

EMNODN BOARD TERMS OF REFERENCE



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Purpose

The purpose of the EMNODN Board is to oversee the effective operational delivery, development, and modernisation of neonatal services, in line with NHS England commissioning directions and intentions, for the benefit of patients, public and the NHS. It will ensure that the best value for the health community and its stakeholders is achieved.

It will provide executive leadership to the Network; approve key service planning issues and the implementation of operational delivery changes. It will approve and commit resources within its delegated limits, acting for, and on behalf of, its member organisations and other key stakeholders. The EMNODN Board will also provide the final quality assurance for the key initiatives within its brief, and facilitate discussions and consultation, as appropriate with the Acute Trusts, NHSE, CCGs, LMNS and ICBs and other appropriate partners.

The ODN acts as a facilitator within a collaborative model, where Commissioners remain accountable for commissioning of neonatal services. Providers remain accountable for the delivery of neonatal services. The ODN ensures that the whole system works together to optimise the patient experience, by bringing together patients, commissioners, providers, and other stakeholders, in the design and delivery of consistently high quality, evidence-based services.

Aim

The aim of the EMNODN Board is to oversee the development of a shared vision and agreed strategy for neonatal services across the East Midlands, and to deliver national priorities and local imperatives. In undertaking its responsibilities, the EMNODN Board will take account of future service developments and the preferences of families, commissioners, service providers and neonatal staff.

Responsibilities

The Board will be the decision-making body for the EMNODN business across the region. It will maintain authoritative powers to influence matters relating to the EMNODN, taking a single team and consensus approach to developing services across the whole system. This will be facilitated through the approval of the ODN annual work plan. This will take into account local and regional improving value schemes. There will be alignment with relevant national and regional Programme of Care priorities, including those of NHSE Specialised Commissioning for the Midlands Hub.

The ODN is a non-statutory body hosted by Northampton General Hospital NHS Trust under a contractual agreement with NHSE Specialised Commissioning for the Midlands Hub.

The main responsibilities of the EMNODN Board will be:

- To review the constitution, membership, and terms of reference of the Board within the first twelve months and on an annual basis thereafter.
- To agree, and ensure, the effective delivery of the annual Network business plan and objectives, which are consistent with, and supportive of, the objectives of NHS England. These will align with the clinical and business needs of the Stakeholder Trusts and service users.

- Ensure coordination and consistency of Network policy for the commissioning and operational delivery of neonatal services.
- Ensure the role and scope of the Network is understood and well communicated and that the views and interests of all partners and stakeholders are fully represented.
- Ensure that the Network's governance and quality assurance arrangements are robust, fit for purpose and enforced, and subject to regular reviews.
- Receive all quality and standards reports related to the Network units.
- Receive all analysis of SI's, and related action plans and mortality reviews, as monitored and reported by the EMNODN Clinical Governance Group.
- Receive assurance that agreed best practice guidance and policies are implemented and monitored, acting for and on behalf of all partners and stakeholders.
- Authorise expenditure of, and monitor tolerances within, agreed budgets ensuring value for money is achieved.
- Approve, through its Director, the operational Service Level Agreement with the ODN Host on a two-yearly basis (in line with the contracting process).
- Approval of ODN function and operational team structure

Accountability

The EMNODN Board will be accountable to the NHSE East Midlands Specialised Commissioning Team through a formal contractual relationship based on the National Service Specification for Neonatal ODNs¹. This will be via a reporting process and an annual report and work plan.

Member Responsibilities

A requirement for EMNODN Board membership is that all members attend a minimum of at least two meetings a year, although where possible all EMNODN Board meetings should be prioritised. The ability to commit to EMNODN Board meetings should form part of member's decision-making process when agreeing to represent their Trust or LMNS at the Board. Members should not routinely send deputies to meetings, although the EMNODN Board will consider deputising in the case of long-term absence of a member.

Network Board representation must be at least a senior manager, with considerable management experience, who has direct responsibility to a Trust or LMNS Executive Board member. Each Provider Trust or LMNS is responsible for the appointment of their Board representative through agreement with the Trusts' or ICB Chief Executive.

Network Chair

The Chair will be appointed through a formal process undertaken by the Network Board. This will be via a formal request for an independent Network chair. The responsibilities of the Chair are outlined in the role description. If the Chair is unavailable for meetings or other Network matters, he/she will arrange for a suitable Board member to deputise.

The Chair operates within an agreed remit according to the Role Description and seeks to lead the Board from an independent perspective, in order for it to oversee and fulfil the Network's aims and objectives. The Chair provides leadership, counsel, and representation with key stakeholders across the region as required. The Chair will ensure that that Board

meetings are chaired appropriately to enable the Network's key aims and objectives and annual Work Plan to be achieved/met. The Chair will not be the Board representative for his/her individual organisation and as such has no voting rights.

Membership

Membership of the EMNODN Board will consist of the following members:

- Network Chair
- *Board representative from each Network Provider Trust accountable to and appointed by the CEO of that Trust
 - Kettering General Hospitals NHS Foundation Trust
 - Northampton General Hospital NHS Trust (Network Host)
 - Nottingham University Hospitals NHS Trust
 - Sherwood Forest Hospitals NHS Foundation Trust
 - United Lincolnshire Hospitals NHS Trust
 - University Hospitals of Derby and Burton NHS Foundation Trust
 - University Hospitals of Leicester NHS Trust
- *Board representative from each of the East Midlands LMNSs who is accountable to and appointed by the CEO of that ICB
 - Derbyshire
 - Leicestershire
 - Lincolnshire
 - Northamptonshire
 - Nottinghamshire
- *Network Director/Lead Nurse
- Network Clinical Lead (North Hub)
- Network Clinical Lead (South Hub)
- *NHSE Specialised Commissioning, Midlands Hub Representative
- NHSEI Head of Quality
- Midlands Perinatal Program Transformation Lead
- Parent Representative (Chair of Parent Advisory Group)

Decision Making

*Members with voting rights, each shall have one vote.

Decisions are made by consensus wherever possible. If this is not achieved, the Chair will liaise with the voting members (present and not) to achieve a resolution. In the event of a consensus not being reached a majority decision will be sought. The EMNODN Board will be quorate when nine of the membership are present.

Mode of Operation

The preferred mode of operation will be by formal meetings supported by papers for information, consultation, endorsement, and approval. Where appropriate, decisions by the EMNODN Board on specific items, can be made through email consultation against fixed timeframes between formal meetings.

The Chair must ensure that the Board's decisions on all matters brought before it are taken in an open, balanced, objective, and unbiased manner. In turn, individual group members must demonstrate through their actions, that their contributions to the group's decision making are based upon the best interest of the region, rather than of the individual Trusts or ICBs with which they are employed. The region must feel that the Board exists to represent a collective view, and that the nature of its membership therein must not be felt to disadvantage any unit, or trust from across the East Midlands.

Frequency of Meetings

Meetings will be held no less than quarterly. Extraordinary meetings may be called as the Chair of the EMNODN Board deems necessary.

Documentation Standards

Papers will be made available on the EMNODN website to members at least two weeks in advance of formal meetings. Formal minutes will be taken at all meetings, and once approved by the Board, will be made openly available on the EMNODN website.

Email will be the preferred method of communication with all correspondence and documents distributed electronically wherever possible.

Review of the Board

In order to ensure that the EMNODN Board is configured in the most appropriate and effective way to meet the changing needs of the region, these terms of reference and other governing documents e.g., work plans will be reviewed by the EMNODN Board and Management Team on an annual basis.

Review of Network Working Groups

The EMNODN Board will oversee the structure and functionality of the Network groups that form the EMNODN. These are as follows:

- Clinical Governance Group
- Mortality Oversight Group
- Lead Nurses Group
- Parents Advisory Group
- Education & Practice Development Group
- Pharmacy Group
- Safeguarding Group
- Family Integrated Care Steering Group
- AHP and Psychology Forum

- Homecare Steering Group
- Preterm Birth Group (in collaboration with the Midlands Perinatal Network)

The constitution of the groups will be reviewed formally within the first twelve months and then when required thereafter.

Agenda

The EMNODN Board meetings will be administered through a standard agenda ([Appendix 1](#))

Administration

The Network Chair and Network Director will agree the Board agendas. Any Board Member may submit agenda items to the EMNODN management office at least two weeks prior to the meeting. The Office Manager for the Network Team will provide administrative support for the EMNODN Board. The Network Director will ensure that all papers are distributed at two weeks prior to the meetings.

¹ NHS Standard Contract for Neonatal Care Operational Delivery Networks: E08/ODN/a December 2014

Appendix 1 – Example Agenda



East Midlands Neonatal
Operational Delivery Network

AGENDA

Board Meeting

Date, Time, Venue

Please note that this meeting will be recorded for the purpose of producing accurate minutes. If you have any objections to this, please advise the Chair prior to the beginning of the meeting.

Item	Subject	Attachment	Lead
1.	Welcome & Apologies		Chair
2.	Declarations of Interest		ALL
3.	Minutes from the Previous Meeting		Chair
4.	Matters Arising/Action Log		Chair
5.	Current Standards & Drivers for Change in Neonatal Services		Director
6.	Commissioning of Neonatal Services		Specialised Commissioning
7.	PPI		Parent Rep
8.	Network Management 8.1 Work Plan Update 8.2 Budget Update		Director
9.	Governance & Safety 9.1 Risk Register 9.2 Reported SIs 9.3 Feedback from Clinical Governance Group 9.4 Dashboard 9.5 Activity Data		Director Director Clinical Leads Clinical Leads Clinical Leads
10.	Local Neonatal Unit Initiatives		Director
11.	AOB		ALL
12.	Date/Time of Next Meeting		

East Midlands Neonatal Operational Delivery Network Organisational Structure

