

CAMBRIDGE UNIVERSITY HOSPITALS NHS FOUNDATION TRUST

ADDENBROOKE'S 3 (HOSPITALS REDEVELOPMENT) COMMITTEE

TERMS OF REFERENCE

1. Authority

- 1.1 The Addenbrooke's 3 Committee is constituted as a standing committee of the Board of Directors and has no executive powers, other than those specifically delegated in these terms of reference. Its constitution and terms of reference are set out below and can only be amended with the approval of the Board of Directors.
- 1.2 The Committee is directly accountable to the Board of Directors and is authorised by the Board to investigate any activity within its terms of reference. It is authorised to seek any information it requires from any employee or contractor of the Trust and all employees and contractors are directed to cooperate with any request made by the Committee.
- 1.3 The Committee is authorised by the Board of Directors to secure the attendance of individuals and authorities from outside the Trust with relevant experience and expertise if it considers this necessary for or expedient to the exercise of its functions.

2. Purpose

- 2.1 The Committee will provide assurance to the Board of Directors on the progress of the Addenbrooke's 3 hospitals redevelopment programme in addressing the poor quality of the hospital estate and facilitating improvements in clinical quality, within the context of remaining at the heart of an integrated care system and working collaboratively with academic and industry partners. It will do so by:
 - Providing strategic oversight of the Addenbrooke's 3 developments on the Cambridge Biomedical Campus, ensuring that they are aligned with the Trust's strategy.
 - Ensuring that the Trust has appropriate governance arrangements (including structures, systems, processes and controls) in place to deliver the Addenbrooke's 3 programme.
 - Reviewing the progress of the constituent projects against agreed key objectives and milestones, providing critical challenge and support.
 - Ensuring strategic coherence between the constituent projects.
 - Seeking assurance that key programme risks, particularly as included on the Board Assurance Framework and the Corporate Risk Register, are being effectively managed and mitigated.
- 2.2 The Trust's Performance Committee will retain responsibility for reviewing and recommending business cases associated with the Addenbrooke's 3 programme (with a value in excess of £4 million) to the Board of Directors. The Chairs of the Addenbrooke's 3 Committee and the Performance Committee will liaise closely in this regard.

- 2.3 The Chair of the Committee will engage with and invite contributions from the Chairs of other Board assurance committees on key issues relevant to the responsibilities of those committees.

3. Membership

- 3.1 The members of the Committee shall be appointed by the Board of Directors and comprise:

- Three Non-Executive Directors
- Director of Strategy and Major Projects
- Medical Director
- Chief Nurse

- 3.2 One Non-Executive Director will be appointed as the Chair of the Committee by the Board of Directors.

- 3.3 The Chief Executive will identify an Executive lead for the Committee.

- 3.4 A quorum shall be three members, comprising two Non-Executive Directors and one Executive Director. In exceptional circumstances, an Executive Director member may send an appropriate nominated deputy in their place and this will count towards the quorum.

- 3.5 Members should make every effort to attend all meetings of the Committee and will be required to provide an explanation to the Chair of the Committee if they fail to attend more than two meetings in a financial year. If a member fails to attend more than three meetings in a financial year, the Chair of the Committee will consider with the Chair of the Trust the appropriate action to be taken. The Committee Secretary will monitor attendance by members and report this to the Chair of the Committee on a regular basis.

4. Attendance and secretariat

- 4.1 The Director of Capital, Estates and Facilities Management and the Director of Major Projects will attend all meetings. Other Non-Executive Directors will have a standing invitation to attend meetings should they so wish. Other Executive Directors and other Trust staff will be invited to attend for specific agenda items with the agreement of the Chair of the Committee.

- 4.2 The Council of Governors may nominate up to two governors to attend each meeting of the Committee to observe proceedings. The observation of Board assurance committees by governors shall be subject to conditions agreed by the Board of Directors. The Chair of the Committee may in exceptional circumstances exclude governors from being present for specific items.

- 4.3 The Director of Corporate Affairs will ensure that the Trust Secretariat provides a Secretary to the Committee and appropriate administrative support to the Chair and committee members. This will include agreement of the agenda with the Chair and Executive leads, collation and circulation of papers, producing the minutes of the meetings, keeping a record of agreed actions and follow up, and advising the Chair and members of the Committee as appropriate.

5. Frequency of meetings

- 5.1 Meetings will be held every two months.

- 5.2 The Chair may convene additional meetings of the Committee if necessary to consider business that requires urgent attention.

6. Reporting

- 6.1 The Committee will receive a regular report from the Executive lead covering issues for escalation.
- 6.2 The minutes of the Committee's meetings will be circulated for information to all members of the Board of Directors. An exception report will be presented to the next meeting of the Board of Directors following each Committee meeting to draw attention to any matters that require disclosure or escalation to the Board. The Chair of the Committee will work with the Chair of the Trust to ensure that this reporting responsibility is discharged effectively.
- 6.3 The Committee will provide an annual report to the Board of Directors on the effectiveness of its work and findings, including its review of relevant Board Assurance Framework entries and regulatory compliance. This will be based on an annual effectiveness review to be undertaken by the Committee which will inform its forward work plan.

7. Review

- 7.1 The terms of reference will be reviewed by the Committee and approved by the Board of Directors at least every two years.

8. Specific duties

- 8.1 Receive a report at each meeting covering issues and risks to be highlighted by the Executive lead for the Addenbrooke's 3 programme.
- 8.2 Ensure that the Addenbrooke's 3 programme and its constituent projects are aligned with the Trust's strategy as set by the Board of Directors, specifically in relation to clinical quality, research, teaching and commercial developments.
- 8.3 Ensure that the Addenbrooke's 3 programme and its constituent projects reflect current and future clinical pathways of care, with a focus on improving patient outcomes and experience.
- 8.4 Ensure that the Addenbrooke's 3 programme reflects appropriately the Trust's role at the heart of an integrated care system, including the development of integrated care pathways linked to primary and community care.
- 8.5 Ensure that there is strategic coherence between the constituent projects within the Addenbrooke's 3 programme.
- 8.6 Review the structures, systems, processes and controls in place to govern the Addenbrooke's 3 programme and the constituent projects.
- 8.7 Review progress in delivering the key objectives and milestones of each of the projects within the Addenbrooke's 3 programme.
- 8.8 Receive and review those entries on the Board Assurance Framework (BAF) and the Corporate Risk Register (CRR) which are to be overseen by the Committee, and other key programme risks, and ensure that they are appropriately reflected on the Committee's work programme to enable the Committee to gain assurance on the

effectiveness of the controls in place and progress in addressing gaps in control and assurance.

- 8.9 Review the overall approach of the programme to communications and stakeholder engagement (including engagement with staff, patients and carers, the public and partners).
- 8.10 Review the findings of Internal and External Audit reports and any other external reports covering matters within the remit of the Committee, seeking assurance that appropriate actions are identified and implemented in response to findings and recommendations.
- 8.11 Review any issues referred to the Committee by the Board of Directors.
- 8.12 Develop an annual work programme agreed by the Committee to discharge the duties as set out above.
- 8.13 Undertake an annual review of the effectiveness of the Committee to inform the Committee's annual report to the Board of Directors and the following year's work programme.
- 8.14 Undertake any other responsibilities as delegated by the Board of Directors.

Date approved: 9 December 2020
Approved by: Board of Directors
Next review date: November 2022