance record.
- 4.5 Deputies must be briefed in advance by the person whose absence is being covered so they are able to participate fully in the discussions and represent the views of their clinical group or area of responsibility.
- 4.6 Other Trust officers will be invited to attend for specific agenda items, particularly when the Trust Management Committee is discussing areas for which they are the relevant professional lead or subject matter expert.
- 4.7 The Trust Management Committee will gain the views and opinions of patients through existing engagement and involvement routes.

Quorum

- 4.8 The quorum necessary for the transaction of business will be one third of the members and must include the Chair of the Committee (or nominated deputy), at least 3 Executive Directors and at least one representative from each clinical group.

5. FREQUENCY OF MEETINGS

- 5.1 Meetings of the Trust Management Committee will be held on the last Tuesday of each month. The Chief Executive Officer, as Chair of the Committee, is authorised to alter the timing and frequency of the meeting if required to ensure effective operation of Trust activities and will notify the Trust Management Committee if any changes are required on a more permanent basis.

6. SPECIFIC DUTIES

The agenda for Trust Management Committee meetings will be structured to allow time for strategic debate and discussion of the current and future issues affecting the Trust and the wider health and social care system.

- 6.1 Develop and agree objectives for submission to the Trust Board, in the form of the Annual Plan, to deliver the Trust Strategy and agree detailed capital and revenue business cases to deliver the objectives.
- 6.2 Develop the Trust's clinical service strategies, ensuring co-ordination and alignment across Clinical Groups.
- 6.3 Ensure all clinical groups and corporate directorates are delivering the critical path actions that enable a safe and timely move into MMHU as per the agreed Programme.
- 6.4 Closely monitor standards of care, quality and safety by ensuring appropriate actions are taken.
- 6.5 Develop, agree and monitor implementation of plans to improve the efficiency, effectiveness and quality of the Trust's services.
- 6.6 Identify and mitigate risk by monitoring the Corporate Risk Register, reviewing action plans to ensure their delivery.
- 6.7 Monitor the delivery of the Trust's service activity and financial objectives and agree actions, allocate responsibilities, and ensure delivery where necessary to achieve the Trust's objectives or other obligations.
- 6.8 Devise the Trust's annual and longer-term capital programme and monitor its delivery.
- 6.9 Receive recommendations from the Business Investment Group and make decisions to approve business cases from £50k up to £500k.
- 6.10 Monitor and ensure delivery of specific actions agreed by the Board or its Committees.
- 6.11 Agree all relevant policies – other than those retained by the Board - to ensure delivery of external and internal governance and best practice requirements and compliance.
- 6.12 Approve the terms of reference for the executive groups of the Trust Management Committee, delegate work as appropriate and hold the respective Chairs to account for compliance with their responsibilities.

Executive Groups

6.13 The Trust Management Committee is supported by the following executive groups:

- a) Executive Quality Group
- b) People and OD PMO
- c) Performance Management Group
- d) Place Based Partnership Group
- e) Risk Management Group
- f) MMUH Programme Group
- g) Clinical Group and Corporate Directorate Performance Reviews

6.14 The Chair of the Committee is authorised to establish such additional groups as they determine necessary to support the Trust Management Committee in discharging its duties.

6.15 The Chair of the Committee will determine the reporting frequency and format from the executive groups in conjunction with the Trust Management Committee.

7. ACCOUNTABILITY AND REPORTING ARRANGEMENTS

7.1 The Trust Management Committee is directly accountable to the Trust Board.

7.2 As Chair of the Trust Management Committee, the Chief Executive Officer, will use their monthly report to refer issues to the Board.

7.3 The minutes of the Trust Management Committee will be formally recorded and will be available to the Board on request.

7.4 Where the Chair of the Committee considers appropriate, they will draw to the Board's attention any issues that require disclosure or escalation.

8. MONITORING EFFECTIVENESS

8.1 The Trust Management Committee will conduct an annual review of its effectiveness and provide an annual report to the Board on its work in discharging its responsibilities, delivering its objectives and complying with its terms of reference, specifically commenting on relevant aspects of the Board Assurance Framework and relevant regulatory frameworks.

8.2 The terms of reference of the Trust Management Committee will be reviewed at least annually by the Committee and approved by the Board.

9. OTHER MATTERS

9.1 The Trust Management Committee will be supported administratively by the Associate Director of Corporate Governance / Trust Secretary, whose duties in this respect will include:

- a) Agreement of the annual workplan with the Committee, ensuring that this is regularly reviewed, updated and circulated to all members periodically throughout the year.
- b) Finalisation of each meeting’s agenda with the Chair of the Committee.
- c) Circulating a request for papers prior to the submission deadline and collating papers.
- d) Ensuring that the agenda and papers are distributed five working days in advance of the meeting.
- e) Ensuring that a record of the meeting is taken, including a record of specific decisions taken, matters arising and that issues to be carried forward are kept in a rolling log.
- f) Supporting the Chair of the Committee to conduct the annual review of the Committee’s effectiveness against its terms of reference.
- g) Advising the Committee Chair and members on pertinent areas.

Date approved:	January 2023 [pending decision by the Trust Board]
Approved by:	Trust Board
Next review date:	January 2024

03-01-2023 v0.6