

Executive Board

Terms of Reference

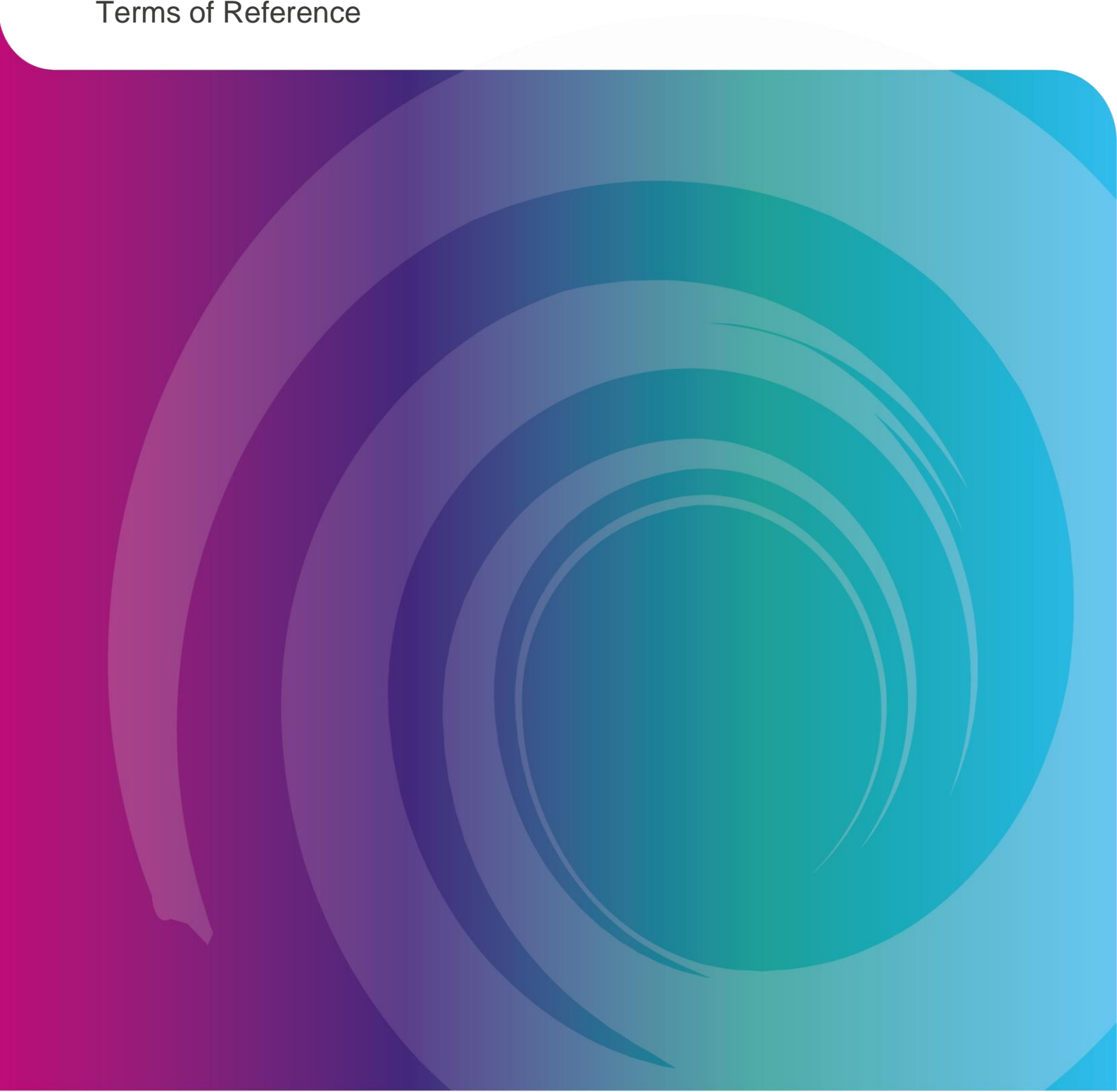


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1. Purpose

The purpose of the West Midlands Imaging Network (WMIN) is to oversee delivery of the recommendations of the National Imaging Strategy, adapted to meet the requirements of West Midlands service users. This will be achieved by collaborative working across member organisations, supported by a programme team working to maximise the benefits and impact for patients, staff and services.

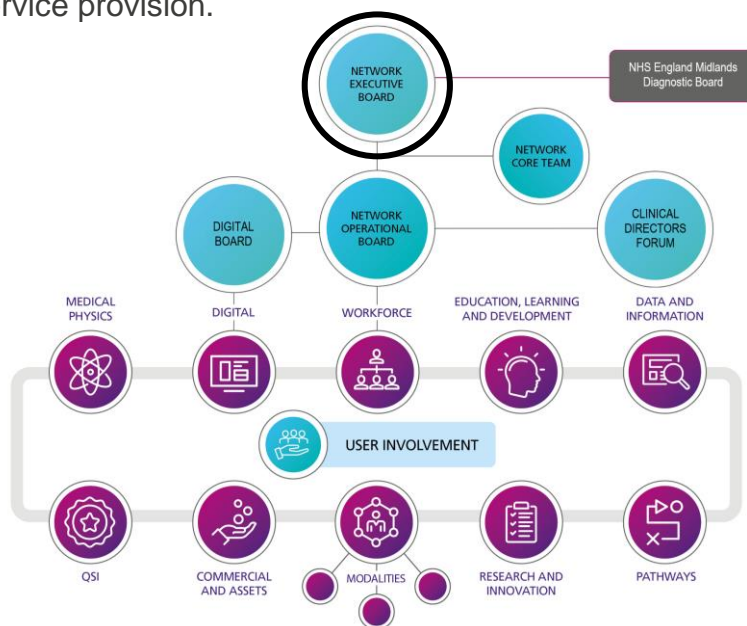
The recommendations are:

- An agreed operational governance model signed off by all member Trust Boards
- Digital image sharing approach in place,
- Delivering the capability for shared reporting worklists across member Trusts, where this supports MDT working and more effective patient care,
- Workforce plan/strategy agreed by all member Trusts, used to inform workforce recruitment, development, and new ways of working,
- Capital equipment plan agreed by all member Trusts covering a rolling replacement programme and identify routes to investment for additional (growth) capacity,
- Outsourcing, equipment support, and consumables procured collaboratively when in the interest of the West Midlands Imaging Network,
- Agreed Network process and methodology for capacity & demand service modelling.

2. Background

The West Midlands region comprises 15 trusts across 6 ICSs, serving a population of around 6.3 million. Imaging plays a crucial role in the diagnosis, staging and management of a variety of conditions using a range of ionising and non-ionising radiation modalities. Investigations touch every part of the patient pathway and is a key enabler for effective care. Networking allows for better value, better utilisation of capital equipment, faster turnaround times where required and more opportunities for the workforce to undertake extended roles and advance their professional development. Networking will reduce variation in practice, enhance workforce opportunities, bring equity to patient access and even out and reduce cost.

High level key aims of the programme are to improve service resilience, reduce duplication and use economies of scale to enable the latest technology to be purchased in order to develop imaging service provision.



3. Duties and Responsibilities

The West Midlands Imaging Network will provide strategic overview and approval across the imaging transformation programme. The role of the Network Executive Board is to:

- To agree a programme of work related to priority work areas from the national Imaging Strategy
- To delegate monitoring and delivery of the work programme, oversight of finances and management of the risk register to the West Midlands Imaging Network Operational Board
- To ensure workstreams, subgroups or task and finish groups to support delivery are properly established.
- To hold the Operational Board to account for delivery of the agreed outcomes.
- To agree and set the annual network budget including approval of the requirements for new posts or changes in establishment.
- To set the strategic plan for the West Midlands Imaging Network.
- To approve the NHSEI Maturity Matrix assessment of the network programme and to ensure the network is adequately progressing.
- To approve workforce plans and requirements.
- To monitor progress against delivery for the Network work programme and its agreed metrics, escalating as required
- To ensure that progress, risks and issues are captured and reported formally, with communication and escalation as required to agreed stakeholders
- To provide assurance to the West Midlands Commissioning Board with regards to implementation of the national Imaging Strategy

4. Membership

The members of the West Midlands Imaging Network Executive Board are:

| Member | Role | Representing |
|-------------------------------|---|--|
| Chair | Independently Appointed | West Midlands Imaging Network |
| Deputy Chair | Host Organisation CEO | West Midlands Imaging Network |
| Member | Network Clinical Director | West Midlands Imaging Network |
| Member | Network Director | West Midlands Imaging Network |
| Members | ICB Director level representatives | X 6 WM ICSs |
| Members | Trust Exec Director level representatives. | X 15 WM Trusts with regard to a balance of skills from CEO, Medical and Nursing Directors, People management etc |
| Non-voting | | |
| Member | Deputy Regional Diagnostics Lead | NHSE Midlands Region |
| Member | Finance Lead | Network Host Organisation |
| By Invitation | | |
| Representative | Other specialist representatives of key discussion items. | |
| Representative | Other network management team | By invitation for specific items |
| Notes – action & decision log | Network Secretariat | |

Members will be expected to:

- Attend meetings, contribute to discussions and decision making and be accountable for any actions or area of delivery they are directly responsible for.
- Represent their ICS or other sector footprint and communicate with appropriate colleagues.
- Identify items on the forthcoming agenda(s) and ensure they bring a representative view through local engagement before the meeting.
- Work collaboratively with other relevant working groups and their leads to support programme delivery and to meet the requirements set out by the West Midlands Imaging Network
- Nominate a deputy or alternative representative on their behalf when unable to meet the commitment themselves, but only after securing prior agreement from the Chair, as to their suitability to attend meetings.
- The West Midlands Imaging Network may invite corporate leads, programme leads, other members of staff, other key stakeholders, and advisors to attend meetings as appropriate.

5. Confidentiality and information sharing

Documents circulated by members of the Board can be shared externally unless expressly stated as confidential or in draft form, including other networks as appropriate.

Members are required to respect confidentiality of specific topics discussed at the meeting as requested by other members.

6. Declaration of interest

A conflict of interest is a set of circumstances by which a reasonable person would consider that an individual's ability to apply judgement or act, in the context of delivering, commissioning, or assuring taxpayer funded health and care services is, or could be, impaired or influenced by another interest they hold.

All Board members should ensure that they are not placed in a position that risks, or appears to risk, compromising their role or the NHS public and statutory duties or reputation. Members must also not accept gifts or hospitality by virtue of their role on the board.

Board members are required to declare conflicts of interest and the receipt of gifts, hospitality and/or sponsorship, in line with the national guidance to the NHS.

Conflicts of interest should be declared in writing to the Network secretariat and specific NHS England and NHS Improvement conflicts should be raised at the start of any agenda item or discussion for which that conflict arises.

A conflict of interest register will be maintained by the secretariat. This will be reviewed annually

7. Meetings and Quoracy

Key principles include:

- Each health system has an equal voice
- Multi-professional leadership is essential
- Each ICS is represented

Quoracy will be achieved when the Chair or deputy Chair is present plus a minimum of one system representative or their deputy (ICS or Provider) including a minimum of 3 trust

representatives. In the event of non-quoracy, members present will (where appropriate) make recommendations to the next full Board meeting.

Voting will be on the basis of a simple majority, unless agreed by the board before voting takes place. Where necessary, the Chair will have the casting vote. Decisions made at each meeting will be binding on all organisations.

If an urgent decision is required prior to the next scheduled meeting, the Chair may recommend an extra-ordinary meeting be convened OR agree a virtual decision made by email – where this must be responded to by ALL voting members.

Patient representation and co-design will be via the delivery sub-groups and operational board.

There is an expected attendance requirement per member of 75% of meetings. If a designated lead is unable to attend, they must send a representative in their place. The representative must have delegated decision-making authority on behalf of their organisation. If the attendance requirement is not met, the Chair may seek another member from that organisation or system.

Invited representatives may include:

- Imaging Academy
- Health Education England
- Academic Health Science Network
- Regional or ICS finance leads
- Regional or ICS commissioning leads
- Regional or ICS HR leads
- Other regional or national roles as required

8. Agenda

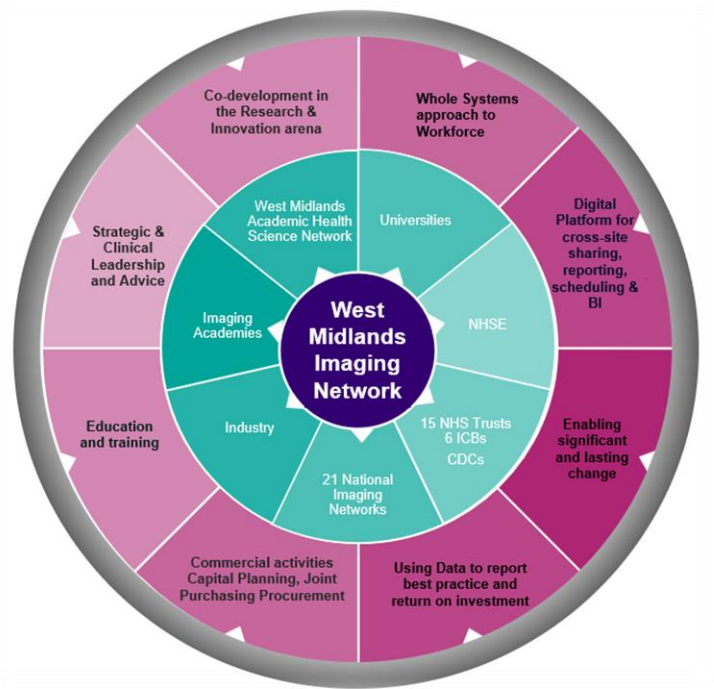
The agenda will be set by the Chair ahead of each meeting, but the standard agenda is expected to include as a minimum:

- Introduction / Welcome and Apologies/ Declarations
- Review of notes and actions arising from last meeting
- Matters arising not on the agenda
- Programme Delivery, including risk
- Funding and financial balance
- Progress of the network against the agreed strategy and plan.
- AOB & items for the next meeting
- Date of next meeting

9. Governance and Reporting

The WMIN is accountable to the NHSEI (Midlands) Commissioning Board. The Board will also report as required to other relevant agencies

Members are accountable to the Board for their individual roles in supporting delivery of the objectives and workplan. Each member has the responsibility to report back to Boards of their constituent organisation and to ensure dissemination of information as appropriate to support delivery.



10. Secretariat

Secretariat will be provided by the West Midlands Imaging Network Programme Support Officer.

Meeting papers will be circulated a week before the meeting. Meeting notes will be circulated within 14 days after the meeting.

To ensure that meetings run smoothly and effectively, members will be expected to read circulated reports and other materials in advance of meetings and identify actions that result from discussions and commit to following through those actions.

11. Frequency and Location of Meetings

The Board will meet bi-monthly until the workplan, and operating model (including sub-groups) are established. Future meeting frequency will then be reviewed but should take place no less frequently than quarterly.

Meetings will usually take place via MS Teams. This will reduce environmental impact, reduce costs, and save travel time. When appropriate, consideration of a face-to-face meeting can be discussed.

12. Review

The Board will review the Terms of Reference annually as a minimum requirement.

Document Management

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|------------------------|--|
| Name | Executive Board - Terms of Reference |
| Version Number | V2 |
| Date Adopted | 20 th September 2023 |
| Review Date | September 2024 |
| Document Number | QSIN IN-201, [ToR-02] |
| Approved By | Tim Cooper |
| Target Audience | Executive Board members, Core Network Team members |

Version History

| Version | Date Adopted | Summary of Amendments | Name | Title |
|---------|--------------|---|------|----------|
| v0.1 | 29/04/2022 | First draft for review at West Midlands Imaging Network Board | TC | Chairman |
| v0.2 | 23/05/2022 | Revised following discussion at Network Board 10/05/2022 | TC | Chairman |
| v0.3 | 23/08/2022 | Final Version for new Executive Board | TC | Chairman |
| v1 | 14/06/2022 | Approved by Executive Board | | |
| v1.1 | 09/09/2023 | Reviewed as part of schedule Updated template, updated governance structure added | TC | Chairman |
| V2 | 20/09/2023 | Approved by Executive Board | | |

Document Control:

The controlled copy of this document is kept within the West Midlands Imaging Network files. Copies of this document held outside of that area, will be viewed as removed from formal change control.