



Terms of Reference

West Midlands Imaging Network Operational Board V 1.0 September 2022

Document name:	Terms of Reference	
Programme/Project Name	West Midlands Imaging Network	
Senior Responsible Owner (SRO)	Tim Cooper Network Chair	
Network Director	Kate Burley	
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Document management

Revision history

Version	Date	Summary of changes
0.1	29/04/2022	First draft for review at West Midlands Imaging Network Board
0.2	23/05.2022	Revised following discussion at Network Board 10/05/2022
0.3	23/08/2022	Final version for new Executive Board
0.4	31/10/2022	Final version for the new Operational Board

Approved by

This document must be approved by the following people:

Name	Signature	Date	Version
West Midlands Imaging Network Board	Approved	14/06/2022	V0.2
WMIN Executive Board	Approved	13/09/2022	V1.0

Related documents

Title	Owner	Location
West Midlands Imaging Network Executive Board ToR	Network Chair	

Document control

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West Midlands Imaging Network

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 WMIN
- 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 over 5 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 Group is to:

• To monitor and manage a programme of work related to priority work areas from the national Imaging Strategy

- Monitoring and delivery of the work programme, management of in year finances and management of the risk register
- To ensure workstreams, subgroups or task and finish groups are working to an agreed programme; to have oversight of the output and ensure it is consistent with the aims and work plan of the network.
- To report to the Network Executive Board to account for delivery of the agreed outcomes.
- To deliver the strategic plan for the West Midlands Imaging Network.
- To monitor progress and take action to progress the NHSEI Maturity Matrix assessment of the network programme and to ensure the network is adequately progressing.
- To develop workforce plans and requirements.
- To achieve 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 Executive Board with regards to implementation of the national Imaging Strategy

4. Membership

The members of the West Midlands Imaging Network are:

Member	Role	Representing
Co-Chair	Network Director	West Midlands Imaging Network
Co-Chair	Network Clinical Director	West Midlands Imaging Network
Member	Network portfolio Manager	
Member	ICB Diagnostics/Imaging Lead representatives	X 6 ICBs
Member	Trust Imaging Operational Senior Manager level representatives	X15 one per provider Trust
Member	Service Users Representatives x2	
Member	Regional Radiology Representative	
Member	Regional Radiography Representative	
Member	Regional Medical Physics Representative	
Member	Clinical Directors Group Representative	
Member	Chair WMIN Digital Group	
Member	Chair WMIN Workforce Group	
Member	Midlands Imaging Academy Director	
Member	Head of School of Radiology	
Non-voting		
Member	Diagnostics Programme Manager	NHS E/I Midlands Region
Member	Health Education England Lead	
Member	West Midlands Imaging Network Clinical Ambassadors	X15 one per Trust

Member	WMIN QSI Lead	
Representative	Finance representative	WMIN (Host Organisation)
Representative	WMIN Comms Lead	WMIN (Host Organisation)
Representative	Specialised Commissioning	By invitation for specific items
Representative	Other network management team	By invitation for specific items
	Other leads of key service areas by invitation at the discretion of the Chair	
Notes – action &	Network Secretariat	
decision log		

Members will be expected to:

- Attend meetings, contribute to discussions and decision making and be accountable for any 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.
- Demonstrate the added value that their function or programme contributes.
- 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 group, 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 group 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 Group 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 group.

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 group 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.

7. Meetings and Quoracy

Key principles include:

- Each organisation has an equal voice
- Clinical multi-professional leadership is essential
- Each Trust 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.

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 delegate 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 system.

Invited representatives may include:

- Academic Health Science Network
- ICS finance leads
- ICS commissioning leads
- ICS HR leads
- Other regional or national roles as required
- Representatives of special interest groups as required

8. Agenda

The Chair will set the agenda 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

- 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 Operational Board will also report as required to other relevant agencies

Members are accountable to the Operational 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 monthly until the workplan, and operating model (including subgroups) are established. Future meeting frequency will then be reviewed but should take place no less frequently than quarterly.

Meetings will take place via MS Teams in the first instance. This will reduce environmental impact, reduce costs and save travel time. When appropriate, consideration of a return to face-to-face meetings can be discussed.

A number of subgroups will support the work of the group and will meet as required between the group meetings.

12. Review

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