# Corporate Leadership Board (CLB)

# Terms of Reference (TOR)

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# Contents

[Purpose 3](#_Toc109744860)

[Responsibilities 3](#_Toc109744861)

[Co-owners Council Engagement 4](#_Toc109744862)

[Membership 5](#_Toc109744863)

[Frequency 5](#_Toc109744864)

[Quoracy 5](#_Toc109744865)

[Reporting and Accountability 5](#_Toc109744866)

[Review 6](#_Toc109744867)

[Agenda Template 6](#_Toc109744868)

## Purpose

The Corporate Leadership Board (CLB) will hold responsibility for the activity, integrity and strategy of BrisDoc, meeting the interests of co-owners and all relevant stakeholders to ensure the delivery of safe and effective services and long-term viability of the organisation.

## Responsibilities

The Corporate Leadership Board will hold responsibility and perform seven key functions:

### 1. Leadership

* Establish and maintain a clear vision, mission and values
* Provide entrepreneurial leadership within a framework of prudent and effective controls which enable risk to be assessed and managed
* Take corporate responsibility for all of BrisDoc’s activity; “step-back” from day-to-day operational activity in order to provide an effective strategic overview of performance and processes
* Take responsibility for adding value to the organisation by promoting its success through the direction and supervision of its affairs
* Provide clear communication to senior management and all co-owners
* Establish and implement a clear decision-making process and ensure communication of decisions is timely and appropriate
* Implement a clear leadership structure throughout the Company, including Leadership & Operational Boards for Practice and Urgent Care Services.
* Determine what powers may be delegated and delegate the authority to others (management/leadership) to implement the day-to-day operational management and running of services.
* Monitor and evaluate the implementation of strategies, business plans, service objectives, policies and procedures
* Ensure the dynamics and performance of the Board are evaluated annually to assess effectiveness and encourage continuous learning and development of leadership on the Board and throughout the organisation.

### 2. Culture and People

* Shape the culture and setting the values, ensuring they are widely communicated and that the behaviour of the Board is entirely consistent with those values
* Ensure the embedding of an Equality, Diversity and Inclusion culture throughout BrisDoc, including managing and narrowing the Gender Pay Gap

### 3. Strategy

* Determine and agree BrisDoc’s strategic aims, meeting the interests of all relevant stakeholders and take into consideration the view of the ‘wider team’ and national and local strategy, ensuring the necessary financial and human resources are in place to meet the priorities and objectives.
* Develop and maintain an annual business plan and ensure its delivery as a means of driving the strategy of BrisDoc.
* Agree key service objectives to meet strategic objectives. Ensure these are documented and clearly communicated.
* Monitor and review management performance to ensure objectives are met
* Ensure that national policies and legislative requirements are effectively addressed and implemented

### 4. Governance

* Ensure that the highest standards of corporate governance (including Clinical, Financial, Workforce, Risk Management, Statutory) and personal integrity are maintained in the conduct of BrisDoc’s business.
* Seek assurance that the systems of governance, risk management and internal controls operating within BrisDoc are robust and reliable
* Ensure that BrisDoc complies with its governance and assurance obligations in the delivery of clinically effective, personal and safe services taking account patient and carer experiences
* Ensure compliance with the relevant statutory requirements, including for example, Companies Act and Financial Regulations and contractual obligations.
* Ensure that BrisDoc functions effectively, efficiently and economically.

### 5. Quality

* Ensure the quality and safety of health care services provided by BrisDoc
* Meet and apply the standards and principles of clinical governance set out by the Department of Health, NHS England, the Care Quality Commission (CQC) and other relevant bodies
* Achieve all the standards required by CQC covering five key themes; Safe; Effective; Caring; Responsive; and Well-led
* Maintain Quality Management System to meet the requirements of ISO9001
* Maintain Environmental Management System to meet the requirements of ISO14001

### 6. Risk Management

* Ensure an effective system of integrated governance, risk management and internal control across BrisDoc’s clinical and corporate activities
* Ensure an effective and safe clinical risk management process
* Identify and record all risks and ensure Board oversight and systematic review of highest graded risks and ensure all risks are effectively recorded and managed

### 7. Communication

* Ensure an effective communication channel exists between BrisDoc, staff, patients and the local health economy
* Publish an Annual Report and Accounts, in accordance with statutory requirements

## Co-owners Council Engagement

The PLT will maintain a clear channel of communication with the co-owners’ council, so that both parties are able to share information and consult one another as appropriate. This will ensure that the co-owners’ council remains part of this group’s consciousness when making key decisions.

## Membership

The core membership of the Group will be comprised of:

* Chairman
* Managing and Financial Director
* Medical Director
* Programme and Service Director
* Director of Nursing, AHPs and Governance
* Co-owners’ Council representative
* Head of Integrated Urgent Care
* Head of People
* Head of Nursing and Allied Health Professionals
* Deputy Medical Director – Practice Services
* Deputy Medical Director – Integrated Urgent Care
* Non-Executive Directors

In addition, members will be co-opted into the group if issues or projects arise that require expertise from individuals other than substantive members.

## Frequency

The group will meet quarterly. Additional exceptional meetings can be called by the chair as required.

## Quoracy

A meeting will be considered to be quorate if one or more executive director and two or more internal service directors/service heads are present.

Decision making will proceed on the proviso that each Executive Director and Service Director has been consulted on key decisions affecting their area of responsibility and actions agreed prior to the Corporate Board meeting. There may be exceptional circumstances when this is not possible for all concerned in which case Executive Director input must be available.

## Reporting and Accountability

The Corporate Leadership Board is accountable to the Board of Directors

The following groups will report to the CLB for assurance in relation to the responsibilities set out by this TOR and that of their respective TORs:

* Finance Board
* Quality Board
* Practice Services Leadership Oversight Board
* Integrated Urgent Care Leadership Oversight Board
* People Board
* Patient Board
* Growth and Futures Board
* Green Board

## Review

The TOR for the CLB will be reviewed annually.

### Version Control

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| --- | --- | --- | --- |
| **Version** | **Date** | **Author** | **Changes Overview** |
| V1.0 | 25/07/2022 | Nigel Gazzard | Initial TOR |

## Agenda Template

|  |  |  |
| --- | --- | --- |
| **Number** | **Item** | **Presenter** |
| 1 | Introductions, Apologies & Conflicts of Interest | Chair |
| 2 | Previous Minutes and Action log | Chair |
| 3 | BrisDoc Strategy | As required |
| 4 | Patient and Quality Care | As required |
| 5 | People Care and Employee Ownership | As required |
| 6 | Resource Care | As required |
| 7 | Governance | As required |
| 8 | Review | As required |
| 9 | Any Other Business | Chair |