



## Schedule 3.1

### BOARD COMMITTEE ARRANGEMENTS

This Schedule forms part of, and shall have effect as if incorporated in the  
NHS Trust Standing Orders

## ACADEMIC PARTNERSHIPS COMMITTEE

## TERMS OF REFERENCE AND OPERATING ARRANGEMENTS



## ACADEMIC PARTNERSHIP COMMITTEE

### TERMS OF REFERENCE AND OPERATING ARRANGEMENTS

#### 1. INTRODUCTION

1.1 In line with Standing Orders and the Trust's Scheme of Delegation, the Board shall nominate annually a committee to be known as the Academic Partnership Committee.

1.2 The Trust has made a commitment to recognise the importance of partnership working with a full range of academic partners and has established an Academic Partnership Committee to facilitate and develop this work and are hereby set out in these formal terms of reference and operating arrangements

#### 2. PURPOSE

2.1 The Committee is responsible for strategic collaboration and partnership working with higher and further education and wider education providers across and beyond Wales. Through this partnership working, the Committee will look to ensure that the Trust provides and strengthens patient safety and quality, identifies and implements best practice and gains an international reputation for excellence and innovation.

2.2 Develop a Memorandum of Understanding between all parties and ensures this enables support for the services provided by the Trust and achieves the highest standards of health, clinical care, research, innovation and health care education and training

2.3 Promote and collaborate with partners in efforts to improve the health and wellbeing of the general population in Wales.

2.4 Review the strategic aims and objectives of each of the partners and where those aims and objectives appear to be usefully aligned, to optimise the benefits to patient care and health care service delivery through an inclusive and supportive approach

2.5 Become a national and international exemplar for effective strategic and operational collaboration between the local health and social care service and its partner universities, including developing and advising upon the most appropriate health and social care pathways.

2.6 Facilitates a forward-looking organisational culture across all partners which: -

- a) promotes quality improvement across all activities;



- b) is rich in educational activities and staff development opportunities;
- c) helps attract and retain the very best staff, including internationally leading clinical academics;
- d) facilitates research, grant capture by clinicians and academics and the translation of evidence research findings into practice;
- e) encourages innovation and modernisation;
- f) encourages multi-disciplinary work and access to new and emergent fields of research and evidence based practice;
- g) builds capacity for translational research that allows all parties to compete at an international level;
- h) integrates education, research and practice that looks beyond targets and entrenched ways of working, fostering a culture of learning and innovation based on evidence and best practice;
- i) facilitates wealth and economic growth in the region and beyond;
- j) Supports the capture and analysis of the service user experience;
- k) Develops health informatics opportunities to achieve their potential;
- l) Supports strategic planned lines of enquiry enabling knowledge creation.
- m) Use of digital technology to enhance our services.

2.7 Receive assurance that projects in which the parties are currently collaborating have appropriate agreements which detail the projects and clearly reflect the responsibilities of the parties. Depending on the nature of the projects the risk to the parties should be understood and the appropriate mitigated action taken.

2.8 The work of the Committee will focus on the healthcare of the whole workforce professional education and training, continuing professional development, scholarly enquiry and research, audit and evaluation.

### **3. ROLE**

3.1 With regard to its role in providing advice and assurance to the Board around obtaining and maintaining university status, the Committee will comment specifically upon the following:-

3.2 Explore opportunities for the further development of collaborative activities between the members of the partnership, especially in relation to clinical services, research, teaching, innovation and improvement, providing advice thereon to appropriate decision- making bodies;

3.3 Working and collaborating with key partners in health, social care, local authorities, third sector, academia, as well as patients and patient representative groups;

3.4 Explore and identify opportunities for the development of the whole workforce;

3.5 Advise on matters relating to resources for existing or potential collaborative activity;

3.6 Build on existing work in developing opportunities for widening access and



increasing participation in health and social care education amongst local communities;

3.7 Explore opportunities for the development of collaborative activities in relation to research and to promote and plan for synergy in research;

3.8 Maximise the benefits of shared resources and expertise;

3.9 Monitor and facilitate the delivery of all aspects of undergraduate teaching and postgraduate training as delivered by the members of the partnership;

3.10 Promote excellence in education and training to develop a workforce with the capability and commitment to transform healthcare;

3.11 Build capacity for translational research across the integrated patient pathway that allows the Trust to compete at an international level;

3.12 Promote an outward-facing culture eager to build external links nationally and internationally with other clinical, academic and industrial partners;

3.13 Establish systems to recognise and reward innovation in education, research and practice, sharing best practice for stakeholders to learn from each other and facilitating the promotion of NHS clinicians to academic titles and academics to honorary clinical titles;

3.14 Establish specific task and finish groups, as necessary, to take forward any relevant initiatives;

3.15 Develop and agree a forward work programme, identifying key objectives and priorities

### **Corporate Risks and Audit Recommendation Tracker**

3.16 The Audit Committee has overall responsibility for ensuring that corporate risks are identified and are being properly managed within the Trust. The Audit Committee also has responsibility for ensuring that there are processes in place to address and take forward audit recommendations. Nevertheless, each risk from the corporate risk register, and each recommendation from the audit tracker, will be allocated to an appropriate Board Committee who will be responsible for ensuring that the Trust is managing and progressing each item as planned. Regular reports will be provided to individual Committees on those items for which they have responsibility and overall Trust-wide progress reports will be presented to each Audit Committee.

### **Sub-Committees**

3.17 The Committee may establish sub-committees or task and finish groups to carry out on its behalf specific aspects of Committee business.



## 4. MEMBERSHIP

### Members

4.1 The core membership is a minimum of three members comprising:-

Chair	Non Executive Director
Members	At least two other Non Executive Directors of the Board.

### Attendees

4.2 The core membership will be supported routinely by the attendance of the following:-

- Executive Director of Workforce and Organisational Development
- Director of Partnerships and Engagement
- Assistant Director of Research, Audit & Service Improvement
- Board Secretary
- Representatives from Academia

Other Directors and staff members will be invited to attend, either by the Committee or to present individual reports.

With the permission of the Chair, those in attendance may send a deputy in their place. This, however, does not affect the right of the Chair to require those listed above to attend.

Two Trade Union partner representatives will also be invited to attend. The Committee may also co-opt additional 'external' invitees from outside the organisation to provide specialist skills, knowledge and expertise.

### Secretariat

4.3 Secretary As determined by the Board Secretary

### Member Appointments

4.4 The membership of the Committee shall be determined by the Board, based on the recommendation of the Trust Chair, taking account of the balance of skills and expertise necessary to deliver the committee's remit, and, subject to any specific requirements or directions made by the Welsh Government.

4.5 Non Executive Members shall be appointed to hold office for a period of one year at a time, (Membership being reviewed by the Chairman of the Board on an annual basis) up to a maximum of their term of office. During this time a member may resign or be removed by the Board. The Board should consider rotating a proportion of the Committee's membership after three or four years service so as to ensure the Committee is continuously refreshed whilst maintaining continuity.

4.6 Terms and conditions of appointment, (including any remuneration and



reimbursement) in respect of co-opted independent external members are determined by the Board, based upon the recommendation of the Trust Chair and, where appropriate, on the basis of advice from the Trust's Remuneration Committee.

4.7 Should any Non Executive Director on the Board be unable to attend a meeting of a Committee the member may consider appointing a substitute member to attend the meeting in his/her place. The substitute member will assume, upon appointment, full delegated responsibility on behalf of the substituted member and will be eligible to vote, as necessary on any matter before the Committee and will be counted as part of the quorum for that meeting. To instigate a substitution arrangement, the member of the Committee must notify the Board Secretary before the day of the meeting that he/she is unable to attend and the name of the member who will attend as the substitute.

### **Support to Committee Members**

4.8 The Board Secretary, on behalf of the Committee Chair shall arrange for the provision of advice and support to committee members on any aspect related to the conduct of their role

## **5. COMMITTEE MEETINGS**

### **Quorum**

5.1 At least two core members must be present to ensure the quorum of the committee, one of whom should be the committee Chair or Vice Chair.

### **Frequency of Meetings**

5.2 Meetings shall be held no less than quarterly or otherwise as the Chair of the Committee deems necessary, consistent with the Trust's annual plan of Board Business.

### **Withdrawal of individuals in attendance**

5.3 The Committee may ask any member or individual who is normally in attendance but who is not a member to withdraw to facilitate open and frank discussion of any particular matter.

## **6. RELATIONSHIP & ACCOUNTABILITIES WITH THE BOARD AND ITS COMMITTEES/ GROUPS**

6.1 The Committee is directly accountable to the Board for its performance in exercising the functions set out in these terms of reference.

6.2 The Committee, through its Chair and members, shall work closely with the Board's other committees and groups to provide advice and assurance to the Board through the:



- Joint planning and co-ordination of Board and Committee business; and
- Sharing of appropriate information;

In doing so, contributing to the integration of good governance across the organisation, ensuring that all sources of assurance are incorporated into the Board's overall assurance framework.

6.3 The Committee shall embed the Trust's corporate standards, priorities and requirements, e.g., equality and human rights through the conduct of its business.

## **7. REPORTING AND ASSURANCE ARRANGEMENTS**

7.1 The Committee Chair shall:

- report formally to each Board meeting (as appropriate) on the Committee's activities, in a manner agreed by the Board. This includes verbal updates on activity, the submission of Committee minutes and referral of written reports where appropriate, and presentation of an annual report;
- bring to the Board's specific attention any significant matter under consideration by the Committee; and
- ensure appropriate escalation arrangements are in place to alert the Trust Chair, Chief Executive (and Accountable Officer) or Chairs of other relevant committees of any urgent/critical matters that may affect the operation and/or reputation of the Trust.

7.2 The Board Secretary, on behalf of the Board, shall oversee a process of regular and rigorous self assessment and evaluation of the Committee's performance and operation including that of any sub committees established.

## **8. APPLICABILITY OF STANDING ORDERS TO COMMITTEE BUSINESS**

8.1 The requirements for the conduct of business as set out in the Trust's Standing Orders are equally applicable to the operation of the Committee, except in the following areas:

- Quorum – (as set out in section 5)

## **9. REVIEW**

9.1 These terms of reference and operating arrangements shall be reviewed at least annually but more frequently if required.