

## Trust Board

<b>Meeting Date:</b>	28 January 2013
<b>Title:</b>	Terms of Reference for Trust Management Team
<b>Executive Summary:</b>	The revised draft terms of reference reflect minor changes within management structures and reporting mechanisms.
<b>Action Requested:</b>	The Board are asked to approve the terms of reference.
<b>Report of:</b>	Chief Executive Officer
<b>Author: Contact Details:</b>	Chief Nurse/Trust Board Secretary
<b>Resource Implications:</b>	None identified
<b>Public or Private: (with reasons if private)</b>	Public Session
<b>NHS Constitution: (How it impacts on any decision-making)</b>	<p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> <li>✚ Equality of treatment and access to services</li> <li>✚ High standards of excellence and professionalism</li> <li>✚ Service user preferences</li> <li>✚ Cross community working</li> <li>✚ Best Value</li> <li>✚ Accountability through local influence and scrutiny</li> </ul>

## Background Details

	<p>The TMT is the operational decision making group for the organisation. It is a senior decision making committee and is an Executive led committee which is directly accountable to the Trust Board.</p> <p>The terms of reference reflect minor changes in management structure and a new requirement regarding Information Governance. The proposed changes are in bold type.</p> <p>This report is due to be considered by the Trust Management Team on 25 January.</p>
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## The Royal Wolverhampton NHS Trust

### TRUST MANAGEMENT TEAM

#### TERMS OF REFERENCE

**Accountable to:** Trust Board

**Overall aim:** To oversee and coordinate the Trust operations on a Trust-wide basis.

To direct and influence the Trust service strategies and other key service improvement strategies which impact on these, in accordance with the Trust overall vision, values and business strategy.

#### **Accountability & Scheme of Delegation:**

The Trust Management Team (TMT) is chaired by the Chief Executive and is directly accountable to the Trust Board. The TMT is where the major decision making process regarding clinical and non clinical operations will take place. The TMT will review performance of the organisation and agree actions where required. The TMT will delegate responsibility for specific aspects of performance and management to a number of sub-committees and working groups. These are:

- Divisional Management Committees
- **Human Resources Sub Committee**
- Governance Committees (Quality & Safety and Compliance)
- Information Management & Technology Committee (IM & T)
- Research and Development Executive Committee
- Urgent Care Strategy Group
- End of Life Care Strategy Group
- Care of Elderly Strategy Group
- Integrated Medical Records Committee
- Contracting and Commissioning Committee
- Change Programme Board
- Waste Management Group
- Sustainability & Carbon Reduction Group
- Capital Review Group

- Emergency Planning Committee
- Operational Finance Committee
- NHSLA General Standards Project Team
- Revalidation Steering Group
- Modernisation Programme Board

The TMT Sub-Committees/working groups are directly accountable to the TMT.

**Frequency of Meetings:** Monthly – 11 times per year or more frequently when business requires.

**Responsibilities:**

The TMT will advise on and be responsible to the Trust Board on all matters relating to Trust operations. This will include responsibility for the following activities:-

- Direct and monitor progress with implementation of key Trust strategies
- Approval of Trust wide strategy, policies and procedures
- Annual approval of the rolling 5 year service strategies for the Trust, via the Divisional structure
- Approve business cases to deliver key Trust strategies and the corporate business plan which are in excess of £100,000 but below £500,000.
- Monitor delivery of the service strategies for Divisions
- Monitor delivery of the Trust site strategy
- Monitor financial performance to ensure that the Trust's statutory duty is achieved
- Monitor the delivery of the Trust Nursing & Midwifery programme, ensuring effective integration into operational areas
- Monitor the operational performance and implementation of the IM&T strategy
- Receive advisory reports on the operation of governance, risk management and compliance deliverables across the Trust.
- **Approve annual sign off of the IG Toolkit requirements.**
- Receive regular updates and advice from the Finance, HR, Governance Directors to ensure effective operational integration with the following:

Policy

Strategy  
Developments  
National & local strategies, policies and developments  
Legal issues

## **Reporting**

The TMT Chair will formally report on a monthly basis to the Trust Board via the TMT minutes **which will be prefaced by a separate report highlighting the most significant issues considered.**

The TMT Sub-Committees and Directors will report as per the schedule below:

### **Regular Reports Received:**

Monthly:

- Performance report (Chief Operating Officer)
- Divisional reports
- Directors' reports
- Director of Finance
- Operational Finance Committee
- NHSLA General Standards Project Team

Quarterly:

- Progress reports on site strategy
- Progress reports on IM&T Integrated Medical Records Committee
- Contracting and Commissioning
- Director of Infection Prevention and Control report
- Research & Development Innovation report
- Cancer Report
- IM&T report
- Sustainability & Carbon Reduction Group
- Capital Review Group
- Emergency Planning Committee
- Change Programme Board
- Senior Nurse Strategic Group (Nursing Programme)
- Revalidation Steering Group
- Modernisation Programme Board

6 Monthly

- Quality and Safety Governance report
- Waste Management Group

Annual:

- Trust corporate business plan (Chief Operating Officer)
- Service strategy plan Divisional Medical Directors

### **Membership**

- Chief Executive (Chair)
- Chief Operating Officer
- Chief Financial Officer
- Chief Nursing Officer (Deputy Chair)
- Medical Director
- Director of Human Resources
- Director of Planning and Contracting
- Head of Estates Development
- Divisional Medical Directors x 2

Divisional Managers x 3  
Heads of Nursing/Midwifery x 3  
Director of Infection Prevention and Control  
Director of Research, Development and Innovation  
Director of Clinical IT  
Lead Cancer Clinician

Members are expected to attend regularly and should not send deputies without the prior permission of the Chairman. Membership will be reviewed annually. The TMT may request the presence of any senior manager/clinician to interpret/ comment on data (with notice).

### **Attendees**

For the purpose of leadership development occasional shadowing at this meeting will be allowed following prior discussion and agreement with the Chair.

### **Quorum**

The Committee will be quorate when a minimum of 10 members are present and with two from:

- Chair/Deputy Chair
- Chief Operating Officer
- Medical Director
- Chief Financial Officer

**Date of last review: June 2012**

**Date of next review: March 2013**