

TERMS OF REFERENCE

VERSION	V2
DATE	27/06/25
CONSTITUTION	<p>Dr xxx has been asked by the Permanent Secretary to assess and make recommendations on the improvement of clinical governance and medical leadership processes and oversight from 'floor to board'.</p> <p>This follows the DCO report into Cardiac Surgery service, however the work is not limited to this area of service and should consider issues across the BHSCT and corporately.</p>
PURPOSE	To assess, consider and provide advice and assurances on both the processes and application of – clinical governance and medical leadership and the related elements of the associated Action Plan for the BHSCT.
MEMBERSHIP	Dr xxx will work with the internal Oversight Group within BHSCT to provide supportive challenge to the delivery of their Action Plan and provide an assessment of progress through the Accountability and Assurance Group to the Minister.
SCOPE	<p>Provide a constructively challenging but supportive review within the following key areas:</p> <ul style="list-style-type: none"> • Discuss and consider the related DCO findings and recommendations with regards to the BHSCT's action plan. • Consider the extant processes in place within BHSCT (floor to Board) for clinical governance, medical leadership and Board level oversight and challenge. • Engage with staff of the BHSCT as necessary. • To provide independent assessment and support to the Accountability and Assurance Group on related actions and progress demonstrated for both Cardiac Surgery and the BHSCT corporately. • Provide a report of findings and recommendations. <p><i>Noting that another independent expert will be providing specific support on culture and being open.</i></p>
AUTHORITY AND REPORTING	<p>Authority provided via the Minister for Health to review and consider all related matters and allow wider consultation with and not limited to Staff, Trade Union representatives, Professional Bodies and Patients with the support of the work of Patient Client Council.</p> <p>Reporting via the Accountability and Assurance Group on a bi-weekly basis (in the first instance).</p> <p>Direct reporting line to the Permanent Secretary as required.</p>

TIMING, ENGAGEMENT AND COST	<p>This project is expected to take no less than 3 months in the first instance and will cover the period July to September 2025 to allow for availability. Ongoing assessment regarding workload and timeframes will be kept under review.</p> <p>Engagement of Dr XXX will be through the SPPG initially at a daily rate of £xx per day, with necessary travel expenses reimbursed or arranged via the SPPG travel contract.</p> <p>It is expected that this will take approximately 1 day per week and will be kept under continuous review by Dr xxx and Tracey McCaig (COO SPPG).</p> <p>Dr xxx will provide an invoice for billing on at least a monthly basis for reimbursement.</p>
METHODOLOGY	<p>Initial review and assessment at BHSCT level. This assessment will inform the methodologies for engagement and assessment.</p> <p>This TOR is expected to be flexible to meet needs as they arise – operational discussions should be via the Chief Operating Officer SPPG in the first instance.</p>
CONFLICT/ DECLARATION OF INTEREST	<p>Dr xxx will be required to declare any interests that may conflict with these terms of reference</p>

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