

Item 5.4ii(a)

Operational Board

Terms of Reference

For completion by Author			
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1. Constitution and Remit

The Operational Board is established by the Board of Directors of Liverpool Heart and Chest Hospital NHS Foundation Trust and has responsibility for the oversight of implementation of the Trust's operational strategies and objectives, providing assurance to the Board of Directors that effective performance management is being discharged through the Operational Board, ensuring delivery of the Trust's plans and operational targets.

The Operational Board is a vital part of the Trust's governance arrangements and is the principal forum at which the leadership team come together to fulfil their shared governance responsibilities.

2. Authority

The Operational Board has executive decision making powers as defined in the Scheme of Reservation and Delegation which is approved by the Board of Directors

Trust Standing Orders and Standing Financial Instructions apply.

3. Main Priority and Objective

The Operational Board oversees the implementation of the Trust's operational and strategic objectives and is where divisions are held to account for their performance. The Operational Board will drive delivery of the annual plan and make informed decisions (within approved delegated limits) in relation to business investment/disinvestment and the development of the estate.

4. Duties and Responsibilities

The Operational Board will:

- i) Ensure the operational implementation and delivery of strategies and objectives as directed by the Board of Directors, including oversight and implementation of the Trust's:
 - annual plan and underpinning operational plans (including financial, capacity and workforce plans)
 - estates plan and capital programme
 - strategic objectives
 - Organisational Learning
- ii) Monitor the operational performance of the Trust (service and financial) and satisfy itself and the Board of Directors that the operational performance of the Trust is adequate;
- iii) Approve the remit and membership of its reporting subcommittees and oversee the work of those sub-committees, receiving reports from them highlighting escalated issues for

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consideration and action as necessary and routinely receiving the minutes and / or action logs of their meetings. These sub committees are:

- Division of Surgery – Governance and performance
- Division of Medicine – Governance and Performance
- Division of Clinical Services – Governance and Performance
- Risk Management and Corporate Governance
- Business Transformation Steering Group
- Digital Healthcare Committee
- Operational Planning Group (Task and Finish)
- Patient Pathway Group

iv) Monitor the Mortality Review process including;

- performance of the MRG and mortality KPIs
- learning from deaths action plan and ongoing monitoring once complete
- demonstrate organisational learning and actions of the divisions in response to MRG findings

iv) Review the completeness and accuracy of the Corporate Risk Register and provide appropriate challenge and resolution to the sufficiency of mitigating action plans.

v) Monitor the adequacy of progress made in mitigating corporate risks, identifying any areas where additional action is required and escalating risks to the Board of Directors where appropriate.

vi) Approve relevant business cases, service changes and investments vii) Review and approve Trust-wide policies and procedures developed by sub-committees.

vii) Review the impact of new & emerging guidance from regulators and external agencies and preparing the Trust response to it.

viii) Monitor the implementation of plans which improve the digital capacity and capability of the Trust.

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5. Equality and Diversity

Ensure that equality and diversity and due consideration to the Human Rights Act are regarded in all aspects of the Operational Board's work. This will include review of any equity analyses that are commissioned against the Trust's clinical services portfolio.

In addition the Operational Board will have regard for NHS constitution in delivering its objectives.

6. Integration

The Operational Board will support the integration of clinical, organisational and financial governance across the Trust.

7. Membership

Chief Executive (Chair)

Deputy Chief Executive, Vice Chair (Medical Director)

Chief Finance Officer

Director of Nursing & ~~Operations~~Quality

Director of Strategic Partnerships ~~and Chief Operating Officer~~ Director of Workforce and Organisational Development

Director of Research & Innovation

Director of Corporate Affairs

Director of Workforce & Service Improvement

Associate Medical Director – Surgery Divisional Head of Operations – Surgery Head of Nursing – Surgery

Associate Medical Director – Medicine Divisional Head of Operations – Medicine Head of Nursing – Medicine

Associate Medical Director – Clinical Services Divisional Head of Operations – Clinical Services Head of Nursing – Clinical Services

Clinical Lead – Research and Innovation

Assistant Director – Business Development

Chief Clinical Information Officer (Medical Director)

Chief Information Officer

Chief Operating Officer

The Chair may co-opt or invite other officers to attend meetings as required.

Each member and attendee is required to nominate a deputy to attend in his / her absence as agreed with the Chair.

8. Quorum and Frequency

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In order for decisions taken by the Operational Board to be valid, the meeting must be quorate. The Chair or Vice Chair; plus an additional 11 members of the Committee to include at least two members from each of the 3 Divisional Leadership Teams.

The Operational Board will meet monthly, except August. On a quarterly basis there will be an extended meeting to include the Trust's clinical leads. In addition, there will be earmarked time for Operational Board Development.

The work of the Operational Board will be supported by 'deep dive' reviews between each of the Divisional Leadership teams and members of the Executive Team in accordance with the Performance Oversight Framework.

9. Reporting

The Operational Board will provide minutes and regular summary reports to the Board of Directors to provide assurance that it is effectively discharging its responsibilities. In addition the Board of Directors routinely receives Strategic and Operational dashboards and top risks and BAF updates directly to ensure that it is sighted on all aspects of operational delivery.

The Operational Board will determine the format, frequency and content of the information it requires from each Reporting Sub Committee e.g. minutes, action logs and / or exception reports.

10. Conduct of Committee Meetings

The Chair of the Operational Board will ensure that the appropriate processes are followed:

- Minutes, action log and reports of the Operational Board to the Board of Directors are accurate, comprehensive and timely
- The agenda and supporting papers are sent out to members 4 working days prior to the meeting, unless authorised by the Chair for exceptional circumstances
- The agenda, in terms of items and their delivery will be prepared using a risk based approach to prioritisation and will be aligned to the Risk and Support matrix in the Performance Oversight Framework. Divisions are expected to be proactive in identifying agenda items that they wish to be considered
- Authors of papers presented must use the required template and adhere to reporting guidelines as set out in BAF Policy. Attention should particularly be given to the following: -
 - Limit the size of papers to a minimum set of information;
 - Have clarity on the "must do's" with a focus on decisions not discussion. Communicate what is expected to be achieved from the agenda item and what input is expected from those attending;
 - Make it explicit on the agenda the specific information or preparation work that members need to have ready;
 - Be clear on where a paper has been before, where it is going and what value the Operational Board is expected to add. If the paper duplicates what has been considered elsewhere be clear on what is to be separately achieved by it being considered by the Operational Board;
 - Always consider whether an item could be "starred".

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- Presenters of papers can expect all committee members to have read the papers and should keep to an executive summary that outlines the purpose of their paper/report and key issues. Verbal updates and presentations should be kept to a minimum.
- For the avoidance of doubt, Trust employees who attend the Operational Board do so not only to represent or advocate their directorate or service area but to act in the interests of the Trust as a whole and as part of a Trust-wide governance structure.
- All Operational Board members and those in regular attendance should actively participate in discussions pertaining to the agenda, ensuring that solutions and action plans have Multidisciplinary perspectives and consideration of Trust-wide impact;
- Behaviours at meetings should reflect the Trust's values. In particular, all members should treat each other with respect and be "present" in the room e.g. no checking of email;
- The Chair will regularly review the effectiveness of meetings and make any recommendations regarding changes to these Terms of Reference to the Board of Directors as and when required. In addition, at each meeting there will be an evaluation focusing on what went well and what might be improved for the future.

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