

**HIF Board of Directors – Formal Meeting
to be held on Tuesday 26 August 2025 9 – 10:30am
at HIF, 17 Wetherby Road, Harrogate, HG2 7RY.**

AGENDA

All items listed in blue text (throughout the agenda), are to be received for information/ assurance and no discussion time has been allocated within the agenda. These papers can be found in the supplementary pack.

Item	Agenda Item	Action	Lead	Paper	Time
1.0	Welcome from the Chair Introductions & apologies	Note	Chair	Verbal	9:00
2.0	Apologies for Absence	Note	Chair	Verbal	
3.0	Declaration of Interests and Conflicts of Interest	Note	Chair	Attached	
4.0	Minutes of Previous Meeting: 24 June 2025	Approve	Chair	Attached	
5.0	Matters Arising and Action Log	Note	Chair	Attached	9:10
6.0	Chair's Update	Note	Chair	Verbal	9:15
7.0	Managing Director's Update	Note	Managing Director	Attached	9:20
8.0	Sub-Committee Update - Quality & Governance Committee	Note/Discuss	Non- Executive Director	Attached	9:25
9.0	Finance Report	Note/Discuss	Deputy Director of Finance	Attached (in IBR)	9:35
10.0	Workforce and Organisational Development update	Note/Discuss	Deputy Director of People & Culture	Attached (in IBR)	9:45
11.0	Standing Financial Instructions	Approve	Managing Director	Attached	9:55
12.0	Corporate Framework	Approve	All	Attached	10:00
13.0	Capital Development	Note/Discuss	Managing Director	Attached (in IBR)	10:10

14.0	Any Other Business	Discuss	Managing Director	Verbal	10:20
15.0	Items to Escalate to HDFT Board	Discuss	Chair	Verbal	
16.0	Additional Risks to add to Risk Register	Discuss	Chair	Verbal	
17.0	Evaluation of the Meeting	Discuss	Chair	Verbal	

Meeting Close: 10:30 noon

NEXT MEETINGS:

HIF Board Workshop: Tuesday 30 September 9:00-11:30 **Boardroom, HIF, 17 Wetherby Road**

HIF Board Meeting: Tuesday 28 October 9:00-11:00 Boardroom, HIF, 17 Wetherby Road

Private Board Meeting: Tuesday 28 October 11:00 – 12:00 Boardroom, HIF, 17 Wetherby Road

Confidential Motion – the Chair to move:

The following items will be discussed in a private session which is exempt under the Freedom of Information Act S.33(1)(b) – disclosure would or would likely prejudice substantially the commercial interests of any person or organisation.

HARROGATE HEALTHCARE FACILITIES MANAGEMENT LIMITED

Company number: 11048040

(the "Company") t/a Harrogate Integrated Facilities (HIF)

Formal Meeting of the Company Board of Directors

held on 24 August 2025, 10 – 12 noon

at HIF, 17 Wetherby Road, Harrogate, HG2 7RY.

Present:	
Mark Chamberlain	Chair
Lucy Hind (LH)	Non-executive Director
Matt Graham (MG)	HDFT Director of Strategy, Shareholder Non-executive Director
Angie Gillett (AG)	Managing Director
In Attendance:	
XXXX	Deputy Director of People & Culture (HDFT)
XXXX	Associate Director of Business Development and Service Improvement
XXXX	Assistant Company Secretary and Governance Lead (minute taker)
XXXX	HIF Finance Manager
XXXX	HR Business Partner (HDFT)
Apologies:	
XXXX	HDFT Non-executive Director, Shareholder Non-executive Director
XXXX	Deputy Director of Finance (HDFT)
XXXX	Associate Director of Corporate Affairs and Company Secretary (HDFT) and Company Secretary (HIF)

APPROVED MINUTES

HIF/08/26/1	Welcome and Introductions
1.1	The Chair welcomed everyone to the meeting.
HIF/08/26/2	Apologies for Absence
2.1	Apologies for absence had been received from those noted above.
HIF/08/26/3	Declarations of Interest & Conflicts of Interest
3.1	The register of interests had been circulated.
3.2	Resolved: There were no additional active conflicts of interests declared in relation to the business of the meeting.

HIF/08/26/4	Minutes of the Previous Meeting
4.1	Resolved: The minutes of the Formal Board meeting held on 24 June 2025 were approved as an accurate record of the meeting.
HIF/08/26/5	Matters Arising and Action Log
5.1	Matters Arising There were no matters arising.
5.2	Action Log The action log was reviewed and noted that all items listed as “propose to close” would be closed. For ongoing items, updates were received and actions highlighted as follows:
5.3	108: Capital programme to be added to IBR: Complete, action to be closed.
5.4	109: PAM Progress: PAM submission has been approved and actions are being progressed. Complete, action to be closed.
5.5	110: Risk regarding costs of PAM to be added to risk register: Complete, action to be closed.
5.6	Resolved: The action log would be updated as discussed.
HIF/08/26/6	Chair’s Update
6.1	The Chair provided a verbal update.
6.2	The financial position was very positive and ensuring the accountability and responsibility for managing budgets to managers had made a difference. The Chair expressed thanks to the finance team and managers for their continuing efforts.
6.3	It would be important to keep a focus on quality metrics alongside the financial position.
6.4	Resolved: The Chair’s update was noted.
HIF/08/26/7	Managing Director’s Update
7.1	The report had been circulated in advance and was taken as read. The Managing Director highlighted key points for the Board to note:
7.2	<u>Digital strategy:</u> the Digital Strategy had been presented and approved at IRCC. Proposals have been developed to utilise capital from the 2026/27 budget to support digital transformation, with a focus on enhancing service delivery and operational productivity and efficiency. If finances and capacity allow then some elements of the strategy will be brought forward into 2025/26.
7.3	<u>Community Model Development – XXXXX:</u> An update would be provided in the Private meeting.
7.4	<u>Postage Services Review:</u> The review was being undertaken due to cost pressures and significant changes being implemented nationally. The Managing

	Director is in discussion with the Director of Finance regarding actions required by HDFT.
7.5	<u>Medical Engineering Service Integration</u> : The review of the Medical Engineering service structure is ongoing.
7.6	XXXX : Discussions with XXXX regarding the XXXX are reaching a conclusion, although further work was still required to review the final draft of the XXXX and undertake a risk assessment with our legal advisors of any changes to determine if any of the changes to the original contract were material. All parties were aiming to complete this work as soon as possible with a proposed date to sign off in October 2025. Further updates on progress would be provided to HIF Board and HDFT resources committee.
7.7	The Chair asked for any questions or comments.
7.8	Shareholder Non-executive Director (MJ) asked about the postage cost increases. The Finance Manager confirmed that there would now be a higher cost per item to retain the 2 day delivery standard. This had a particular impact on packages sent to patients by Endoscopy. An SBAR had been completed for discussion at the next contract meeting with the Trust and other providers considered.
7.9	The Chair asked for clarity on the language to be used when discussing the XXXX . The Associate Director of Business Development and Service Improvement confirmed that it could only be stated that HIF had been commissioned to progress an OBC to FBC. Caution was required due to this being a XXXX . It was agreed that the Board were not to discuss the project outside formal meetings and guidance would be issued following the meeting. Action: Associate Director of Business Development and Service Improvement to provide Board members with guidance regarding XXXX .
7.10	The Chair requested a gemba to Medical Engineering. Action: Assistant Company Secretary and Governance Lead to arrange a Board gemba to Medical Engineering.
7.11	The Chair noted that although the XXXX XXXX was taking a while to finalise, the deal negotiated was very positive for HIF.
7.12	Resolved: The Board noted the contents of the Managing Director's report.
HIF/08/26/8	Quality and Governance sub-committee update
8.1	A report of the Quality and Governance sub-committee had been circulated in advance and was taken as read.
8.2	Non-executive Director (LH) raised the following items to the Board: <ul style="list-style-type: none"> • Cash issues – some suppliers are not being paid on time, waste being a key area, which is having an impact on service delivery • PLACE engagement – actions are being undertaken in HIF but may need Board support for engagement with the Trust at a later date.
8.3	The Managing Director added that the cash issue was due to how items are transacted between HIF and HDFT. Ongoing communication with the finance team was required to ensure key suppliers were paid.

8.4	<p>The Managing Director would request an update from HDFT on PLACE and report back to the Board. The Chair highlighted the importance of PLACE due to the reputational risk.</p> <p>Action: Managing Director to request an update on PLACE and report back to Board.</p>
8.5	<p>The Finance Manager explained that the 'cash in the bank' total included in the IBR was a snapshot of the account during the month rather than an accurate indicator of cash available. The Finance Manager would continue to provide a contextual narrative to the cash position at meetings.</p>
8.6	<p>The Board were asked if the new IBR slide covering Capital Project spending provided the Board with assurance. It was confirmed that it provided both assurance and an audit trail.</p>
8.7	<p>Resolved: The sub-committee report was noted.</p>
HIF/08/26/9	Finance Report
9.1	<p>The finance report had been circulated in advance of the meeting and was taken as read.</p>
9.2	<p>The Finance Manager stated that the forecast showed that the planned year-end surplus had been delivered at month 4. The forecast surplus had increased this month due to the Medical Engineering service coming in house but it was noted that the year-end forecast still included a number of caveats.</p>
9.3	<p>In terms of WRAP, the capital overheads were linked to the EY report, and would stay as undelivered until the situation is resolved and transacted.</p>
9.4	<p>Looking forward, the focus was on identifying WRAP for next year (XXXX target - 50% recurrent.) Teams were working on schemes that could be transacted from April 2026. The Chair noted that it was good to be speaking about forward planning.</p>
9.5	<p>The Chair asked if the Board should be concerned about the cash position. It was confirmed that the situation is on both risk registers and being actively managed.</p>
9.5	<p>Non-executive Director (LH) asked if planned energy reduction schemes could be added to the WRAP plan. The Finance Manager confirmed that the schemes would be added once energy savings had been identified.</p>
9.7	<p>The Managing Director added that a report was being compiled regarding projected increased energy usage due to projects such as XXXX coming on line, to allow for forward planning of budgets.</p>
9.8	<p>The Associate Director of Business Development and Service Improvement confirmed that some of the large energy saving schemes would be included in the Growth Plan.</p>
9.9	<p>Non-executive Director (LH) suggested ring-fencing savings from energy projects to invest in other schemes.</p>

9.10	The Managing Director confirmed that these considerations would inform the 2026/27 Business Plan, ensuring that HIF are delivering all services to the contracted amount and any investment spending would be agreed in advance with the Director of Finance.
9.11	The Chair agreed that discussions around the planned surplus should be carefully managed to ensure budget holders continue to effectively manage spending.
9.12	The Chair stated that it was positive to be taking about investment in services.
9.13	Resolved: The Finance Report was received and noted.
HIF/08/26/10	Workforce and Organisational Development update
10.1	The workforce report had been circulated in advance of the meeting and was taken as read. The Deputy Director of People & Culture highlighted the following points.
10.2	Most of the key workforce indicators were showing improvements compared to the same time last year and four indicators showed improvements from the previous month. Sickness levels remain a concern with a slight increase this month, driven mainly by the introduction of XXXX
10.3	A deep dive discussion on the reasons for leaving HIF had taken place at IRCC. The majority of people had left for reasons that were either outside of HIF's control (relocation, family reasons etc.) or were due to effective use of HR policies (health management or employment issues). Nevertheless there were 15 'unclassified/other' leavers, where the reason for leaving was not recorded in ESR. The HR team will work with managers to improve the accuracy of information added to ESR.
10.4	It was noted that a new operational workforce meeting is to be established in HIF to review current data, share best practice and monitor the staff survey action plans.
10.5	Shareholder Non-executive Director (MG) asked if the target % for appraisals should be 90% rather than 75% and the HRBP agreed to check.
10.6	Resolved: The Workforce Report was received and noted.
HIF/08/26/11	Standing Financial Instructions
11.1	The draft Standing Financial Instructions had been circulated in advance and were taken as read.
11.2	The draft had been agreed with the finance team and IRCC.
11.3	The Managing Director had two queries which may result in minor changes but the SFI's could proceed through the approval process. <ul style="list-style-type: none"> • MD Approval limit– a higher limit would be preferable due to expenditure for capital works • Procurement waivers – whether these need to be more detailed
11.4	The Standing Financial Instructions were approved by the Board with the understanding that there may be some minor changes as outlined above.

11.5	Resolved: The Standing Financial Instructions were approved.
HIF/08/26/12	Corporate Framework
12.1	A paper outlining the Corporate Framework along with the final draft of the document had been circulated in advance and was taken as read.
12.2	The Associate Director of Business Development and Service Improvement outlined the content and purpose of the Corporate Framework. The Governance audit had received significant assurance and had noted that activities from the 2024/25 work plans had been completed.
12.3	The Chair noted that the document was very comprehensive.
12.4	2026 meeting dates and work plans would be added to the document as they became available.
12.5	It was confirmed that the requirement for updating the Corporate Framework was every three years but it was likely that a review would be undertaken yearly.
12.6	The Corporate Framework was an internal document which would not be uploaded to the HIF website.
12.7	The Managing Director added that the Corporate Framework linked to the quality work being undertaken, including the development of a corporate policy
12.8	The Corporate Framework was approved by the Board with agreement that information for 2026 would be added.
12.9	Resolved: The Corporate Framework was approved.
HIF/08/26/13	Capital Development
13.1	Information regarding the Capital Development programme had been circulated in the IBR and was taken as read.
13.2	The Managing Director confirmed that the programme was on track, although it was challenging, with a significant amount of work planned. XXXX remained ahead of schedule. The Littondale and RAAC projects were moving ahead and critical infrastructure money had been received for fire doors and compartmentalisation on Littondale and the main hospital corridors.
13.3	The Chair encouraged the capital team to publicise the work they were doing across the Group.
13.4	Resolved: Capital Development update was noted.
HIF/08/26/14	Any Other Business
14.1	Resolved: There were no further items of business

HIF/08/26/15	Items to Escalate to HDFT Board
15.1	Resolved: There were no items to escalate to the HDFT Board.
HIF/08/26/16	Additional Risks to add to Risk Register
16.1	Resolved: There were no additional risks to be added to the risk register.
HIF/08/26/17	Evaluation of the Meeting
17.1	The Board considered the meeting had been productive.
HIF/08/26/18	Date and Time of Next Meeting
18.1	The dates, times and locations of the next meetings were noted: Workshop: Tuesday 30 September 2025, 9.00am -11:30am – HIF, 17 Wetherby Road Formal Board Meeting: Tuesday 28 October 2025, 9.00am-11:00am – HIF, 17 Wetherby Road Private Board Meeting: Tuesday 28 October 2025,11.00am-12 noon – HIF, 17 Wetherby Road
PRIVATE SESSION	
	The Board meeting of Harrogate Healthcare Facilities Management Limited continued in private session.

**Harrogate Integrated Facilities – FORMAL Board of Directors – Action Log
As at end June 2025 2025**

Date of Meeting	Action Log Reference	Minute Reference	Action Description	Lead	Target date (as detailed, if not at next HIF Board meeting)	Progress update
24/06/25	Matters arising	HIF/06/24/5	Add capital programme to the IBR to allow information to be scrutinised in sub-committees	Assistant Company Secretary and Governance Lead	26/08/2025	Action complete – propose to close
24/06/25	Items to escalate to HDFT Board	HIF/06/24/15	PAM progress - Non-executive Director's (JC & MG) would take a PAM progress update to Resources committee and Board and report back at the next Board meeting	Non-executive Director's (JC & MG)	26/08/2025	
24/06/25	Additional Risks	HIF/06/24/16	Head of Operational Estates to add a risk regarding the capital costs of PAM to risk register	Head of Operational Estates	26/08/2025	

**Board of Directors
Tuesday 26th August 2025
Report from the Managing Director**

Agenda Item Number:	7
Presented for:	Discussion
Report of:	Managing Directors Report
Author (s):	Managing Director
Report History:	None
Publication Under Freedom of Information Act:	This paper can be made available under the Freedom of Information Act 2000 if requested.
Links to HIF's Objectives	
Delivering safe, efficient, compliant, responsive and outstanding quality services	✓
Being Well Led and Financially Sustainable	✓
Embedding business modernisation and service development throughout the company	✓
Growing our future business development opportunities	✓
Being an employer of choice, developing our staff, being an outstanding place to work and delivering our services with pride	✓
Delivering our services sustainably, minimising our impact on the environment	✓
Recommendation:	
The Board of Directors is asked to note the work that is ongoing across the organisation.	

1.0 Introduction

- 1.1 This report provides the Board of Directors with an update on current matters within the Company.

2.0 Digital Strategy Progress

- 2.1 The company has made notable progress in advancing its digital strategy. A comprehensive presentation was delivered to the Innovation, Resources and Commercial Committee (IRCC), outlining the vision and planned initiatives. As part of our forward planning, proposals have been developed to utilise capital from the 2026/27 budget to support digital transformation, with a focus on enhancing service delivery and operational productivity and efficiency. Key areas of focus will be Catering – meal ordering, portering – replacement of [xxxxxx] system and domestic services with a view to introducing a new monitoring system, which will replace the existing paper based systems. Discussions will also take place with the Estates team on which systems would be beneficial in the future to support its service. Engagement with the Trust and stakeholders is scheduled to ensure alignment and collaborative implementation.

3. Main Entrance Refurbishment Project

- 3.1 Following approval by Trust board of the outline business case, meetings have commenced with the appointed delivery partner to begin development of the Full Business Case (FBC). This project remains a core priority for the team and further work is now being undertaken to detail the impact on our future in-house retail offer at Herriots. A more detailed report is provided to the Board in a separate paper.

4. Community Model Development – [xxxxxx]

- 4.1 Work continues with the Trust on the development of a new community-based service model. As part of this, a cost sheet has been received for [xxxxxx], which outlines a number of potential opportunities. While this is an encouraging development, significant due diligence remains to be undertaken to assess viability, value for money, and alignment with our objectives before any decisions are made regarding progression.

5. Postage Services Review

- 5.1 The team has recently completed a review of our postage services in light of recent changes implemented by [xxxxxx]. The review has identified that service collection times have been significantly reduced by our downstream access provider and early indications suggest that costs will increase as a result. A paper outlining the potential operational impact and proposed options for mitigation will be submitted to the Trust for consideration at the next Contract and Performance Review Meeting.

6. Medical Engineering Service Integration

- 6.1 The review of the Medical Engineering service structure is ongoing. The service is embedding well within the company, and work is underway to ensure full integration of the team. A formal impact assessment is currently being conducted with a view to entering consultation in October 2025. Updates will continue to be provided as this work progresses.

7. [REDACTED]

7.1 Discussions with [REDACTED] regarding the [REDACTED] ([REDACTED]) are reaching a conclusion. A meeting was held with [REDACTED] on 7 August to update on progress. A final version of the [REDACTED] has now been received for review with our legal team, [REDACTED]. Subject to the outcome of this review being satisfactory, it is anticipated that the [REDACTED] will be executed in September 2025.

8.0 Conclusion

8.1 The Board of Directors is asked to: -

8. 1.1 Note the work that is ongoing across the Organisation.

Date: 11/08/25

Ref: AG/AC/



**Harrogate Healthcare
Facilities Management**

A wholly-owned company of Harrogate and District NHS Foundation Trust

Harrogate Healthcare Facilities Management Limited

Standing Financial Instructions

Last Revised: Approved by Audit Committee on 03.05.2018

Reviewed by Financial Controller 16th July 2025

1 INTRODUCTION

1.1 General

- 1.1.1 These Standing Financial Instructions (SFIs) should be read in conjunction with the articles of association of the Company which confirm the role, remit and function of the Board of Directors.
- 1.1.2 These SFIs detail the financial responsibilities, policies and procedures to be adopted by the Company. They are designed to ensure that the Company's financial transactions are carried out in accordance with the law in order to achieve probity, accuracy, economy, efficiency and effectiveness.
- 1.1.3 Should any difficulties arise regarding the interpretation or application of any of the Standing Financial Instructions then the advice of the Managing Director **MUST BE SOUGHT BEFORE ACTING.**
- 1.1.4 **FAILURE TO COMPLY WITH STANDING FINANCIAL INSTRUCTIONS IS A DISCIPLINARY MATTER WHICH COULD RESULT IN DISMISSAL.**

1.2 Terminology

1.2.1

"Accountable Officer"	means the Officer responsible and accountable for funds entrusted to the Company. He/she shall be responsible for ensuring the proper stewardship of funds and assets. This shall be the Group Finance Director.
"Articles"	means the Articles of Association of the Company from time to time in force.
"Board of Directors"	means the directors appointed in accordance with the Articles.
"Budget"	means a resource, expressed in financial terms, proposed by the Board of Directors for the purpose of carrying out, for a specific period, any or all of the functions of the Company.
"Budget Holder"	means the director or employee with delegated authority to manage finances (Income and Expenditure) for a specific area of the Company's business.
"Chair"	is the person appointed in accordance with the Articles to lead the Board of Directors.
"Committee"	means any committee appointed by the Board of Directors pursuant to the Articles.
"Committee Members"	means a person formally appointed by the Board of Directors to sit on or to chair specific committees.
"Group Finance Director"	means the Finance Director of the Shareholder.
"Managing Director"	means the employee of the Company from time to time designated as the managing director who shall be accountable to the Board of Directors for the performance and management by the Company of the OHFA but who shall not sit on the Board of Directors.
"OHFA"	means the Operated Healthcare Facilities Agreement entered into between the Company and the Shareholder.
"SFIs"	means Standing Financial Instructions.

“Shareholder” means the sole shareholder of the Company, Harrogate and District NHS Foundation Trust.

“Tendering Procedure” means the Company’s tendering procedure from time to time in force.

1.3 Responsibilities and Delegation

1.3.1 The Board of Directors exercises financial supervision and control by:

1.3.1.1 formulating the Company’s financial strategy;

1.3.1.2 requiring the submission and approval of budgets within approved allocations/overall income;

1.3.1.3 defining and approving essential features in respect of important procedures and financial systems (including the need to obtain value for money); and

1.3.1.4 defining specific responsibilities placed on members of the Board of Directors and employees.

1.3.2 Board of Directors has resolved that certain powers and decisions may only be exercised by the Board of Directors in formal session. These are set out in the ‘Reservation of Powers to the Board of Directors’ document.

1.3.3

The Board of Directors will delegate responsibility for the performance of its functions in accordance with the Scheme of Delegation document adapted (by the Trust.)

1.3.4 Within the Standing Financial Instructions, it is acknowledged that the Managing Director is ultimately accountable to the Chair and the Board of Directors. As Accountable Officer for ensuring that the Board of Directors meets its obligation to perform its functions within the available financial resources, ensuring targets are met and have overall responsibility for the company’s system of internal control.

1.3.5 The Managing Director and Group Finance Director will, as far as possible, delegate their detailed responsibilities, but they remain accountable for financial control.

1.3.6 It is a duty of the Managing Director to ensure that existing members of the Board of Directors and employees and all new appointees are notified of, and understand, their responsibilities within these Instructions.

1.3.7 The Group Finance Director is responsible for:

1.3.7.1 implementing the Company’s financial policies and for co-ordinating any corrective action necessary to further these policies;

1.3.7.2 maintaining an effective system of internal financial control including ensuring that detailed financial procedures and systems incorporating the principles of separation of duties and internal checks are prepared, documented and maintained to supplement these instructions;

1.3.7.3 ensuring that sufficient records are maintained to show and explain the Company’s transactions, in order to disclose, with reasonable accuracy, the financial position of the Company at any time,
and, without prejudice to any other functions of the Company, and employees of the Company, the duties of the Group Finance Director include:

1.3.7.4 the provision of financial advice to other members of the Board of Directors and employees;

- 1.3.7.5 the design, implementation and supervision of systems of internal financial control; and
- 1.3.7.6 the preparation and maintenance of such accounts, certificates, estimates, records and reports as the Company may require for the purpose of carrying out its statutory duties.
- 1.3.8 The Company Secretary, if one is appointed, is responsible for ensuring efficient administration and effective corporate governance processes to ensure compliance with relevant legislation and regulations. If a Company Secretary is not appointed, the Managing Director will identify an officer of the Company to undertake this role.
- 1.3.9 All members of the Board of Directors and employees, severally and collectively, are responsible for:
 - 1.3.9.1 the security of the property of the Company;
 - 1.3.9.2 avoiding loss;
 - 1.3.9.3 exercising economy and efficiency in the use of resources; and
 - 1.3.9.4 conforming to the requirements of Standing Financial Instructions, Financial Procedures and any Schemes of Delegation.
- 1.3.10 Any contractor or employee of a contractor who is empowered by the Company to commit the Company to expenditure or who is authorised to obtain income shall be covered by these instructions. It is the responsibility of the Managing Director to ensure that such persons are made aware of this.
- 1.3.11 For any and all members of the Board of Directors and employees who carry out a financial function, the form in which financial records are kept and the manner in which members of the Board of Directors and employees discharge their duties must be to the satisfaction of the Group Finance Director.

2 AUDIT

2.1 Internal Audits

- 2.1.1 Internal audits shall provide an independent and objective view of internal control.
- 2.1.2 Where the a director feels there is evidence of ultra vires transactions, evidence of improper acts, or if there are other important matters that the director wishes to raise, the director should raise the matter at a full meeting of the Board of Directors. Exceptionally, the matter may need to be referred to the Shareholder.
- 2.1.3 It is the responsibility of the Group Finance Director to ensure an adequate internal audit service is provided and the Board of Directors shall be involved in the selection process when there is a proposal to review the provision of internal audit services.

2.2 Group Finance Director

- 2.2.1 The Group Finance Director is responsible for:
 - 2.2.1.1 ensuring there are arrangements to review, evaluate and report on the effectiveness of internal financial control including the establishment of an effective internal audit function;
 - 2.2.1.2 ensuring that the internal audit is adequate;
 - 2.2.1.3 deciding at what stage to involve the police in cases of misappropriation and other irregularities not involving fraud or corruption;
 - 2.2.1.4 ensuring that an annual internal audit report is prepared for the consideration of the Audit Committee and the Board of Directors. The report should cover:
 - 2.2.1.4.1 a clear opinion on the effectiveness of internal control,

- 2.2.1.4.2 major internal control weaknesses discovered,
 - 2.2.1.4.3 progress on the implementation of internal audit recommendations,
 - 2.2.1.4.4 progress against plan over the previous year,
 - 2.2.1.4.5 strategic audit plan covering the coming three years,
 - 2.2.1.4.6 detailed plan for the coming year.
- 2.2.2 The Group Finance or designated auditors are entitled without necessarily giving prior notice to require and receive:
- 2.2.2.1 access to all records, documents and correspondence relating to any financial or other relevant transactions, including documents of a confidential nature;
 - 2.2.2.2 access at all reasonable times to any land, premises, members of the Board of Directors or employees of the company;
 - 2.2.2.3 the production of any cash, stores or other property of the Company under a member of the Board of Directors and employee's control; and
 - 2.2.2.4 explanations concerning any matter under investigation
- 2.3 Role of Internal Audit**
- 2.3.1 Internal audit is an independent and objective appraisal within an organisation which provides an independent and objective opinion to the board and the Innovation, Resources and Commercial Committee on the degree to which risk management, control and governance support the achievement of the organisations agreed objectives.
- 2.3.2 Internal Audit will systematically review, evaluate and report, in accordance with their risk-based plan, on risk management, internal control and governance arrangements. These arrangements comprise the policies, procedures and operations in place to:
- (a) establish and monitor the achievement of the organisation's objectives.
 - (b) identify, assess and manage the risks to achieving the organisations objectives.
 - (c) ensure the economical, effective and efficient use of resources.
 - (d) ensure compliance with established policies (including behavioural and ethical expectations), procedures, laws and regulations.
 - (e) safeguard the organisation's assets and interests from losses of all kinds, including those arising from fraud, irregularity or corruption.
 - (f) ensure the integrity and reliability of information, accounts and data, including internal and external reporting and accountability processes.
- 2.3.3 Whenever a matter arises that involves, or is thought to involve, irregularities concerning cash, stores, or other property or any suspected irregularity in the exercise of any function of a pecuniary nature, the Group Finance Director must be notified immediately.
- 2.3.4 Trust doc includes some other paragraphs relating to the Head of Internal Audit and the Audit committee
- 2.4 Fraud and Corruption**
- 2.4.1 The Company shall cooperate with the Local Counter Fraud Specialist appointed by the Shareholder.
- 2.5 External Audit**

- 2.5.1 The Board of Directors shall be responsible for the appointment of an external auditor of the Company accounts where appropriate.
- 2.5.2 The Board of Directors shall at all times comply with the Companies Act 2006 requirements to subject the financial statements of the Company to external audit.
- 2.5.3 The Board of Directors shall make available all books, records, information and explanations to the auditors of the Shareholder, as the auditor judges necessary to form an opinion on the financial statements of the Group (being the Company and the Shareholder).

2.6 **Security Management**

- 2.6.1 The Board of Directors are responsible for the security of any financial data relating to the Company.

3 **BUSINESS PLANNING, BUDGETS, BUDGETARY CONTROL, AND MONITORING**

3.1 **Preparation and Approval of Business Plans and Budgets**

- 3.1.1 The Managing Director will compile and submit to the Board of Directors an annual business plan which takes into account financial targets and forecast limits of available resources. The annual business plan will contain:
 - 3.1.1.1 a statement of the significant assumptions on which the plan is based;
 - 3.1.1.2 details of major changes in workload, delivery of services or resources required to achieve the plan.
- 3.1.2 Prior to the start of the financial year the Managing Director will prepare and submit budgets for approval by the Board of Directors and the Shareholder (where applicable). Such budgets will:
 - 3.1.2.1 be in accordance with the aims and objectives set out in the annual business plan;
 - 3.1.2.2 accord with workload and manpower plans;
 - 3.1.2.3 be produced following discussion with appropriate budget holders;
 - 3.1.2.4 be prepared within the limits of available funds; and
 - 3.1.2.5 identify potential risks.
- 3.1.3 The Group Finance Director shall monitor financial performance against budget and business plan, periodically review them, and report to the Board of Directors.
- 3.1.4 All budget holders must provide information as required by the Group Finance Director to enable budgets to be compiled and monitoring reports to be prepared.
- 3.1.5 All budget holders will sign up to their allocated budgets at the commencement of each financial year.
- 3.1.6 The Group Finance Director and the Managing Director have responsibility to ensure that training is delivered on an on-going basis to budget holders to help them manage successfully.

3.2 **Budgetary Delegation**

- 3.2.1 The Board of Directors may delegate the management of a budget to permit the performance of a defined range of activities. This delegation must be in writing and be accompanied by a clear definition of:
 - 3.2.1.1 the amount of the budget;
 - 3.2.1.2 the purpose(s) of each budget heading;
 - 3.2.1.3 individual and group responsibilities;
 - 3.2.1.4 authority to exercise virement;

- 3.2.1.5 achievement of planned levels of service; and
- 3.2.1.6 the provision of regular reports.
- 3.2.2 The Board of Directors and delegated budget holders must not exceed the budgetary total or limits set by the Group Finance Director.
- 3.2.3 Any budgeted funds not required for their designated purpose(s) revert to the immediate control of the Managing Director.
- 3.2.4
Non-recurring budgets should not be used to finance recurring expenditure without the authority in writing of the Board of Directors.
- 3.2.5 Invoice / Contract approval limits are set in the general ledger system. The following limits apply:

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3.3 Budgetary Control and Reporting

- 3.3.1 The Managing Director will devise and maintain systems of budgetary control. These will include:
 - 3.3.1.1 monthly/quarterly financial reports to the Board of Directors in a form approved by the Board of Directors containing:
 - 3.3.1.1.1 income and expenditure to date showing trends and forecast year-end position;
 - 3.3.1.1.2 movements in working capital;
 - 3.3.1.1.3 a balance sheet
 - 3.3.1.1.4 capital project spend and projected outturn against plan;
 - 3.3.1.1.5 explanations of any material variances from plan;
 - 3.3.1.1.6 details of any corrective action where necessary and the Managing Director's view of whether such actions are sufficient to correct the situation;
 - 3.3.1.2 the issue of timely, accurate and comprehensible advice and financial reports to each budget holder, covering the areas for which they are responsible;
 - 3.3.1.3 investigation and reporting of variances from financial, workload and manpower budgets;
 - 3.3.1.4 monitoring of management action to correct variances; and
 - 3.3.1.5 arrangements for the authorisation of budget transfers.
- 3.3.2 Each Budget Holder is responsible for ensuring that:
 - 3.3.2.1 any likely overspending or reduction of income which cannot be met by virement is not incurred without the prior consent of the Board of Directors;
 - 3.3.2.2 the amount provided in the approved budget is not used in whole or in part for any purpose other than that specifically authorised; subject to the rules of virement

- 3.3.2.3 no permanent employees are appointed without the approval of the Board of Directors other than those provided for within the available resources and manpower establishment as approved by the Board of Directors: and
- 3.3.2.4 all appointments to new posts are authorised by specific approval of the Board of Directors.
- 3.3.3 The Board of Directors is responsible for identifying and implementing cost improvements, cost reductions and efficiencies and income generation initiatives in accordance with the requirements of the Annual Business Plan and a balanced budget.
- 3.4 **Capital Expenditure**
- 3.4.1 The general rules applying to delegation and reporting shall also apply to capital expenditure. (The particular applications relating to capital are contained in SFI Section 10.)
- 3.5 **Monitoring Returns**
- 3.5.1 The Managing Director is responsible for ensuring the appropriate monitoring of forms are submitted to the requisite monitoring organisation.

4 ANNUAL ACCOUNTS AND REPORTS

- 4.1 The Board of Directors shall be responsible for preparing the Board of Directors Report, Strategic Report and Financial Statements and for maintaining the books of accounts of the Company in accordance with the Companies Act 2006.
- 4.2 The Board of Directors shall ensure that the books of account are maintained to a sufficient standard to support fully the preparation of the Shareholder's group consolidation financial statements in line with the deadline set by NHS Improvement's FT Regulator, for the year of account.
- 4.3 The Board of Directors are responsible for the preparation of the Company annual accounts and returns and submissions to Companies House and submission of corporation tax returns.
- 4.4 The Company's audited accounts will be consolidated in the Shareholder's Group accounts and presented at a public meeting.

5 BANK ACCOUNTS, INVESTMENT AND EXTERNAL BORROWING

5.1 General

- 5.1.1 The Group Finance Director is responsible for managing the Company's banking arrangements and for advising the Company on the provision of banking services and operation of accounts.
- 5.1.2 The Board of Directors shall approve the banking arrangements.

5.2 Bank Accounts

- 5.2.1 The Group Finance Director is responsible for:
 - 5.2.1.1 ensuring payments made from the accounts do not exceed the amount credited to the account except where arrangements have been made; and
 - 5.2.1.2 reporting to the Board of Directors all instances where bank accounts may become or have become overdrawn (together with the remedial action taken).

5.3 Banking and Investment Procedures

- 5.3.1 The Group Finance Director will prepare detailed instructions on the operation of the bank accounts that must include:
 - 5.3.1.1 the conditions under which the bank accounts are to be operated;

- 5.3.1.2 the limit to be applied to any overdraft; and
 - 5.3.1.3 those authorised to sign cheques or other orders drawn on the Company's accounts.
 - 5.3.2 The Group Finance Director must advise the Company's bankers in writing of the conditions under which each account will be operated.
 - 5.4 **Investments**
 - 5.4.1 The Group Finance Director will not borrow or invest surplus funds, save with the approval of the Board of Directors and the Shareholder (as required).
 - 5.5 **External Borrowing**
 - 5.5.1 The Group Finance Director will advise the Board concerning the Company's ability to pay interest on, and repay any proposed borrowing.
 - 5.6 **Review of Banking Services**
 - 5.6.1 The Group Finance Director should monitor performance of banking services providers to ensure that they reflect best practice and represent best value for money.
 - 5.6.2 The Group Finance Director will report at least every 5 years on the review of banking services to the Audit Committee.
- 6 INCOME, FEES AND CHARGES AND SECURITY OF CASH, CHEQUES AND OTHER NEGOTIABLE INSTRUMENTS**
- 6.1 **Income Systems**
 - 6.1.1 The Group Finance Director is responsible for designing, maintaining and ensuring compliance with systems for the proper recording, invoicing, collection and coding of all monies due.
 - 6.1.2 The Group Finance Director is also responsible for the prompt invoicing and banking of all monies received.
 - 6.2 **Fees and Charges**
 - 6.2.1 The Group Finance Director is responsible for approving and regularly reviewing the level of all fees and charges other than those determined by Statute/national tariff. Independent professional advice on matters of valuation shall be taken as necessary.
 - 6.2.2 The Group Finance Director shall determine the appropriate charges or fees for the provision of services provided to commercial organisations.
 - 6.3 **Debt Recovery**
 - 6.3.1 All staff have an overriding responsibility to collect fees due for the provision of chargeable services thus ensuring the minimisation of debts.
 - 6.3.2 The Group Finance Director is responsible for the appropriate recovery action on all outstanding debts.
 - 6.3.3 Income not received should be dealt with in accordance with losses procedures. (See section 12.)
 - 6.3.4 Overpayments made by the Company should be detected (or preferably prevented) and recovery initiated.
 - 6.4 **Security of Cash, Cheques and other Negotiable Instruments**
 - 6.4.1 The Group Finance Director is responsible for:
 - 6.4.1.1 approving the form of all receipt books, agreement forms, or other means of officially acknowledging or recording monies received or receivable;
 - 6.4.1.2 the provision of adequate facilities and systems for employees whose duties include collecting and holding cash, including the provision of

- safes or lockable cash boxes, the procedures for keys, and for coin operated machines; and
 - 6.4.1.3 prescribing systems and procedures for handling cash and negotiable securities on behalf of the Company.
 - 6.4.2 Company money shall not under any circumstances be used for the encashment of private cheques or IOUs.
 - 6.4.3 All cheques, postal orders, cash etc., shall be banked promptly unless the weekly value of receipts is less than **xxxxxx** (but not less than once a month) and intact. Disbursements shall not be made from cash received, except under arrangements approved by the Group Finance Director.
 - 6.4.4 The holders of safe keys shall not accept funds for depositing in their safes unless such deposits are in special sealed envelopes or locked containers. It shall be made clear to the depositors that the Company is not to be held liable for any loss, and written indemnities must be obtained from the organisation or individuals absolving the Company from responsibility for any loss.

7 MANAGING DIRECTOR

- 7.1 The Managing Director shall be responsible for:
 - 7.1.1 implementing and managing the OHFA and reporting to the Board of Directors (at intervals and with the detail and format determined by the Board of Directors from time to time) on the Company's performance under the OHFA and highlighting any problems areas and remedial actions required (the Managing Director shall be responsible for devising relevant remedial action plans and presenting these to the Board of Directors);
 - 7.1.2 identifying and developing business cases for new business and customer opportunities for the Company and presenting these to the Board of Directors;
- 7.2 The Managing Director shall be permitted to incur expenditure for the Company up to a limit of **xxxxxx** per item without having to seek written approval from the Board of Directors.
- 7.3 The Managing Director shall be required to account to and report to the Board of Directors (at intervals and with the detail and format determined by the Board of Directors from time to time) on the expenditure incurred pursuant to Clause 7.2 and to demonstrate how such expenditure is in alignment with the Company's business and financial plans from time to time in force.

8 TERMS OF SERVICE, ALLOWANCES AND PAYMENT OF MEMBERS OF THE BOARD OF DIRECTORS AND EMPLOYEES

8.1 Remuneration and Terms of Service

- 8.1.1 The Shareholder shall determine any remuneration of the Board of Directors.
- 8.1.2 The Board of Directors shall:
 - 8.1.2.1 consider the appropriate remuneration and terms of service for the employees of the Company including:
 - 8.1.2.1.1 all aspects of salary (including any performance-related elements/bonuses);
 - 8.1.2.1.2 provisions for other benefits, including pensions and cars;
 - 8.1.2.1.3 arrangements for termination of employment and other contractual terms;
 - and
 - 8.1.2.2 advise on and oversee appropriate contractual arrangements for such staff including the proper calculation and scrutiny of termination payments taking account of such national guidance as is appropriate.

8.2 Staff Appointments

- 8.2.1 No Director or employee may engage, re-engage, or re-grade employees, either on a permanent or temporary nature, or hire agency staff, or agree to changes in any aspect of remuneration:
- 8.2.1.1 within the limit of the Managing Director's approved budget; or
 - 8.2.1.2 unless authorised to do so by the Board of Directors.
- 8.2.2 The Board of Directors will approve policies/procedures for the determination of commencing pay rates, condition of service, etc, for employees.

8.3 Processing Payroll

- 8.3.1 The Group Finance Director is responsible for:
- 8.3.1.1 specifying timetables for submission of properly authorised time records and other notifications;
 - 8.3.1.2 the final determination of pay and allowances ;
 - 8.3.1.3 making payment on agreed dates; and
 - 8.3.1.4 agreeing method of payment.
- 8.3.2 The Group Finance Director will issue instructions regarding:
- 8.3.2.1 verification and documentation of data;
 - 8.3.2.2 the timetable for receipt and preparation of payroll data and the Payment of employees and allowances;
 - 8.3.2.3 maintenance of subsidiary records for superannuation, income tax, social security and other authorised deductions from pay;
 - 8.3.2.4 security and confidentiality of payroll information;
 - 8.3.2.5 checks to be applied to completed payroll before and after payment;
 - 8.3.2.6 authority to release payroll data under the provisions of the Data Protection Act, GDPR and any other applicable Data Protection Legislation as from time to time in force;
 - 8.3.2.7 methods of payment available to various categories of employee and officers;
 - 8.3.2.8 procedures for payment by cheque or bank credit to employees and officers;
 - 8.3.2.9 procedures for the recall of cheques and bank credits;
 - 8.3.2.10 pay advances and their recovery;
 - 8.3.2.11 maintenance of regular and independent reconciliation of pay control accounts;
 - 8.3.2.12 separation of duties of preparing records; and
 - 8.3.2.13 a system to ensure the recovery from leavers of sums of money and property due by them to the Company.
- 8.3.3 Appropriately nominated managers have delegated responsibility for:
- 8.3.3.1 submitting time records and other notifications in accordance with agreed timetables;
 - 8.3.3.2 completing time records and other notifications in accordance with the Group Finance Director's instructions and in the form prescribed by the Group Finance Director; and
 - 8.3.3.3 submitting termination forms in the prescribed form immediately upon knowing the effective date of an employee's or officer's resignation, termination or retirement. Where an employee fails to report for duty

or to fulfil obligations in circumstances that suggest they have left without notice, the Managing Director must be informed immediately and they will ensure payroll is informed.

8.3.3.4 taking responsibility for managing staff costs within the available resources and engaging staff in accordance with Company policies and procedures.

8.3.4 Regardless of the arrangements for providing the payroll service, the Group Finance Director shall ensure that the chosen method is supported by appropriate (contracted) terms and conditions, adequate internal controls and audit review procedures and that suitable arrangements are made for the collection of payroll deductions and payment of these to appropriate bodies.

8.4 **Contracts of Employment**

8.4.1 The Managing Director shall:

8.4.1.1 ensure that all employees are issued with a Contract of Employment in a form approved by the Board of Directors and which complies with employment legislation; and

8.4.1.2 dealing with variations to, or termination of, contracts of employment.

9 **NON-PAY EXPENDITURE**

9.1 **Delegation of Authority**

9.1.1 As part of the approval of annual budgets, the Board of Directors will approve the level of non-pay expenditure and will determine the level of delegation to budget managers as part of the budget management framework.

9.1.2 The Board of Directors will set out:

9.1.2.1 the list of managers who are authorised to place requisitions for the supply of goods and services; and

9.1.2.2 the maximum level of each requisition and the system for authorisation above that level.

9.1.3 The Board of Directors shall set out procedures on the seeking of professional advice regarding the supply of goods and services.

9.2 **Choice, Requisitioning, Ordering, Receipt and Payment for Goods and Services**

9.2.1 The Director of Finance shall determine that unless included in the list of exceptions, no goods, services or works shall be ordered except via the Trust's agreed requisitioning and purchase order processes, including online procedures. Suppliers shall be notified that they should not accept orders unless these processes have been followed and that the company operates a No PO, No Pay policy

9.2.2 The requisitioner, in choosing the item to be supplied (or the service to be performed) shall always obtain the best value for money for the Company and shall comply with the Tendering Procedure. In so doing, the advice of the Group Finance Director shall be sought.

9.2.3 The Group Director of Finance shall be responsible for the prompt payment of accounts and claims.

9.2.4 Managers and officers must ensure that they comply fully with the Tendering Procedure and limits specified from time to time and that:

9.2.4.1 all contracts, leases, tenancy agreements and other commitments which may result in a liability are notified to the Group Finance Director in advance of any commitment being made;

9.2.4.2 contracts above specified thresholds are advertised and awarded in accordance with public procurement regulations.

- 9.2.4.3 where consultancy advice is being obtained, the procurement of such advice must be in accordance with guidance issued by the Department of Health and Social Care ;
- 9.2.4.4 no order shall be issued for any item or items to any firm which has made an offer of gifts, reward or benefit to directors or employees, other than:
 - 9.2.4.4.1 isolated gifts of a trivial character or inexpensive seasonal gifts, such as calendars;
 - 9.2.4.4.2 conventional hospitality, such as lunches in the course of working visits;
- 9.2.4.5 no requisition/order is placed for any item or items for which there is no budget provision unless authorised by the Group Finance Director;
- 9.2.4.6 all goods, services, or works are ordered on an official order except works and services executed in accordance with a contract or purchases from petty cash;
- 9.2.4.7 verbal orders must only be issued very exceptionally in accordance with the Tendering Procedure - by an employee designated by the Group Finance Director and only in cases of emergency or urgent necessity. These must be confirmed by an official order and clearly marked "Confirmation Order";
- 9.2.4.8 orders are not split or otherwise placed in a manner devised so as to avoid the financial thresholds set out in the Tendering Procedure;
- 9.2.4.9 goods are not taken on trial or loan in circumstances that could commit the Company to a future uncompetitive purchase;
- 9.2.4.10 changes to the list of directors/employees and officers authorised to certify invoices are notified to the Group Finance Director;

9.3 **Petty Cash**

- 9.3.1 Purchases that will be reimbursed from petty cash are restricted in value and by type, in accordance with instructions issued by the Group Finance Director.
- 9.3.2 All reimbursements must be supported by receipt(s) and certified by an authorised signatory.
- 9.3.3 Petty cash records are maintained in a form as determined by the Group Finance Director.

9.4 **Tendering Procedure**

- 9.4.1 Duty to comply with Standing Financial Instructions.
- 9.4.2 The procedure for making all contracts by or on behalf of the Trust shall comply with these SFIs and the Company's Capital Procedures.
- 9.4.3 Authorisation of tenders / quotations / contracts should be in accordance with the Scheme of Delegation.
- 9.4.4 Where competitive tendering or quotation is not required the Company shall procure goods and services in accordance with the SFIs and Revenue / Purchasing Procedures approved by the Trust.
- 9.4.5 Business case and contract approval limits are based on the anticipated whole lifetime cost of the contract including irrecoverable VAT. If irrecoverable VAT is excluded from the initial approved expenditure value, then a further business case will be required to cover these costs.
- 9.4.6 All procurement limits stated in these SFIs are exclusive of VAT.
- 9.4.7 Any proposed must not be divided into smaller contracts to avoid the provisions of these SFIs, the Procurement Policy and external approval thresholds.

- 9.4.8 The Company shall take into account all legal requirements to comply with Public Procurement Regulations and Procurement Policy Notes. Further information on relevant tendering thresholds and requirements can be found at Public procurement policy - GOV.UK (www.gov.uk). The Company shall comply as far as is practical with the requirements of the Department of Health and Social Care Capital Investment Manual and Estate code in respect of capital investment and estate and property transactions.
- 9.4.9 Formal Competitive Tendering
- 9.4.10 The trust shall ensure that competitive tenders are invited for:
- 9.4.10.1 the supply of goods, materials, manufactured articles
 - 9.4.10.2 the rendering of services including all forms of management consultancy services (other than specialised services)
 - 9.4.10.3 sought from or provided by the Department of Health and Social Care / other external body
 - 9.4.10.4 the design, construction and maintenance of buildings and engineering works; and for disposals.
- 9.4.11 These SFIs should be read in line with the Company's Formal Tendering Procedure.

10 CAPITAL INVESTMENT, PRIVATE FINANCING, FIXED ASSET REGISTERS AND SECURITY OF ASSETS

10.1 Capital Investment

- 10.1.1 The Board of Directors:
- 10.1.1.1 shall ensure that there is an adequate appraisal and approval process in place for determining capital expenditure priorities and the effect of each proposal upon business plans;
 - 10.1.1.2 is responsible for the management of all stages of capital schemes and for ensuring that schemes are delivered on time and to cost; and
 - 10.1.1.3 shall ensure that the capital investment is not undertaken without the availability of resources to finance all revenue consequences, including capital charges.
- 10.1.2 As part of the annual planning process the Managing Director shall provide to the Board of Directors a planned replacement programme for the company assets taking into account remain life of the asset and revenue expenditure over the previous 12 months where this is available.
- 10.1.3 For every additional capital expenditure proposal the Board of Directors shall ensure:
- 10.1.3.1 that a business case is produced setting out:
 - 10.1.3.1.1 an option appraisal of potential benefits compared with known costs to determine the option with the highest ratio of benefits to costs; and
 - 10.1.3.1.2 appropriate project management and control arrangements;
 - 10.1.3.1.3 the involvement of appropriate Company personnel and external agencies; and
 - 10.1.3.2 that the Group Finance Director has certified professionally to the costs and revenue consequences detailed in the business case.
 - 10.1.3.3 as required, consent of the Shareholder is obtained.
- 10.1.4 For capital schemes where the contracts stipulate stage payments, the Board of Directors will issue procedures for their management. The Group Finance Director shall

issue procedures for the regular reporting of expenditure and commitment against authorised expenditure.

- 10.1.5 The approval of the capital investment programme shall not constitute approval for the initiation of expenditure on any scheme.

10.2 Private Finance (including leasing)

- 10.2.1 Operating leases must be signed by a member of the Board of Directors.
- 10.2.2 When the Company proposes to use finance, the following procedures shall apply:
 - 10.2.2.1 The Managing Director shall demonstrate that the use of finance represents value for money.
 - 10.2.2.2 The proposal must be specifically agreed by the Board of Directors, and where applicable, the Shareholder.
 - 10.2.2.3 Any finance lease must be agreed and signed by a member of the Board of Directors.
 - 10.2.2.4 The Managing Director will submit a business case for any loans.

10.3 Asset Registers

- 10.3.1 The Board of Directors is responsible for the maintenance of Registers of Assets, taking account of the advice of the Group Finance Director concerning the form of any register and the method of updating, and arranging for a physical check of assets.
- 10.3.2 The Company shall maintain an Asset Register recording fixed assets.
- 10.3.3 Additions to the Fixed Asset Register must be clearly identified by an appropriate budget holder and be validated by reference to:
 - 10.3.3.1 properly authorised and approved agreements, architect's certificates, supplier's invoices and other documentary evidence in respect of purchases from third parties;
 - 10.3.3.2 stores, requisitions and wages records for own materials and labour including appropriate overheads; and
 - 10.3.3.3 lease agreements in respect of assets held under a finance lease and capitalised.
- 10.3.4 Where capital assets are sold, scrapped, lost or otherwise disposed of, their value must be removed from the accounting records and each disposal must be validated by reference to authorisation documents and invoices (where appropriate).
- 10.3.5 The Group Finance Director shall approve procedures for reconciling balances on fixed assets accounts in ledgers against balances on Fixed Asset Registers.

10.4 Security of Assets

- 10.4.1 The overall control of fixed assets is the responsibility of the Board of Directors.
- 10.4.2 Asset control procedures (for purchased assets and donated assets) must be approved by the Group Finance Director. These procedures shall make provision for:
 - 10.4.2.1 recording of managerial responsibility for each asset;
 - 10.4.2.2 identification of additions and disposals;
 - 10.4.2.3 identification of all repairs and maintenance expenses;
 - 10.4.2.4 physical security of assets;
 - 10.4.2.5 periodic verification of the existence of, condition of, and title to assets recorded;
 - 10.4.2.6 identification and reporting all costs associated with the retention of an asset.

- 10.4.2.7 reporting, recording and safekeeping of cash, cheques and negotiable instruments.
- 10.4.3 All discrepancies revealed by verification of physical assets to fixed asset register shall be notified to the Group Finance Director.
- 10.4.4 Whilst each employee and officer has a responsibility for the security of property of the Company, it is the responsibility of Board Directors and senior employees in all disciplines to apply such appropriate routine security practices in relation to Company property as may be determined by the Board of Directors. Any breach of agreed security practices must be reported in accordance with instructions.
- 10.4.5 Any damage to the Company's premises, vehicles and equipment, or any loss of equipment, stores or supplies must be reported by Directors and employees in accordance with the procedure for reporting losses.
- 10.4.6 Equipment and other assets may be loaned to or from the Company. Employees and managers must ensure that the Company's management procedure is followed, in particular conditions attaching to the loan are documented and the assets identified. Assets loaned to the Company must not be entered in the Company's asset register.

11 STORES AND RECEIPT OF GOODS

- 11.1 Stores, defined in terms of controlled stores and departmental stores (for immediate use) should be:
 - 11.1.1 kept to a minimum;
 - 11.1.2 subjected to annual stock take;
 - 11.1.3 valued at the lower of cost and net realisable value.
- 11.2 The Managing Director is responsible ensuring a process is introduced for the control of stores.
- 11.3 A number of principles apply to the operation of all stores; managers of stores and stock are responsible for ensuring that:-
 - 11.3.1 stocks are kept to a minimum, commensurate with delivery and cost effective purchasing;
 - 11.3.2 delegation of responsibility must be clearly defined and recorded. The Group Finance Director may require access to the record in writing;
 - 11.3.3 the designated manager must be responsible for security arrangements; the custody of keys etc must be clearly defined in writing;
 - 11.3.4 security measures, including marking as Company property, must be commensurate with the value and attractiveness of the stock;
 - 11.3.5 stocktaking arrangements are agreed with the Group Finance Director and a physical check undertaken at least once a year;
 - 11.3.6 the system of store control, including receipt and checking of delivery notes etc, is agreed with the Group Finance Director;
 - 11.3.7 there is a system, approved by the Group Finance Director, for a review of slow moving and obsolete items and for condemnation, disposal, and replacement of all unserviceable articles. Procedures for the disposal of obsolete stock shall follow the procedures set out for disposal of all surplus and obsolete goods;
 - 11.3.8 any evidence of significant overstocking and of any negligence or malpractice shall be reported to the Group Finance Director;
 - 11.3.9 losses and the disposal of obsolete stock are reported to the Group Finance Director.
- 11.4 Where a complete system of stores control is not justified, alternative arrangements shall require the approval of the Group Finance Director.

12 DISPOSALS AND CONDEMNATIONS, LOSSES AND SPECIAL PAYMENTS

12.1 Disposals and Condemnations

12.1.1 The Managing Director must prepare detailed procedures for the disposal of assets including condemnations, and ensure that these are notified to managers and the Shareholder.

12.1.2 When it is decided to dispose of a Company asset, the Managing Director will determine the estimated market value of the item, taking account of professional advice where appropriate. The Managing Director shall ensure that the arrangements for the sale of disposable assets maximise the income to the Company.

12.2 Losses and Special Payments

12.2.1 The Board of Directors is responsible for recording and communicating any losses to the Shareholder. In discharging this responsibility the Board of Directors should have regard to the arrangements and requirements set out in the corporate governance documentation of the Shareholder.

12.2.2 All staff and the Board of Directors have a duty to prevent loss due to fraud. Where such loss is known or suspected to have occurred the Board of Directors should be notified immediately unless it is suspected that the Board of Directors are implicated in the loss, in which case, the Shareholder should be notified.

12.3 Bankruptcies, Liquidation and Receiverships

12.3.1 The Group Finance Director shall be authorised to take any necessary steps to safeguard the Company's interests in bankruptcies and company liquidations.

12.3.2 When a bankruptcy, liquidation or receivership is discovered, all payments should cease pending confirmation of the bankruptcy etc. As a matter of urgency, a statement must be prepared listing the amounts due to and from the Company.

13 COMPUTERISED FINANCIAL SYSTEMS

13.1 The Managing Director shall:

13.1.1 devise and implement any necessary procedures to ensure adequate (reasonable) protection of the Company's data, programs and computer hardware for which he/she is responsible from accidental or intentional disclosure to unauthorised persons, deletion or modification, theft or damage, having due regard for the Data Protection Act 1998 or GDPR (or such other data protection legislation as is in force from time to time);

13.1.2 ensure that adequate (reasonable) controls exist over data entry, processing, storage, transmission and output to ensure security, privacy, accuracy, completeness, and timeliness of the data, as well as the efficient and effective operation of the system;

13.1.3 ensure that adequate controls exist such that the computer operation is separated from development, maintenance and amendment;

13.1.4 ensure that an adequate management (audit) trail exists through the computerised system and that such computer audit reviews as he/she may consider necessary are being carried out.

13.2 The Group Finance Director shall satisfy him/herself that new financial systems and amendments to current financial systems are developed in a controlled manner and thoroughly tested prior to implementation. Where this is undertaken by another organisation, assurances of adequacy will be obtained from them prior to implementation.

14 ACCEPTANCE OF GIFTS BY STAFF

14.1 The Company Secretary shall ensure that all staff are made aware of the Company policy on acceptance of gifts and other benefits in kind by staff.

15 RETENTION OF DOCUMENTS

- 15.1 The Board of Directors shall be responsible for maintaining archives for all documents required to be retained by the Company under legislative requirements.
- 15.2 The documents held in archives shall be capable of retrieval by authorised persons.
- 15.3 All the above shall be in compliance with the requirements of the Freedom of Information Act and the Company policy for document management and retention.

16 RISK MANAGEMENT AND INSURANCE

- 16.1 The Board of Directors shall ensure that the Company has a programme of risk management. This programme will be approved and monitored by the Board of Directors.
- 16.2 The programme of risk management shall include:
 - 16.2.1 a process for identifying and quantifying principal risks and potential liabilities, existing controls, additional controls as identified in the corporate risk register;
 - 16.2.2 engendering among all levels of staff a positive attitude towards the control of risk;
 - 16.2.3 management processes to ensure all significant risks and potential liabilities are addressed including effective systems of internal control, cost effective insurance cover, and decisions on the acceptable level of retained risk;
 - 16.2.4 contingency plans to offset the impact of adverse events;
 - 16.2.5 review arrangements including; external audit, internal audit, clinical audit, health and safety review;
 - 16.2.6 monitor progress against the standards for better health;
 - 16.2.7 receive and review annual plan at Board of Directors.
- 16.3 The Board of Directors shall review the insurance arrangements for the Company on an annual basis.

Board Committee report to the Board of Directors

Committee Name:	Governance & Compliance Committee
Committee Chair:	XXXXXXX
Date of last meeting:	14th August 2025
Date of Board meeting for which this report is prepared	August 2025

Summary of key issues:

The meeting was well-supported, with strong representation from all teams. Discussions were open and inclusive, with participants sharing diverse perspectives and engaging in highly proactive, solution-focused dialogue. Outline of key areas with a note as below:

Service Updates by exception

Domestic Services

- **Review Status:** The domestic services review is now in its concluding phase, with an organisational change to be implemented.

Medical Engineering

- The newly transferred service is in the bedding-in stage and performing well.

Ripon Hospital XXXXXX Catering Service

- The service trial is in progress.

Postal Services

- Works are underway to align with the revised second-class postal collection schedule (reduced to three times per week).
- Options under review include enhanced second-class services, increased use of electronic patient communications, and targeted first-class usage.
- Adoption of digital communication is expected to deliver significant benefits.

Recruitment

- New appointments:
 - Capital Project Manager
 - Estates Team Leader
 - Electrical Estates Officer
- These roles fulfil the organisation's appointed person responsibilities.

Estates

- **Hand-Arm Vibration:** Permit process and review underway; asset register and risk assessment established; training delivered.
- **Permit Tracker:** Implemented for hot works, working at height, and electrical permits to enhance tracking and governance.

SSD

- **JAG Audit (July 2025):** Passed with exception relating to Endoscopy washers.
- **Action:** Business case being prepared for capital replacement (Trust-funded only). Plans to be in place by February 2026.

CQC Visit (Maternity)

- Identified requirement for curtain cleaning (clinical responsibility).
- Grey areas under review to ensure clarity of responsibilities.

FM Catering

- Work underway in alignment with [REDACTED] (nutrition and guarding).
- Catering Manager reviewing children's menus.
- Digital meal system tender in progress.
- Monthly Food Quality & Compliance meetings established.
- Air conditioning issues in the main kitchen remain under review.

Portering

- Productivity at 80%, with positive feedback from staff and patients.
- New uniforms implemented.
- Monthly performance meetings in place.

Security

- Licensing application in progress; confirmation meeting scheduled for September.
- Training delivered: CCTV, First Aid, and Door Handling ([REDACTED] [REDACTED]).

Capital Projects

Project	Status	Key Notes
[REDACTED]	2 weeks ahead of programme	–
Euro Physio Units	On site, Briary wing car park	Completion due Oct 2025
[REDACTED]	Due completion Mar	Tight timeline; design completion Sep 2025

	2026	
xxxxxx xxxxxx	Windows & design works	–
RAAC	xxxxxx design progressing	–
Littondale Ward	Started July 2025, due Dec 1	Risks: still at RIBA Stage 2; RIBA 4 due Sep 2025; additional works included
Fire Safety	Full site review by xxxxxx xxxxxx	New Gent fire system, fire doors (initial focus: Ground Floor & Littondale)

Risk Management

- **Corporate Risk Meetings:** Monthly, effective internally and with the Trust.
- **Key Risks:**
 - **Washers:** Actioned accordingly.
 - **Cash Flow:** Supplier payment delays, notably in waste services; escalation required.
 - **Fit Mask Programme:** Procedures being rolled out.
 - **Fire System:** Risks aligned with ongoing works.
 - **Security:** Concerns over staff being required to act in a security capacity and exposure to assaults (risk rating 12).
- **Resolved Risk:** Insurance gap closed (26 Wetherby Road, 13 Aug 2025).

OHFC Contract / Service Specification / KPIs

- **Contract Variations:** 17 submitted; 9 approved (xxxxxx); remainder (xxxxxx) in progress.
- **Specification:** Review of all KPIs and SLAs commencing late September 2025.
- **KPIs:**
 - IBR flagged amber due to CAFM reporting issue.
 - Pest control missed one attendance; contractor under monitoring.
 - Waste pre-exception audit delayed due to illness (now complete).
 - SSD: 273 items reprocessed, 3 failed (post-wash failure).

Health, Safety & Security

- **Permits & Vibration:** All processes in place.

- **Security:** Business case submitted; awaiting funding.
- **After Action Reviews:**
 - DSU refurbishment delays due to active air works; mitigation plans implemented, including SOPs and enhanced communication protocols.
 - Roof slip incident: Lone working procedure in draft; lone worker devices under trial.

Policy Register

- Cleaning Policy
- Electrical Safety Policy
- Combined Food Hygiene/Food Handling Policy
- Probationary Period Policy & Procedure
- All in draft, with no anticipated challenges; expected implementation Sept 2025.

Complaints & Compliments

- Themes identified; clear definitions for "complaints" vs. "concerns" implemented.
- Positive service feedback recorded.
- "Making a Difference" awards being utilised.
- Additional patient feedback channels (QR codes) in development.

National Cleaning Standards (NCS) Update

- Increased spot check frequency (+90%).
- Digitalisation of spot checks.
- New cleaning schedules introduced.
- Enhanced clinical engagement in audits.
- Patient feedback (QR code system).
- Compliance improvements in public area floor cleaning.
- Cleaning responsibilities framework signed off by IPC.
- Domestic restructure pending approval.
- Board papers submitted to [REDACTED] & [REDACTED].

PAM Update

- Submitted to HIF & Trust; approved.

- Updated ratings show a 6% improvement (143 points); all actions completed for the year.

Business Continuity

- Annual desktop exercise (Jan 2025) identified winter-period gaps; additional measures implemented.
- Bronze-to-Gold command structure introduced.
- Ongoing difficulty arranging Trust meetings; escalation agreed to [REDACTED] & [REDACTED].

Are there any significant risks for noting by Board? (list if appropriate)

No

Any matters of escalation to Board for decision or noting (list if appropriate)

Cash issues – some suppliers not being paid on time – waste being a key area and does need to be raised to ensure service delivery as impacts are being seen.

PLACE engagement we would like to flag as per the report – actions being undertaken but we may come back to request support for engagement with the Trust personnel

Harrogate Integrated Facilities (HIF)

Corporate Framework 2025-2026

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What is a corporate framework?

The Harrogate Integrated Facilities (HIF) Corporate Framework describes how the governance arrangements for the organisation controls and directs the company's business. It describes the Board and its supporting structures, to identify and manage risk and ensure the successful delivery of our Strategy and Business Plan including our ambitions. The framework is designed to support the delivery of our mission: *To be an outstanding provider of services – for the benefit of all of our customers, communities, staff and partners.*

We are committed to operating by the principles of good governance. This Framework sets out to describe the system of governance used with the organisation.

Our Mission

Our mission is to be an outstanding provider of services
– for the benefit of all our customers, communities,
staff and partners

Strategic Themes



Delivering safe, efficient, compliant, responsive and outstanding quality services



Being well led and financially sustainable



Embedding business modernisation and service development throughout the company



Growing our future business development opportunities



Being an employer of choice, developing our staff, being an outstanding place to work and delivering our services with pride



Delivering our services sustainably, minimising our impact on the environment

Culture

Best Value

Quality

Compliance

Delivering our Customers Requirements

(to HDFT and our other customers)



Medical
Equipment
Library



Estates



Facilities



Business
Development



Corporate



SSD

Our Workforce

Elements of Governance

Corporate Governance

This term is used to mean the systems and process which the organisation is directed by at its most senior levels, to achieve our purpose and our ambitions. We use corporate governance to meet the necessary stands of accountability, probity and openness.

The Articles of Association sets the workings of HIF, supported by the Corporate Governance Framework.

Financial Governance

Financial governance is the responsibility of the Board supported by the Innovation, Resource and Commercial Committee and Quality and Governance Committee. These committees cover governance, risk management and internal control, internal audit; external audit, other assurance functions, counter fraud, financial reporting and raising concerns.

HIF also has representation at the HDFT Audit committee where regular updates on audit and financial issues are discussed.

The HIF Standing Financial Instructions provide the regulatory framework for the financial conduct of the organisation. This includes guidance on delegation limits and procurement rules.

Quality Governance

This is a responsibility of the Board for continuously improving the quality of the services and safeguarding high standards of care and experience. Quality governance is the mechanism for understanding and learning, to promote the components that facilitate the delivery of quality care: candour, learning, questioning, a just culture, and excellence in leadership.

The Board of Directors is responsible for ensuring that a continuous quality improvement approach is adopted and embedded throughout the organisation. This should be evidenced at all levels across the organisation. This approach should be evident at Board and all Sub-Committees and at Senior Management Led Committees. HIF and HDFT are embarking on an ambitious programme with Impact to implement a continuous improvement model across the organisation. As this progresses the corporate framework will be updated.

Risk Management Policy & Board Assurance Framework

The Risk Management Policy and Board Assurance Framework enable management of risk at all levels in the organisation in order to assure delivery of the Company Strategy and Business Plan. The key objectives of the risk framework are to:

- Ensure that the Board Assurance Framework is a dynamic Board assurance tool, underpinned by the Corporate and Management Risk Registers
- Clearly evidence the control and management of risk to achieve the organisation's strategic themes
- Provide assurance that HIF has an appropriate Assurance Framework in place
- Ensure that principal risks to meeting corporate ambitions are identified and mitigated to an acceptable level. The Board will be responsible for the Board Assurance framework, but the Quality and Governance Committee will undertake scrutiny and review of the process, to provide assurance to the Board
- The Board Assurance Framework is reported to the Board bi-monthly with a detailed review undertaken in advance by the assurance committees.

The Role of the Board

Comprises of a Chair, Managing Director, Non-Executive Directors and Stakeholder Non-Executive Directors supported by the Company Secretary. The Board will work actively to promote and demonstrate

the values and behaviours which underpin integrated governance. It will ensure a balanced focus on all aspects of its business.

Further to this:

- The Corporate Governance Framework ensures the Board and its committees are structured effectively and properly constituted
- The Board will ensure it promotes a culture where patients and service users are at the centre; staff learn from experience; and the Trust engages with patients, service users, the public and partners to develop services in the future
- Board business cycles will be clearly set out with actions implemented
- The Board will ensure codes of conduct are upheld and the public service values of accountability, probity and openness in the conduct of business are maintained
- Board members will receive appropriate induction and ongoing training and development to ensure they can undertake their responsibilities effectively and appropriately
- The Board will be responsible for setting the organisation's strategy and reviewing its progress.

Managing Director supported by a Senior Leadership Team

- Manage and oversee the operations of the organisation including quality, finance and risk management
- As a Board member sets the culture and leadership of the organisation
- The Managing Director acts as Accountable Officer
- The Senior Management Team has particular responsibility for a specific function, but are all collectively accountable for exercising the powers of the organisation for its performance
- The Managing Director is a voting members of the Board
- Ensure the organisation's business plan and strategy is delivered operationally.

Non-Executive Directors including Stakeholder Non-Executive Directors

- Hold the Managing Director and Senior Management Team to account on the performance of the organisation
- Question and challenge the Managing Director and Senior Management Team about the delivery of the Business Plan & Strategy for the Company
- Scrutinise performance to satisfy themselves as to the integrity of quality, operational and financial information
- Scrutinise performance to satisfy themselves that quality and financial controls are risk management systems are robust and defensible
- Voting members of the Board
- Help shape the strategy and culture of the organisation and provide best practice external insight
- Review the organisation's strategic progress to ensure its strategy goals will be met.

Governance Framework

How we manage our business

This section of the document provides details of the tools, resources and structures HIF use to manage our business

Level 1: HIF Board		
Committee	Membership	Principal Reporting Documents
HIF Board	The Chair, Non-Executive Directors, Stakeholder Non-Executive Directors and the Managing Director	HIF Strategy & Business Plan Programme of Annual Reports Agreement of Company Accounts Timeline Performance Reports Sub-Committee Reports Governance and Legal Reports Board Assurance Framework (BAF)
Sub-Committees of the Board	Non-Executive Directors (as allocated by Committee) Senior Leaders	Presentation of key performance and compliance information Scrutiny and assurance regarding risks and adequacy of actions Escalation actions from operational meetings

↕

Level 2: Operational Management		
Corporate Operational Groups	Executives Managing Director & Corporate senior leaders	Presentation of key performance and compliance information Scrutiny and assurance regarding risks and adequacy of actions Escalation actions from within the framework structure Integrated Board Report (IBR) review
Service Operational Groups	Service leaders Service teams	Service performance dashboards Service specific guidelines Risk registers Financial Management Quality Assurance

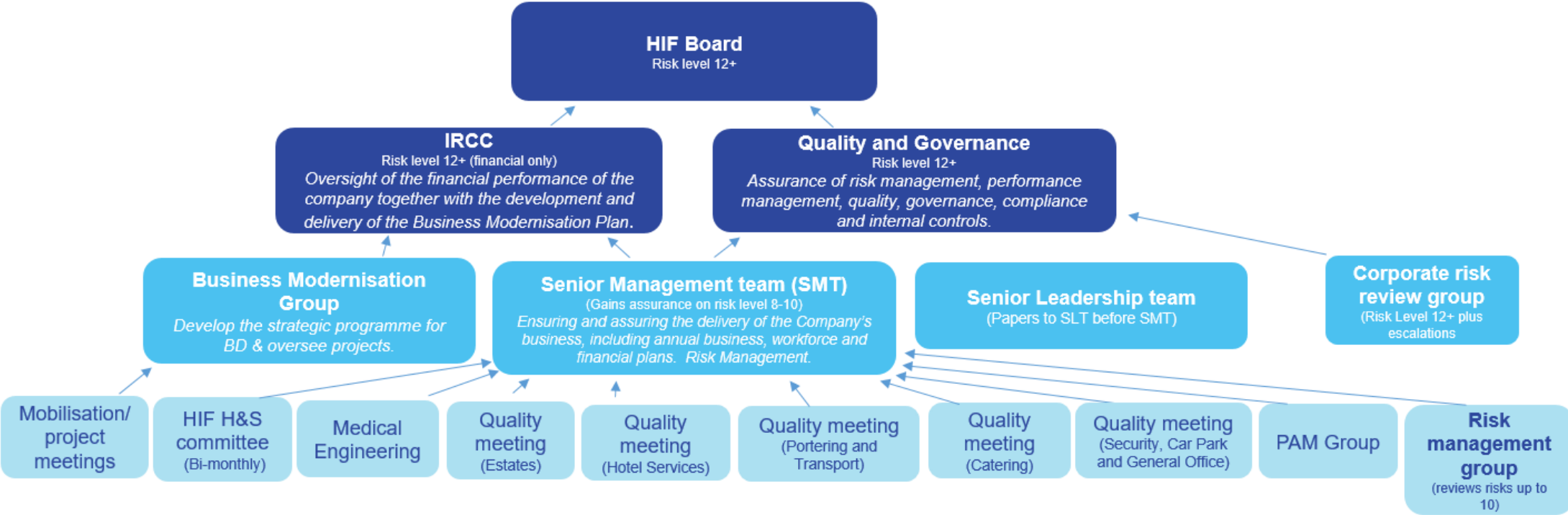
↕

Level 3: Review of Management		
Service Performance Reviews	Lead by Managing Director and Senior Management	Detailed performance dashboard for all HIF service areas, including quality, operational, financial and workforce metrics Risk Registers Other issues by exception

↕

Level 4: Team and Individuals		
Service Area Reviews	Speciality leads and Service Leads	Service trigger tools and dashboards
Individual Performance Management Arrangements	Line Managers	Agree objectives Appraisals and 121 meetings

HIF Corporate Framework



HIF Board Workplan

Element	Item	Frequency	Lead	2025						2026					
				February	April	June	August	October	December	February	April	June	August	October	December
Opening Items	Welcome by the Chair	All	Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Apologies for absence	All	Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Declarations / Conflicts of Interest	All	Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Minutes of previous meeting	All	Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Matters Arising / Action Log	All	Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Chair's report	All	Chair	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Managing Director's Report	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Corporate Risk Register	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
Delivering Safe, Efficient, Compliant, Responsive and outstanding Quality Service	Board Assurance Framework – Safe, Efficient, Compliant, Responsive and Outstanding Services	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Health & Safety Report	Bi-Meeting	Managing Director			✓		✓		✓		✓		✓	
	PLACE	Annually	Managing Director	✓							✓				
	Capital Development	Bi-Meeting	Managing Director				✓		✓		✓		✓		
	Premises Assurance Model (PAM)	Annual	Managing Director	✓		✓						✓			
Being Well Led and Financial Sustainable	Board Assurance Framework – Being Well Led and Financial Sustainable	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Quality and Governance Committee Chair's Report	All	Chair of Ctte	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Corporate Framework Review	Annually	Company Secretary				✓					✓			
	Financial Report	All	Deputy Director of Finance	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Annual Accounts (including Going Concern; Letter of Representation; Accounts; ISA260, Audit Opinion)	Annually	Managing Director			✓						✓			
	Loan Agreement	Ad hoc	Deputy Director of Finance												
	Review of Standing Financial Instructions / Standing Orders	Annually	Deputy Director of Finance				✓						✓		
Contracts Review	Ad hoc	Deputy Director of Finance													
Embedding Business Modernisation and Service Development	Board Assurance Framework – Embedding Business Modernisation and Service Development	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓

NOTE:

✓	For Reference in Supplementary Pack
✓	For formal Approval

Element	Item	Frequency	Lead	2025						2026					
				February	April	June	August	October	December	February	April	June	August	October	December
Growing our Future Business Development Opportunities	Board Assurance Framework – Growing our Future Business Development Opportunities	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Business Development Report (Private meeting)	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Authorisation for Business Development	As required	Managing director												
Being an employer of choice, developing out staff, being an outstanding place to work and delivering services with pride	Board Assurance Framework – Great Place to Work	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Workforce and OD Report	All	Deputy Director of People & Culture	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Terms and Conditions Review	Annually	Deputy Director of People & Culture			✓					✓				
	Gender Pay Gap Report	Annually	Deputy Director of People & Culture		✓					✓					
	Ethnicity Pay Gap Report	Annually	Deputy Director of People & Culture		✓					✓					
	Staff Survey	Annually	Deputy Director of People & Culture		✓ (in March workshop)						✓				
	Apprenticeship Levy	Annually	Deputy Director of People & Culture					✓						✓	
	Pay Award	Annually	Deputy Director of People & Culture		✓						✓				
	Annual Pensions Governance Report	Annually	Deputy Director of People & Culture					✓						✓	
	Freedom to Speak Up Guardian Report	Annually	FTSU Guardian							✓					✓
Delivering our services sustainably, minimising our impact on the environment	Board Assurance Framework – Delivering our services sustainably	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Green Plan – Annual Review	Annually	Managing Director		✓	✓					✓				
Governance	Annual Plan	Annually	Managing Director		✓						✓				
	Integrated Board Report	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Internal Audit Planning	Annually	Managing Director		✓						✓				
	Contract Review Meetings	Annually	Managing Director					✓						✓	
	Quality and Governance – Terms of Reference Ratification	Annually	Managing Director		✓						✓				
	Quality and Governance – Sub-committee update	All	Managing Director	✓	✓	✓	✓	✓		Annual report	✓	✓	✓	✓	✓

NOTE:

✓	For Reference in Supplementary Pack
✓	For formal Approval

Element	Item	Frequency	Lead	2025						2026					
				February	April	June	August	October	December	February	April	June	August	October	December
	IRCC - Terms of Reference Ratification	Annually	Managing Director		✓						✓				
	IRCC – sub-committee update	All	Managing Director	✓	✓	✓	✓	✓	✓ Annual report	✓	✓	✓	✓	✓	✓
	Board Meeting / Workshop <u>Workplan</u>	All	Managing Director	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Board Effectiveness Survey	Annually	Company Secretary						✓						✓
	Annual Review of Publication Scheme	Annually	Managing Director					✓				✓			
	Annual Review of the Business Plan	Annually	Managing Director	✓							✓				
	Fit and Proper Person	Annually	Company Secretary			✓						✓			
	Articles of Association	Annually	Company Secretary					✓						✓	
	Board Appointed Non-Executive Directors	Annually	Company Secretary					✓						✓	
	Code of Conduct and Nolan Principles	Annually	Company Secretary			✓						✓			

NOTE:

✓	For Reference in Supplementary Pack
✓	For formal Approval

HIF Board Workshop Workplan

The HIF Board workshop topics will align to the Business Assurance Framework (BAF.)

Year	Month	Workshop Theme
2025	January	Governance training and Working as a Group presentation
	March	Staff survey and kindness
	May	Green Plan
	July	BAF and Corporate Framework
	September	Risk & strategic review of objectives
	November	Estates and Facilities marketplace and GEMBA focussing on Business plan

HIF Board Timetable 2025

Month	Date	Meeting
January 2025	16 January	Quality and Governance Committee 9 – 11 am
	28 January	HIF Board workshop 9 – 11:30am HIF Board in Private – 11:30 – 12pm
February 2025	13 February	Quality and Governance Committee 9 – 11am Innovation, Resource and Commercial Committee (in private) 2 – 4pm
	25 February	HIF Board meeting – 9am – 11am HIF Board in Private – 11 – 12pm
March 2025	6 March	People and Culture Committee – 2 – 4pm
	25 March	HIF Board workshop 9 – 11:30am
April 2025	17 April	Quality and Governance Committee 9 – 11am Innovation, Resource and Commercial Committee (in private) 2 – 4pm
	29 April	HIF Board meeting – 9am – 11am HIF Board in Private – 11 – 12pm
	30 April	HDFT/HIF Board to Board
May 2025	27 May	HIF Board workshop 9 – 11:30am
June 2025	12 June	Quality and Governance Committee 9 – 11am Innovation, Resource and Commercial Committee (in private) 2 – 4pm
	24 June	HIF Board meeting – 9am – 11am HIF Board in Private – 11 – 12pm
July 2025	29 July	HIF Board in Private – 9 – 10am HIF Board workshop 10 – 11:30am
August 2025	14 August	Quality and Governance Committee 9 – 11am Innovation, Resource and Commercial Committee (in private) 2 – 4pm
	26 August	HIF Board meeting – 9am – 11am HIF Board in Private – 11 – 12pm
	30 September	HIF Board workshop 9 – 11:30am
October 2025	16 October	Quality and Governance Committee 9 – 11am Innovation, Resource and Commercial Committee (in private) 2 – 4pm
	28 October	HIF Board meeting – 9am – 11am HIF Board in Private – 11 – 12pm
November 2025	25 November	HIF Board workshop 9 – 11:30am
December 2025	16 December	HIF Board meeting – 9am – 11am HIF Board in Private – 11 – 12pm
	18 December	Quality and Governance Committee 9 – 11am Innovation, Resource and Commercial Committee (in private) 2 – 4pm

HIF Sub-Committees

Quality and Governance Subcommittee

Members

- Non-executive Director
- Non-executive Director
- Managing Director

Attendees

- Associate Director of Estates and Capital Delivery (Nominated Deputy)
 - Deputy Director of Estates and Facilities
- Head of Operational Estates (Quality, Contracts and SSD)
 - Head of Facilities
- Quality and Governance Lead (Estates and Facilities)
 - Company Secretary
- Assistant Company Secretary and Governance Lead

Responsibilities

- Ensure that the Business Plan meets regulatory requirements and performance against achievement of the plan is monitored.
- Review the Company's Strategy and Annual workplan and monitor progress against priorities/plans prior to Board review.
- Monitor compliance against Health Technical Memorandums (HTMs)/Premises Assurance Model (PAM), Patient-Led Assessments of the Care Environment (PLACE) Standards, Estates Return Information Collection (ERIC), Hazard Analysis & Critical Control Points (HACCP), Companies House, Companies Act 2006, and other relevant regulatory and legal requirements.
- Ensure there is a process in place to collect conflicts of interests and gifts and hospitality for all decision making staff, with an annual review of the register.
- Review of the Company's Integrated Board Report (IBR)
- Ensure there is a Code of Conduct in place for decision making staff.
- Monitor performance against HDFT Service Level Agreements (SLAs).
- Monitor HIF's high level Risk Register of risks scoring 12 and above.
- Identify any further risks which should be added to the risk register.
- Review the Sustainability/Carbon Reduction/Environment Plans and monitor progress against approved priorities/plans.
- Ensure arrangements are in place for staff and contractors to raise (in confidence) concerns about possible improprieties in financial, clinical or safety matters and ensure that any such concerns are investigated proportionately and independently.
- Undertake any relevant matter as requested by the Board of Directors.

Innovation, Resource and Commercial Subcommittee

Members

- Non-executive Director
- Non-executive Director
- Managing Director

Attendees

- Deputy Director of Estates and Facilities (Nominated Deputy)
- Associate Director of Business Modernisation and Service Improvement
 - Associate Director of Estates and Capital Delivery
- Head of Operational Estates (Corporate, Waste and Sustainability)
 - Finance Manager
- Head of Operational Estates (Quality, Contracts and SSD)
 - Company Secretary
- Assistant Company Secretary and Governance Lead

Responsibilities

- Support the Board by scrutinising HIF's monthly financial position including operational activity levels (excluding performance against operational standards) and the workforce plan;
- Scrutinise financial performance against the annual Cost Improvement Programme and the impact on the Company;
- Scrutinise the Contract as agreed with the Trust prior to approval by the Board;
- Scrutinise and endorse assumptions in significant business cases prior to consideration by the Board
- Scrutinise significant business cases one year after implementation, carrying out post-evaluation and providing relevant assurance to the Board on the outcome.
- Scrutinise the development of the company's financial and commercial strategy, both revenue and capital;
- Ensure that the annual financial plan is consistent with the financial strategy;
- Make recommendations to the Board of Directors on the Company's financial plan.
- Assess the impact of financial performance on the Use of Resources Risk Rating;
- Oversee how initiatives highlighted by use of the Model Hospital benchmarking are being implemented within the Company
- Scrutinise proposals for significant projects prior to formulation of business cases and business plans;
- Seek assurance on the Company's audit processes and systems including overseeing financial reporting, risk management, internal controls, and audit processes.
- Monitor progress against major findings and limited assurance internal audit reports.
- Review the Annual Report and financial statements before submission to the Board.
- Ensure adequate arrangements are in place to mitigate against counter fraud, bribery and corruption.
- Undertake any relevant matter as requested by the Board of Directors.

Terms of Reference: Quality and Governance Committee

Document Details:	Terms of Reference for the Terms of Reference: Quality and Governance
Version:	5.2
Approved By:	Quality and Governance
Date Approved:	June 2025
Ratified By:	HIF Board
Date Ratified:	Previous version – May 2025
Job Title – Author:	Assistant Company Secretary and Governance Lead
Job Title – Responsible Director:	Chair of the Quality and Governance (Non-executive Director)
Date Issued:	June 2025
Review Date:	June 2026
Frequency of Review:	At least annual
Amendment Summary:	
<ul style="list-style-type: none"> • Amended the purpose of the meeting to incorporate the additional areas of oversight in relation to workforce survey responses and WRES/WDES • Amended responsibilities to include those being moved to Quality and Governance from the People and Culture committee • Removal of oversight of the business Plan from responsibilities (covered by IRCC) • Removal of review of annual report and financial statements from responsibilities (covered by IRCC) • Removal of review of the IBR from responsibilities (the IBR document will be used as a reference document for certain agenda items e.g. risks) • Updated list of those attending in an advisory capacity • Membership – removed requirement of second Non-Executive Director, added HRBP, removed Associate Director of Estates and Capital Delivery • Updated Deputies 	

1. Name of the Committee

HIF Quality and Governance Committee

2. Accountability

The HIF Quality and Governance Committee is a committee of the Harrogate Healthcare Facilities Management Limited's Board of Directors. As such it will, on behalf of the Board, work to support the achievement of HIFs strategy and objectives. Harrogate Healthcare Management Limited (t/a Harrogate Integrated Facilities (HIF) is a wholly owned subsidiary of Harrogate & District NHS Foundation Trust (HDFT).

3. Role of the Committee

3.1. Purpose of the Committee

The purpose of the Committee is to gain assurance, on behalf of the Board of Directors, that Harrogate Integrated Facilities (HIF) has an effective system of integrated governance throughout the company's activities to support the achievement of HIFs strategy and objectives. Governance will work across areas including, but not limited to, risk management, performance management, quality governance, compliance and internal controls.

3.2. Guiding Principles

In carrying out their duties, members of the committee and any attendees must ensure that they act in accordance with the values of the company which are:

- Kindness
- Integrity
- Teamwork
- Equality

3.3. Responsibilities of the Committee

The key responsibilities of the group are to:

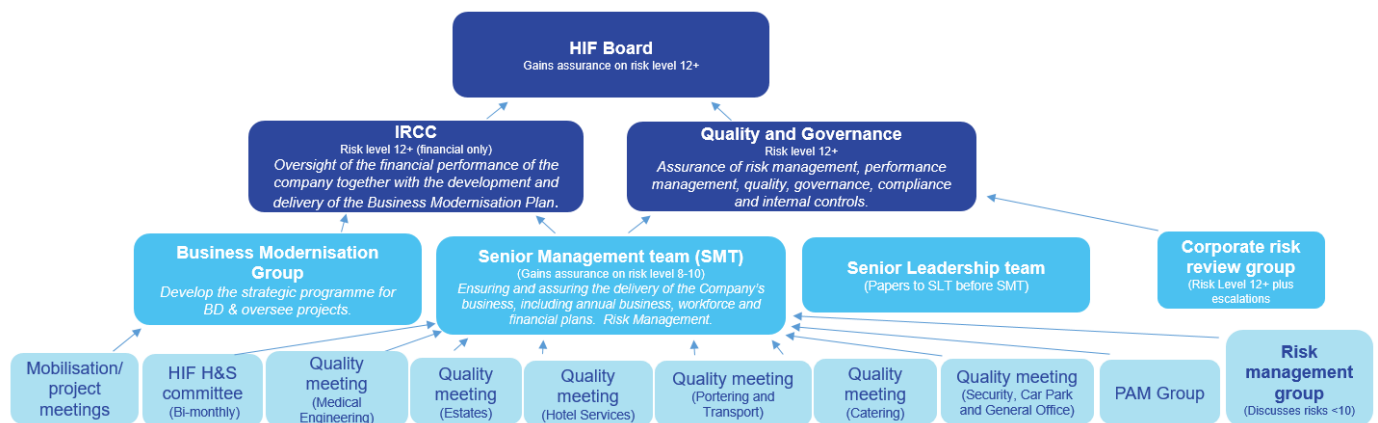
- Review the Company's Strategy and Annual workplan and monitor progress against priorities/plans prior to Board review.
- Monitor compliance against Health Technical Memorandums (HTMs)/Premises Assurance Model (PAM), Patient-Led Assessments of the Care Environment (PLACE) Standards, Estates Return Information Collection (ERIC), Hazard Analysis & Critical Control Points (HACCP), Companies House, Companies Act 2006, and other relevant regulatory and legal requirements.
- Monitor compliance against ISO 14395 for decontamination services
- Ensure there is a process in place to collect conflicts of interests and gifts and hospitality for all decision making staff, with an annual review of the register.
- Ensure there is a Code of Conduct in place for decision making staff.
- Monitor performance against HDFT Service Level Agreements (SLAs).
- Monitor HIF's high level Risk Register of risks scoring 12 and above and identify any further risks which should be added to the risk register.

- Review the Sustainability/Carbon Reduction/Environment Plans and monitor progress against approved priorities/plans.
- Ensure arrangements are in place for staff and contractors to raise (in confidence) concerns about possible improprieties in financial, clinical or safety matters and ensure that any such concerns are investigated proportionately and independently.
- Ensure adequate arrangements are in place to mitigate against counter fraud, bribery and corruption.

The Committee 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 member of staff and all members of staff are directed to co-operate with any request may by the Committee.

The Committee shall have the power to establish task and finish groups for the purpose of addressing specific tasks or areas of responsibility.

4. Relationships with other groups and committees



5. Composition of the Committee

5.1. Members: Full Rights

Title	Role in the group / committee
Non-executive Director	Committee Chair
Managing Director	Executive lead for the Committee. Assurance and escalation provider to the Quality and Governance Committee

Membership of the Committee shall be agreed by HIF Board, who will appoint the Chair of the Committee. Membership will consist of one Non-executive Director and one Executive Director. The Chair of the Committee should ensure the membership promotes equality, diversity and inclusion.

Any Executive and Non-executive Director can attend a Board sub-committee meeting because of the position that they hold.

The Committee 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 member of staff and all members of staff are directed to co-operate with any request made by the Committee.

There may be occasions where the Executive and Non-executive Director posts have been filled on an interim basis. Where this arrangement is in place, the interim post holder will be considered a member of this group for the period they hold the interim position.

Where an Executive Director is unable to attend, they may delegate to a Deputy Director; in such cases it should be made clear at the meeting who is undertaking the deputising role.

Where a Non-executive Director is unable to attend, they may delegate to another Non-executive Director; in such cases it should be made clear at the meeting who is undertaking the deputising role.

The Chair is invited / reserves the right to attend any meeting. However, the Chair of the Board shall not be a member of the Committee.

5.2. In attendance: in an advisory capacity

Job Title
Deputy Director of Estates & Facilities
Associate Director of Business Development and Service Improvement
Assistant Company Secretary and Governance Lead
Head of Facilities
Head of Operational Estates (Contracts, Quality and SSD)
HR Business Partner

In addition to anyone listed above as a member or attendee, at the discretion of the Chair of the Committee, the Committee may also request individuals to attend on an ad hoc basis to provide advice and support for specific items from its work plan when these are discussed at the meetings.

6. Quoracy

Number: The minimum number of members for a meeting to be quorate is three, comprising at least one Non-executive Director and one Executive Director. If the Chair of the Committee is unable to attend the meeting, and if otherwise quorate, the meeting will be chaired by the other Non-executive Director.

Deputies: Where appropriate, members may nominate deputies to represent them at a meeting. Deputies do not count towards the calculation of whether the meeting is quorate except if the deputy is representing the member under formal “acting up” arrangements. In this case the deputy will be deemed a full member of the Committee. It may also be appropriate for attendees to nominate a deputy to attend in their absence.

A Schedule of deputies (in Appendix 1) should be reviewed at least annually to ensure adequate cover exists.

Non-quorate meeting: Non-quorate meetings may go ahead unless the Chair decides not to proceed. Any decisions made by the non-quorate meeting must be reviewed at the next quorate meeting and documented in the minutes.

7. Meetings of the Committee

Frequency: Meetings will be held at least quarterly. There will be separate meetings if required by the Board of Directors. In addition, the Committee Chair in consultation with the Lead Executive Director may request a meeting in order for the Committee to discharge all of its responsibilities.

Urgent Meetings: Any member of the Committee may request an urgent meeting. The Chair of the Committee will normally agree to call an urgent meeting to discuss the specific matter, unless the opportunity exists to discuss the matter in a more expedient manner.

Attendance: Members are expected to attend all meetings. Members may attend meetings in person, by telephone or by other electronic means. Those in attendance by electronic means shall count towards the quorum.

Administrative Support: The Committee Secretariat will be provided by the HIF administration team, including to arrange meetings, prepare agendas, circulate papers and draft minutes, including a register of attendance to be agreed with the Chair of the meeting prior to circulation as described below. Papers will be made available a minimum of five days prior to scheduled meetings. An action log will be maintained, and a log of items reviewed throughout each 12 month period.

Minutes: Draft minutes will be approved by the Chair of the meeting and then shared with the members of the Committee. The draft minutes will be reviewed and the final record agreed at

the next quorate meeting. Approved minutes of each meeting will then be provided to the Board of Directors for noting.

Chair Reports: The Chair of the Committee will provide an update of key issues arising from the meeting, including decisions taken, to the next Board of Directors meeting.

Voting: It is at the discretion of the Chair of the meeting to call a vote during a meeting. When voting, decisions at meetings shall be determined by a majority of the votes of the Executive and Non-executive Directors present and voting. In the case of any equality of votes, the person presiding shall have a second or casting vote.

8. Authority

Establishment: The Committee is a sub-committee of the Board and Directors and has been formally established by the Board.

Powers: The Committee has no powers, other than those specifically delegated in these Terms of Reference.

Cessation: The Committee is a standing Board sub-committee in that its responsibilities and purpose are not time limited. However, the Committee has a responsibility to review its effectiveness annually.

9. Duties of the Committee Chair

The Chair of the Committee shall be responsible for:

- Agreeing the agenda in partnership with the Managing Director and the Assistant Company Secretary and Governance Lead;
- Directing the meeting, ensuring it operates in accordance with the company's values whilst ensuring all attendees have an opportunity to contribute to the discussion;
- Ensuring the agenda is balanced and discussion is productive;
- Establish if there are any conflicts of interest and manage any such declarations appropriately;
- Giving direction to the secretariat and checking the draft minutes;
- Ensuring sufficient information is presented to the Board of Directors in respect of the work of the Committee; and
- Attending the Board to Board meetings with the Trust.

10. Review of Committee Effectiveness, Terms of Reference and Annual Report

It will be the responsibility of the Chair of the Committee to ensure that it carries out an assessment of committee effectiveness annually, and ensure the outcome is reported to the Board of Directors along with any remedial action to address any weaknesses identified. The Chair of the Committee will also be responsible for ensuring that the actions to address any areas of weakness are completed.

The Terms of Reference shall be reviewed by the Committee at least annually and be presented to the Board of Directors for ratification.

The HIF Quality and Governance Committee will present an annual report to the Board of Directors outlining its work against its duties set out in the Terms of Reference. The HIF Quality and Governance Committee will make recommendations to the Board of Directors on any area within its remit where action or improvement is required.

Appendix 1: Schedule of Deputies

It may not be necessary or appropriate for all members (or attendees) to have a deputy attend in their absence. If this is the case, please state below “no deputy required”.

Full member (by job title)	Deputy (by job title)
Non-executive Director / Chair	Non-executive Director
Managing Director	Associate Director of Business Development and Service Improvement

Attendee (by job title)	Deputy (by job title)
Deputy Director of Estates & Facilities	No deputy required
Associate Director of Business Development and Service Improvement	Associate Director of Estates and Capital Delivery
Associate Director of Estates and Capital Delivery	Head of Operational Estates (Contracts, Quality and SSD)
Assistant Company Secretary and Governance Lead	Quality Manager
Head of Facilities	No deputy required

HIF Quality and Governance Committee Workplan

HIF – Quality and Governance Committee Workplan 2025 – agreed 12/06/2025									
Chair xxxxxx									
2025 Meeting dates	Papers to be submitted a week in advance	Frequency	16 January	13 February	17 April	12 June	14 August	16 October	18 December
Standing / Opening / Closing items	Welcome & Apologies for Absence	monthly	✓	✓	✓	✓	✓	✓	✓
	Declaration / Conflicts of Interests	monthly	✓	✓	✓	✓	✓	✓	✓
	Minutes of Previous Meeting	monthly	✓	✓	✓	✓	✓	✓	✓
	Matters Arising & Action Log	monthly	✓	✓	✓	✓	✓	✓	✓
	Chair's Report	monthly	✓	✓	✓	✓	✓	✓	✓
	Risk and Corporate Risk Register Review	monthly	✓	✓	✓	✓	✓	✓	✓
	Review of Workplan	monthly	✓	✓	✓	✓	✓	✓	✓
	AOB / Meeting Evaluation / Next Meeting	monthly	✓	✓	✓	✓	✓	✓	✓
Service Updates	Estates, Facilities, SSD, MedEng, Capital <i>by exception</i>	monthly	✓	✓	✓	✓	✓	✓	✓
Performance & Quality	Risks (in IBR)	monthly	✓	✓	✓	✓	✓	✓	✓
	OHFC Contract / Service Specification (review of performance against SLA)	monthly	✓	✓	✓	✓	✓	✓	✓
	Customer Services – report	annual						✓	
	Health, Safety & Security	monthly	✓	✓	✓	✓	✓	✓	✓
	After Action reviews and review of action plan	monthly	✓	✓	✓	✓	✓	✓	✓
Compliance & accreditations	PLACE – (DJS)	As required	✓	✓	✓				
	PAM Action Plan – (DM)	monthly	✓	✓	✓	✓	✓	✓	✓
	ERIC - (DM)	annual	✓						
	Policy Register – (LS)	Bi-annual			✓		✓		
	EHO – (DJS)	Ad hoc							
	HACCP –(DJS)	annual						✓	
	JAG Accreditation – (ES)	annual						✓	
	ISO13485 audit - SSD (ES)	annual				✓			
	Information Governance annual report (LS)	annual			✓				
	Companies House and Companies Act 2006 (ER)	annual	✓						
Green Plan	Bi-annual							✓	
Workforce – looking after our people	Staff Survey results (NHS staff survey and Inpusle)	As required							
	Staff Induction Annual Review	annual						✓	
	Workforce Race Equality Standards (WRES) and Workforce Disability Equality Standards (WDES)	annual							✓

HIF – Quality and Governance Committee Workplan 2025 – agreed 12/06/2025

Chair xxxxxx

2025 Meeting dates	Papers to be submitted a week in advance	Frequency	16 January	13 February	17 April	12 June	14 August	16 October	18 December
Governance & Regulatory	Business Continuity –(DM)	annual					✓		
	Insurance report	annual			✓				
	Review of conflicts of interests register and gifts and hospitality	annual					✓		
Corporate Governance	Review the Company's Strategy and Annual workplan	annual			✓				
	Annual Review: Terms of Reference	annual		✓					
	Annual Review: Committee Effectiveness	annual		✓					
	Committee Annual Report	annual		✓					
	Annual Review: Committee Workplan	annual		✓					

Terms of Reference: Innovation, Resource and Commercial Committee (IRCC)

Document Details:	Terms of Reference for the Private HIF Innovation, Resource and Commercial Committee (IRCC)
Version:	3
Approved By:	HIF Innovation, Resource and Commercial Committee (IRCC)
Date Approved:	12 June 2025
Ratified By:	HIF Board
Date Ratified:	Previous version – May 2025
Job Title – Author:	Assistant Company Secretary and Governance Lead
Job Title – Responsible Director:	Chair of the HIF Innovation, Resource and Commercial Committee (IRCC) (Non-executive Director)
Date Issued:	12 June 2025
Review Date:	June 2026
Frequency of Review:	At least annual
Amendment Summary:	
<ul style="list-style-type: none"> • Amended the purpose of the meeting to incorporate the additional areas of workforce and audits • Amended responsibilities to include those being moved to IRCC from the People and Culture committee • Added responsibility for oversight of the Business Plan (was in Q&G) • Added responsibility for review the Annual Report and financial statements before submission to the Board. • Removed ERIC and PAM from responsibilities (overseen by Quality and Governance committee) • Membership – removed requirement of second Non-Executive Director • Membership – remove Associate Directors and Deputy Director of Estates and Facilities off the list of full members (add to advisory) • Updated Deputies • Updated list of those attending in an advisory capacity 	

1. Name of the Committee

Innovation, Resource and Commercial Committee (IRCC) – meetings held in private

2. Accountability

The IRCC is a subcommittee of the HIF Board of Directors. As such, it will act on behalf of the HIF Board of Directors and contribute to setting strategy as this relates to its remit within of the Company.

3. Role of the Committee

3.1 Purpose of the Committee

The IRCC has oversight of the financial performance of the company together with the development and delivery of its Business Modernisation Plan. The IRCC will have oversight on any commercial opportunities the Company considers. The IRCC has oversight of workforce matters and internal audits insofar as they relate to the company's financial strategy, performance, and overall business operations.

3.2 Guiding Principles

In carrying out their duties, members of the Committee and any attendees must ensure that they act in accordance with the values of the Trust which are:

- Kindness
- Integrity
- Teamwork
- Equality

3.3 Responsibilities of the Committee

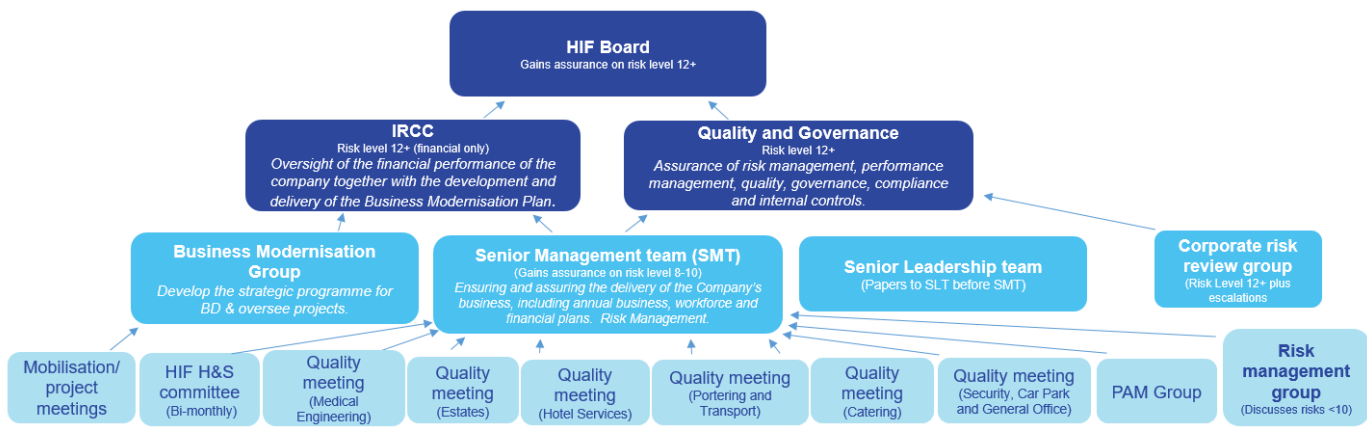
The key responsibilities of the Committee are considered under the specific target areas:

- set annual objectives and a plan of work to coordinate with the Board of Directors' Annual Cycle of Business
- Support the Board by scrutinising HIF's monthly financial position including operational activity levels (excluding performance against operational standards) and the workforce plan
- Review the Annual Report and financial statements before submission to the Board
- Scrutinise financial performance against the annual Cost Improvement Programme and the impact on the Company;
- Scrutinise the Contract as agreed with the Trust prior to approval by the Board;
- Scrutinise proposals for significant projects prior to formulation of business cases and business plans;
 - Scrutinise and endorse assumptions in significant business cases prior to consideration by the Board
 - Scrutinise significant business cases one year after implementation, carrying out post-evaluation and providing relevant assurance to the Board on the outcome.
 - Ensure that the Business Plan meets regulatory requirements and performance against achievement of the plan is monitored.
 - Scrutinise the development of the company's financial and commercial strategy, both revenue and capital;
 - Ensure that the annual financial plan is consistent with the financial strategy;
 - Make recommendations to the Board of Directors on the Company's financial plan.
 - Assess the impact of financial performance on the Use of Resources Risk Rating;
 - Monitor progress against major findings and limited assurance internal audit reports.

- Ensure HIF is making sufficient progress towards creating a highly engaged workforce in line with the NHS People Plan themes and the company’s guiding principles.
- ensure HIF is aware of HDFT’s People and Organisational Development Strategy when developing HIF’s forward plans;
- Ensure compliance with current statutory and regulatory requirements, including, but not limited to: Gender Pay Gap and Ethnicity Pay Gap.
- Monitor annual progress against the People Plan
- Receive reports regarding staff pay
- Undertake any relevant matter as requested by the Board of Directors.

NB: The Trust Audit Committee will maintain full oversight of the Annual Accounts process and Treasury Management policy, as well as areas such as Standing Financial Instructions (SFIs) which are part of the Company’s system of control.

4. Relationships with other Committees and Groups



5. Composition of the Committee

5.1 Members: Full Rights

Title	Role In the Group/Committee
Non-executive Director	Committee Chair
Managing Director	Executive lead with day-to-day responsibility for operational delivery of services. Assurance and escalation provider to the IRCC

Membership of the Committee shall be agreed by HIF Board, who will appoint the Chair of the Committee. Membership will consist of one Non-executive Director and one Executive Director. The Chair of the Committee should ensure the membership promotes equality, diversity and inclusion.

Any Executive and Non-executive Director can attend a Board sub-committee meeting because of the position that they hold.

The Committee 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 member of staff and all members of staff are directed to co-operate with any request made by the Committee.

The Committee is authorised by the Board to obtain outside legal or other independent professional advice and may request the attendance of individuals from outside HIF with relevant experience and expertise if it considers this necessary or expedient to carrying out its functions.

There may be occasions where the Executive and Non-Executive Director posts have been filled on an interim basis. Where this arrangement is in place, the interim post holder will be considered a member of this Committee for the period they hold the interim position.

Where an individual is unable to attend, they may delegate to a Deputy. In such cases, it should be made clear at the meeting who is undertaking the deputising role. A minimum of 2 from 4 to attend for quorum.

Where a Non-Executive Director is unable to attend, they may delegate to another Non-Executive Director; in such cases it should be made clear at the meeting who is undertaking the deputising role.

5.2 In attendance: in an advisory capacity

Job Title
Deputy Director of Estates and Facilities
Associate Director of Business Development and Service Improvement
Associate Director of Estates and Capital Delivery
Assistant Company Secretary and Governance Lead
HIF Finance Manager (HDFT)
HR Business Partner (HDFT)

In addition to anyone listed above as a member or attendee, at the discretion of the Chair of the Committee, the Committee may also request individuals to attend on an ad hoc basis to provide advice and support for specific items from its work plan when these are discussed at the meetings.

6. Quoracy

Number: The minimum number of members for a meeting to be quorate is three, comprising at least two of the above listed members. If the Chair of the Committee is unable to attend the meeting, and if otherwise quorate, the meeting will be chaired by one of the other Non-Executive Directors.

A Schedule of attendees should be reviewed at least annually to ensure adequate cover exists.

Non-quorate meeting: Non-quorate meetings may go ahead unless the Chair decides not to proceed. Any decisions made by the non-quorate meeting must be reviewed at the next quorate meeting and documented in the minutes.

7. Meetings of the Committee

Frequency: Meetings will be held whenever required, but with a minimum of 4 meetings per year.

In private: The meetings of the Innovation, Resource and Commercial Committee (IRCC) would take place in private due to the commercial nature of the discussions taking place.

Urgent Meetings: Any member of the Committee may request an urgent meeting. The Chair of the Committee will normally agree to call an urgent meeting to discuss the specific matter, unless the opportunity exists to discuss the matter in a more expedient manner.

Administrative Support: The Committee Secretariat will be provided by the HIF Administration Team, including to arrange meetings, prepare agendas, circulate papers and draft minutes, including a register of attendance to be agreed with the Chair of the meeting prior to circulation as described below. Papers will be made available a minimum of five days prior to scheduled meetings. An action log will be maintained, and a log of items reviewed throughout each 12 month period.

Minutes: Draft minutes will be approved by the Chair of the meeting and then shared with the members of the Committee and the Board of Directors. The draft minutes will be reviewed and the final record agreed at the next quorate meeting.

Chair Reports: The Chair of the Committee will provide an update of key issues arising from the meeting, including decisions taken, to the next Board of Directors meeting held in public.

Voting: It is at the discretion of the Chair of the meeting to call a vote during a meeting. When voting, decisions at meetings shall be determined by a majority of the votes of those present and voting. In the case of any equality of votes, the person presiding shall have a second or casting vote.

8. Authority

Establishment: The Committee is a sub-committee of the HIF Board and has been formally established by the HIF Board.

Powers: The Committee has no powers, other than those specifically delegated in these Terms of Reference.

Cessation: The Committee is a standing Board sub-committee in that its responsibilities and purpose are not time limited. However, the Committee has a responsibility to review its effectiveness annually.

9. Duties of the Chair

The Chair of the Committee shall be responsible for:

- Agreeing the agenda in partnership with the Managing Director and the Assistant Company Secretary and Governance Lead;
- Directing the meeting, ensuring it operates in accordance with the Company values whilst ensuring all attendees have an opportunity to contribute to the discussion;
- Ensuring the agenda is balanced and discussion is productive;
- Giving direction to the secretariat and checking the draft minutes; and
- Ensuring sufficient information is presented to the HIF Board in respect of the work of the Committee.

10. Review of Committee Effectiveness, Terms of Reference and Annual Report

It will be the responsibility of the Chair of the Committee to ensure that it carries out an assessment of committee effectiveness annually, and to ensure the outcome is reported to the HIF Board along with any remedial action to address any weaknesses identified. The Chair of the Committee will also be responsible for ensuring that the actions to address any areas of weakness are completed.

The Terms of Reference shall be reviewed by the Committee at least annually and be presented to the HIF Board for ratification.

The Committee will present an annual report to the HIF Board outlining its work against its duties set out in the Terms of Reference. The Committee will make recommendations to the HIF Board on any area within its remit where action or improvement is required. Members' attendance at Committee meetings will be disclosed in the HIF Annual Report.

Appendix 1: Schedule of Deputies

It may not be necessary or appropriate for all members (or attendees) to have a deputy attend in their absence. If this is the case, please state below “no deputy required”.

Full member (by job title)	Deputy (by job title)
Non-executive Director / Chair	Non-executive Director
Managing Director	Associate Director or Deputy Director of Estates and Facilities

Attendee (by job title)	Deputy (by job title)
Deputy Director of Estates & Facilities	No deputy required
Associate Director of Business Modernisation and Service Improvement	Associate Director of Estates and Capital Delivery
Associate Director of Estates and Capital Delivery	Associate Director of Business Modernisation and Service Improvement
HR Business Partner	No deputy required
Assistant Company Secretary and Governance Lead	Member of Corporate Governance team

HIF Innovation, Resource and Commercial Committee (IRCC) Workplan

2025 Meeting dates	Papers to be submitted a week in advance	Frequency	13 February	17 April	12 June	14 August	16 October	18 December
Standing / Opening / Closing items	Welcome & Apologies for Absence	All	✓	✓	✓	✓	✓	✓
	Declaration / Conflicts of Interests	All	✓	✓	✓	✓	✓	✓
	Minutes of Previous Meeting	All	✓	✓	✓	✓	✓	✓
	Matters Arising & Action Log	All	✓	✓	✓	✓	✓	✓
	Managing Director's Hot Topics	All	✓	✓	✓	✓	✓	✓
	Chair's deep-dive	As required						
	AOB / Meeting Evaluation / Next Meeting	All	✓	✓	✓	✓	✓	✓
Items for review/approval prior to Board	Business Plan update	As required						
	Business Cases	As required						
Finance	Monthly financial update incl WRAP	All	✓	✓	✓	✓	✓	✓
	Financial risks	All	✓	✓	✓	✓	✓	✓
	Contracting and tenders update	As specified			✓			✓
	Review of annual accounts	As specified			✓			
Workforce	Workforce report and update from HDFT People and Culture Committee	All	✓	✓	✓	✓	✓	✓
	Apprenticeships	As required						
	Succession planning	As specified					✓	
	People Plan – annual review	As specified						✓
	Annual Pay Award	As specified			✓			
	Living Wage Annual Increase	As specified						✓
	Gender Pay Gap Reporting	As specified	✓					
	Ethnicity Pay Gap Reporting	As specified	✓					
Business Development	External Contract Update	All	✓	✓	✓	✓	✓	✓
	Business Development Update	As specified		✓		✓		✓
Corporate Governance	Internal audits	All	✓	✓	✓	✓	✓	✓
	Internal audit report and plan approval	annual	✓					
	Standing Financial Instructions	Annual				✓		
	Annual Review: Terms of Reference	Annual	✓					
	Annual Review: Committee Effectiveness	Annual						✓
	Committee Annual Report	Annual						✓
	Annual Review: Committee Workplan	Annual	✓					

Terms of Reference: Senior Management Team

Terms of Reference approved July 2025

Accountable to: HIF Board of Directors
Reporting to: HIF Board of Directors

1. Aim and Purpose of the Group

The Senior Management Team (SMT) meeting is the principle forum for ensuring and assuring the delivery of the Company's business, including annual business, workforce and financial plans. It exists to ensure that the Company's strategic and operational objectives are met and that the systems and processes by which it is governed are effective. The group will maintain oversight of operational performance and management of risk in a systematic and planned way across the year.

The group is the most senior executive decision making forum and will receive reports and recommendations from sub-groups and make recommendations to the Board of Directors for major projects.

2. Key Tasks

The responsibilities and tasks of the group include the following:

1. Performance and delivery of the annual business plan:
 - Quality and Governance
 - Finance, including cost improvement plan delivery
 - Business Modernisation and Service Improvement
 - Sustainability
 - Workforce
2. Review of the Integrated Board Report (IBR) including:
 - Company risk register
 - Contractual key performance indicators (KPIs)
 - Risk mitigation action plans
 - Actions arising from Freedom of Information request, incidents, complaints and claims
 - Actions arising in response to internal audit reports
 - Company policies and Standard Operating Procedures (SOPs)
 - Company Workforce position
 - Company Finance position
 - Board Assurance Framework (BAF)
 - Recommendations and information pertaining to Business Development and Modernisation opportunities

To do this the SMT will:

- Show leadership in setting a culture of continuous improvement in delivering high quality care and empower staff to make changes to improve quality.
- Directly oversee delivery and manage progress of the annual business plan and all major projects identified to be implemented.
- Monitor quality & governance, workforce, contractual and financial performance and;
 - Challenge progress against key performance indicators;
 - Identify significant and unresolved variance from targets/projections and produce

- action plans;
 - Receive updates from departments identifying key operational issues and risks;
 - Drive efficient income and expenditure control
 - Report on recruitment and retention, acting on any themes
- Be responsible for the development of the following, for approval by Board;
 - Annual corporate objectives and strategic themes
 - Annual Business Plan
 - Financial plan and associated workforce/people plan
 - Quality improvement plans
 - Efficiency and transformation plans
 - Establish programmes that deliver the items listed above and;
 - Monitor the progress of these programmes and receive exception reports;
 - Advise the Board of Directors on key risks to delivery of the Trust objectives via the Board Assurance Framework and Integrated Board Report
 - Commission time limited pieces of work from subgroups as required.
 - Schedule other items for periodic review and agree actions and responsibilities to address shortcomings or development requirements identified e.g.
 - Staff survey objectives;
 - Estates, Facilities, Sterile Services and Medical Equipment Library progress;
 - Information governance;
 - Internal Audit reports.

3. Membership

The core membership of the group comprises:

- Managing Director
- Deputy Director of Estates and Facilities
- Associate Director of Estates and Capital Delivery
- Associate Director of Business Modernisation and Service Improvement
- Head of Facilities
- Head of Operational Estates (Electrical Services and Medical Engineering)
- Head of Operational Estates (Contracts, Quality and SSD)
- Head of Operational Estates (Corporate and Sustainability)
- HR Business Partner
- Finance Manager
- Assistant Company Secretary and Governance Lead

When members are unable to attend a suitable deputy should act as a representative on their behalf.

Additional staff may be invited to attend on an ad hoc basis.

4. Quorum

The quorum will be at least one Attendee/representative for each service and the MD or Deputy Director.

5. Frequency of Meetings

The meetings will be held monthly basis.

Action notes and log will be taken as a record of each meeting.

6. Reporting

The group will report to the Board of Directors as appropriate.

7. Review

The terms of reference will be reviewed on an annual basis.

HIF Senior Management Team (SMT) Workplan

HIF Senior Management Team 2025 Workplan														
	Month of meeting 2025	Frequency	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Standing / Opening / Closing items	Welcome & Apologies for Absence	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Declaration / Conflicts of Interests	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Minutes of Previous Meeting	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Matters Arising & Action Log	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Managing Director Update	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Review of Workplan	Annually		✓						✓		✓		
	AOB / Meeting Evaluation / Next Meeting dates	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Current Delivery	Quality Meetings Summary from E&F	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Service grids (supplementary pack)	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Performance & Quality	IBR (inc Workforce & Finance)	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	WRAP Progress to Date (IBR)	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	OHFC Contract variations / Service Specification	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Health & Safety Group (Grid)	Quarterly			✓				✓			✓		✓
	Information Governance/FOIs (IBR)	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Internal Audit Reports Update	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	After Action Reviews	As required												
	Business Continuity	Annually						✓						
	Post Project Evaluation (PPE) for business cases	Annually												✓
Business Modernisation and Service Improvement	Business Modernisation and Service Improvement update	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Staff Survey results	As required												
	HIF Impact	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Other items	Policies for approval	As required												
	Business Cases for information	As required												
Strategy and future planning sign off	Business Plan progress update	As indicated	✓	✓	✓							✓	✓	
	Capital	Annually			✓									
	Winter	Annually										✓		
	Green Plan	Annually						✓						
	Annual EQIA Assessment and Budgetary Sign-Off	Annually		✓										
Governance	Committee Effectiveness	Annually											✓	
	Board Assurance Framework	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Risks/Corporate Risk Register	Monthly	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
	Workplan	As indicated	✓	✓										

At HIF we use a range of templates to ensure a strong and robust framework. Templates within this document include:

- **Front Sheets for Reports**
- **Reports**
- **Agendas**
- **Minutes**
- **Action Trackers**
- **Action Plans**



**Board of Directors
Date
Paper title**

Agenda Item Number:		
Presented for:	Discussion/Agreement	
Report of:		
Author (s):		
Report History:		
Publication Under Freedom of Information Act:	This paper can/cannot be made available under the Freedom of Information Act 2000 if requested.	
Links to HIF's Objectives		
Delivering safe, efficient, compliant, responsive and outstanding quality services		√
Being Well Led and Financially Sustainable		√
Embedding business modernisation and service development throughout the company		√
Growing our future business development opportunities		√
Being an employer of choice, developing our staff, being an outstanding place to work and delivering our services with pride		√
Delivering our services sustainably, minimising our impact on the environment		√
Recommendation:		



Board Committee report to the Board of Directors

Committee Name:	
Committee Chair:	
Date of last meeting:	
Date of Board meeting for which this report is prepared	

Summary of Key Incidents
Are there any significant risks for noting by Board? (list if appropriate)
Any matters of escalation to Board for decision or noting (list if appropriate)

Owing to the different governance requirements and outcomes of the different levels of meetings, there are various agenda formats. Templates within this document include:

- Board of Directors Agenda – Formal meeting
- Board of Directors Agenda – Meeting held in Private
- Board of Directors Agenda – Workshop
- Board Sub-Committee Agenda
- SMT Agenda

HIF Board of Directors – Formal Meeting
to be held on Date & Time
at Location
AGENDA

Item No.	Agenda Item	Action	Lead	Paper	Time
1.0	Opening Remarks and Matters Arising				
1.1	Welcome from the Chair - Introductions & apologies	Note	Chair	Verbal	
1.2	Apologies for Absence	Note	Chair	Verbal	
1.3	Declaration of Interests and Conflicts of Interest	Note	Chair	Attached	
1.3	Minutes of Previous Meeting:	Approve	Chair	Attached	
1.4	Matters Arising and Action Log	Note	Chair	Attached	
1.5	Chair's Update	Note	Chair	Verbal	
1.6	Managing Director's Update	Note/ Discuss	Managing Director	Attached	
1.7	Board Assurance Framework (BAF)	Note	Managing Director	Verbal	
1.8	Sub-Committee Updates:	Note/ Discuss	Non-Executive Directors	Verbal /attached	
2.0	Integrated Board Report (IBR)				
2.1	Integrated Board Report (IBR)	Note	Managing Director	Attached	

3.0	Finance				
3.1	Finance Report	Note/ Discuss	Deputy Director of Finance	Attac hed (in IBR)	-
4.0	Workforce				
4.1	Workforce	Discuss	Deputy Director of People & Culture	Attac hed (in IBR)	-
4.2	ITEM	Discuss	-		-
5.0	ITEM				
5.1	ITEM	Discuss	-		-
6.0	Governance Arrangements				
6.1	Any Other Business	Discuss	Managing Director	Verbal	-
6.2	Items to Escalate to HDFT Board	Discuss	Chair	Verbal	
6.3	Additional Risks to add to Risk Register	Discuss	Chair	Verbal	
6.4	Evaluation of the Meeting	Discuss	Chair	Verbal	
Meeting Close: 11:30am					
NEXT MEETINGS:					
HIF Board Workshop: xxxxx					
HIF Board Meeting: xxxxx					

HIF Board of Directors Meeting in PRIVATE
To be held on Date & Time
at Location

Item No.	Agenda Item	Action	Lead	Paper	Time
1.	Welcome and Introductions	Note	Chair	Verbal	-
2.	Apologies for Absence	Note	Chair	Verbal	-
3.	Declaration of Interests and Conflicts of Interest	Note	Chair	Verbal	-
4.	Business Development	Note/Di scuss	-	Attached	-
5.	ITEM	Note/ Discuss	-	Attached	-
6.	Any Other Business	Discuss/ Note/ Approve	Chair	Verbal	-
7.	Items to Escalate to HDFT Board	Discuss	Chair	Verbal	-
8.	Additional Risks to add to Risk Register	Discuss	Chair	Verbal	-
9.	Evaluation of the Meeting	Discuss	Chair	Verbal	-
NEXT MEETING XXXXXXXXXX					

**HIF Board of Directors Workshop
to be held on Date & time
in Location**

AGENDA				
Item No.	Agenda Item	Lead	Paper	Time
1.0	Opening Remarks & Matters Arising			
1.1	Welcome from the Chair - Introductions & apologies	Chair	Verbal	-
1.2	Hot Topics from the Chair	Chair	Verbal	-
1.2	Hot Topics from the Managing Director	Managing Director	Verbal	-
2.0	Workshop			
2.1	ITEM	-	Presentation	-
2.2	ITEM	-	Plenary session	-
3.0	Close of meeting			
3.1	Closing remarks	Chair	Verbal	-
	Meeting Close: 11:30am			
	NEXT MEETINGS:			
	HIF Board Meeting:	xxxxx		
	HIF Board Workshop:	xxxxx		

**Name of the Board sub-committee
Meeting to be held on date and time
At Location**

AGENDA

Item No.	Item	Action	Lead	Paper
Opening Items				
1.0	Welcome and Apologies for Absence <i>To receive any apologies for absence</i>	Note	Chair	Verbal
2.0	Declarations of Interest <i>To declare any new or changes to interests; and any interests in relation to open agenda items</i>	Note	Chair	Verbal
3.0	Minutes of the previous meeting	Approve	Chair	Attached
4.0	Matters Arising and Action Log	Discuss	Chair	Attached
5.0	Chair's Report	Discuss	Chair	Verbal
Committee workplan items				
6.0	- ITEM	Discuss	All	Verbal
Closing Items				
7.0	Review of Workplan	Note / Discuss	Chair	Attached
8.0	Any Other Business <i>By permission of the Chair</i>	Note/ Discuss/ Approve	Chair	Verbal
9.0	Evaluation of the Meeting	Note/ Discuss	Chair	Verbal
10.0	Date and Time of Next Meeting XXXXXXXXXX			

**HIF Senior Management team
To be held on xxxxxx – 9 – 11.30am
in the Board Room, 17 Wetherby Road**

AGENDA

Item	Time	Item and Purpose	Paper	Lead	Action
Welcome and Opening Remarks					
1.0		Welcome and Apologies	Verbal	Chair	Note
2.0		Declarations of Interest	Verbal		Note
3.0		Minutes of the previous meeting held on xxxxxx	Attached		Approv e
4.0		Matters Arising and Action Log	Attached		Discuss
5.0		Hot Topics: Managing Directors Update	Verbal		Note
Strategic theme updates					
6.0		Strategic Theme 1: Delivering safe, efficient, compliant, responsive and outstanding quality services <ul style="list-style-type: none"> • True North Metrics (<i>by exception</i>) • Breakthrough Objectives (<i>by exception</i>) • Corporate Projects (<i>by exception</i>) 	Grids / IBR KPI's / Verbal	Head of Facilities & Heads of Operational Estates	Note
7.0		Strategic Theme 2: Being Well Led and Financially Sustainable <ul style="list-style-type: none"> • True North Metrics (<i>by exception</i>) • Breakthrough Objectives (<i>by exception</i>) • Corporate Projects (<i>by exception</i>) 	IBR - financial report	HIF Finance Manager	Note
8.0		Strategic Theme 3: Embedding business modernisation and service development throughout HIF <ul style="list-style-type: none"> • True North Metrics (<i>by exception</i>) • Breakthrough Objectives (<i>by exception</i>) • Corporate Projects (<i>by exception</i>) 	Verbal / BMG Grids	Associate Director of Business Modernisation and Service Improvement & Project Leads	Note
9.0		Strategic Theme 4: Growing our future business development opportunities <ul style="list-style-type: none"> • True North Metrics (<i>by exception</i>) • Breakthrough Objectives (<i>by exception</i>) • Corporate Projects (<i>by exception</i>) 	Grid / IBR slide	Associate Director of Business Modernisation and Service Improvement	Note
10.0		Strategic Theme 5: Being an employer of choice, developing our staff, being an outstanding place to work and delivering our services with pride <ul style="list-style-type: none"> • True North Metrics (<i>by exception</i>) • Breakthrough Objectives (<i>by exception</i>) • Corporate Projects (<i>by exception</i>) 	IBR – workforce report	Deputy Director of Estates and Facilities	Note

Item	Time	Item and Purpose	Paper	Lead	Action
11.0		Enabling Ambition: Delivering our services sustainably, minimising our impact on the environment <ul style="list-style-type: none"> • True North Metrics (<i>by exception</i>) • Breakthrough Objectives (<i>by exception</i>) • Corporate Projects (<i>by exception</i>) 	Grid / KPI's	Heads of Operational Estates (Corporate and Sustainability)	Note
Governance					
12.0		Policies – policy register update and new polices for approval	Attached	Policy lead	Approve
13.0		Internal Audit Reports – audits in month and action log	Verbal/Attached	All	Note
14.0		Approved Business Cases for information	Attached	Business case lead	Approve
15.0		Business Plan Update	Verbal	Deputy Director of Estates and Facilities	Note
Quality					
16.0		Review of Quality Indicators <ul style="list-style-type: none"> - Incidents update - Compliments and Complaints - Lessons learnt/ reviews 	Verbal / IBR	Quality Manager	Note
17.0		After Action Reviews – AAR in month and action log	Attached	Action leads	Note
18.0		Escalations from Quality Management Working Groups	Grid	Meeting Chairs	Note
19.0		Escalations from Health and Safety meetings (quarterly)	Grid	Meeting Chair	Note
Risk					
20.0		Emerging Risk: <i>Teams by Exception (new risks scoring 10 and above)</i> Risks to escalate to the Corporate Risk Review Group	Verbal / IBR	All	Note
Closing items					
21.0		Any other business	Verbal	Chair	Note
22.0		Meeting evaluation	Verbal	Chair	Note
CLOSE 11.30					
<u>Date and Time of Next Meeting:</u> XXXXXXXXXXXXXXXXXXXX					

Minutes of the XXX Meeting
Date
Location

Present: Name, Designation (Chair of the Committee)
Name, Designation
Name, Designation
Name, Designation
Name, Designation
Name, Designation

In Attendance: Name, Designation
Name, Designation
Name, Designation
Name, Designation
Name, Designation
Name, Designation

Observing: Name, Designation

Item No.	Item
Letters of Committee / Month / Day / 1 Eg - QC/03/29/1 1.1 1.2	Welcome and Apologies for Absence The Chair of the Committee welcomed everyone to the meeting and reminded all of the purpose of the meeting. Apologies were received for Name, Designation
2.1 2.2 2.3	Item in Bold Text Information xxxxxxxxx Action: Note the action and who is the lead Resolved: Note the approval / decision made
3.1 3.2 3.3	Item in Bold Text Information xxxxxxxxx Action: Note the action and who is the lead Resolved: Note the approval / decision made

4.1	Any Other Business No other business was noted.
5.1	Risks The following risks were noted: <ul style="list-style-type: none">• Xxxxx• xxxxx
6.1	Date of the Next Meeting The next meeting of the Committee would take place on XXXXXX.

Action Tracker

Last updated:



Meeting/Action Log Title

RAG Rating Key	
Completed	
In Progress	
Behind Plan or of Concern	
Not Commenced/On hold	

Circulation			

Meeting Date	Agenda Item	Action	Lead	Date to be completed	Detail Progress	RAG

At HIF we use a range of structures to ensure a strong and robust framework. The management structure is outlined in the organogram below.

