

Terms of Reference

Bedfordshire, Luton and Milton Keynes Community and Mental Health Services Transformation (CMHST) Programme Board

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1 Introduction

The BLMK system, like many other systems is facing a growing population with incidence of conditions that will impact community and mental health services. Variation in current service provision across the system, financial pressures, interdependencies between community services and UEC. The national aims around 'left shift', focus on prevention and shift from analogue to digital, reducing inequalities and improving patient outcomes.

2 Purpose

The purpose of this programme board is to oversee and support the design and delivery of the approach to commissioning community and mental health services in BLMK, including any procurement process/es. The programme board is the primary decision making forum relating to delivery of the Community and Mental Health Services Transformation (CMHST) programme.

The Programme Board will make recommendations to the ICB Board for formal decisions and Council Cabinets as appropriate and required per the organisations' respective governance frameworks.

3 Roles and Responsibilities

This section describes the Programme Board's duties, authority, accountability and reporting. The Programme Board will adopt a phased approach to the commissioning of Integrated Community Based Care services in BLMK. This is to ensure that the ICB acts consistently with its obligations concerning:

- engagement and involvement of the public and communities;
- open and fair procurement and commissioning, conducted with integrity, and aimed at delivering maximum benefit and value for money; and
- management of Conflicts of Interests under current and potential procurement regimes.

3.1 Programme Board responsibilities throughout:

Develop and monitor the CMHST programme of work including:

- Operate as an escalation point for any strategic issues arising in the BLMK system
- Make decisions according to agreed parameters of the groups remit
- Identify key items for decision at ICB Board and across the system, supporting Board preparation, Business Case/Case for Change approvals
- Manage Board Assurance Framework (BAF) and programme risks, escalating as appropriate across the governance structure
- Monitor and support effective delivery of the programme to ensure it meets agreed timeline, legal and safety advice, and remains within financial context
- Ensure good engagement takes place, and all interested parties are given an opportunity to contribute
- Ensure an EQIA against any formal proposal is undertaken

3.2 Phase 1: Case for Change and Engagement

Oversee the:

- appraise current community health and mental health services provision in BLMK (what is provided and how, pros and cons of current provision).
- develop clear plans and arrangements for the approval of the Case for Change by the ICB Board and relevant local authorities, as appropriate.
- Development of a strategy for the management of real and perceived Conflicts of Interests, to ensure the ICB faces minimal risk of challenge of its procurement process and procurement decisions, should any procurement stage of the programme progress.

3.3 Phase 2: Business Case

Oversee the development of:

- potential services provision models,
- service scoping,
- financial modelling,
- options for any procurement/s,
- associated activities in order to develop a robust full Business Case for approval by the ICB Board and relevant local authorities.

3.4 Phase 3: Specification and Procurement Preparation

Oversee the development of:

- detailed services specification/s, outcomes framework and transformation priorities,
- stakeholder engagement plan which ensures stakeholders are engaged in the development of the detailed services specification/s, outcomes framework and transformation priorities,
- any procurement documentation including Standard Selection Questionnaire (SQ), Invitation To Negotiate (ITN) documentation and process to be followed,
- design and approval of the commercial approach to the programme.

3.5 Phase 4, 5 & 6: ICB Governance, Procurement & Contract Award

- Make recommendations to the ICB Board on any decision/s to proceed to procurement, evaluation team/dialogue teams, and management of conflicts of interest in accordance with ICB and procurement policy.
- Oversee the work of the evaluation team/dialogue teams and preparation of any contract award notifications, transformation plans and communications plans

3.6 Phase 7: Mobilisation

Oversee the development of:

- Mobilisation Plans
- Transition Plans
- Exit Plans
- Assurance processes

4 Authority

The Programme Board is authorised to:

Seek information	Seek any information it requires within its remit, from any employee or member of the ICB, and from partner organisations.
Make recommendations	Recommendations to the ICB and relevant local authorities.
Commission reports	Commission reports required to help fulfil its obligations.
Obtain advice	Obtain independent professional advice and secure the attendance of advisors with relevant expertise to fulfil its functions.
Create sub-programme boards	Create sub-groups for specific programmes of work. Determine the terms of reference of sub-groups, in accordance with the ICB's Constitution, Standing Financial Instructions.

5 Powers

The Programme Board has the following decision-making powers, which are deemed necessary and adequate for the Programme Board to deliver the programme to time and specification.

- Manage resources allocated to the programme;
- Make executive decisions with regards to the delivery and implementation of the programme, within agreed tolerances and within the framework that has been set by the BLMK Integrated Care Board, and the ICB Business Case. Such decisions may include (not an exhaustive list):
 - decisions to progress to and through milestones and gateways;
 - for the purposes of designing the procurement and commissioning approach, decisions with regards to;
 - determining the scope of core services and additional services;
 - determining the service specifications and provider selection criteria
- Recommend to the ICB Board and Council Cabinets, as appropriate and required, additional investments over and above the financial envelope (total contract value) that is agreed for the community services procurements

6 Accountability and reporting

The Programme Board is accountable to the Integrated Care Board and formally reports to the four local authorities and ICB Board.

Reporting

- The Programme Board receives scheduled reports from its sub-groups, so that it is appraised of progress against plans, achievement of KPIs, and issues and risks.
- The project team records notes of each meeting of this Programme Board.
- The Programme Board reports monthly to the ICB Executive Team on progress, decisions taken, and issues and risks.
- The Programme Board keeps the ICB Board and Council Cabinets appraised of the programme's process, and makes recommendations for decisions as may be required (e.g. recommendations for decisions pertaining to organisations' resource)

- The Programme Board escalates issues to the ICB Board and Council Cabinets where it deems issues to be of such potential impact that the Programme Board itself cannot resolve the issues.

Close-down report

- The Programme Board provides the ICB Board and Council Cabinets with a close-down report at the end / conclusion of the programme.
- The report includes:
 - Assessment of achievement of programme goals and objectives.
 - Handover arrangements for business-as-usual management of the contracts.
 - Lessons learned report.

7 Values

The BLMK CMHST Programme Board will conduct its business in accordance with relevant codes of conduct / good governance practice, including the Nolan principles of public life, the ICB Standards of Business Conduct Policies, and other relevant policies / guidance on good and proper meeting conduct for NHS organisations.

8 Membership

The Programme Board membership will reflect the agreed scope of the programme but in short term will be established to oversee the process to agree the case for change and the transformation priorities. Additional members may be co-opted as required. Members of the Group may send a nominated deputy with delegated authority to represent them at the Group. The meeting will need to have the Chair or Deputy Chair, an ICB Executive and at least 2 members representing the Local Authorities present for decision making.

A quorum shall be 5 members. If the meeting becomes inquorate, and if members agree, the meeting may continue but cannot take decisions. Any decisions in principle must be ratified at the next meeting of the Programme Board.

Attendance is monitored and members should aim to attend 100% of meetings and must attend at least 75% of meetings and read all papers beforehand.

Core Members		
Name	Title	Organisation
Felicity Cox (Chair)	Chief Executive Officer	BLMK ICB
Maria Wogan	Chief of Strategy & Assurance, MK Place Link Director (MH and Community SRO)	BLMK ICB
Sarah Stanley	Chief Nurse, Bedford Borough Place Link Director	BLMK ICB
Dean Westcott	Chief Finance Officer	BLMK ICB
Dr Andrew Rochford	Chief Medical Officer	BLMK ICB

Vicky Head	Director of Public Health for Bedfordshire & MK (Director representative for Adult and Children's Services in MK)	Bedford Borough Council
Jill Britton	Director of Adult Services (Director representative for Adult and Children's Services in Luton)	Luton Borough Council
Kate Walker	Director of Adult Services (Director representative for Adult and Children's Services in Bedford)	Bedford Borough Council
Andy Sharp	Director of Social Care, Health and Housing (Director representative for Adult and Children's Services in Central Bedfordshire)	Central Bedfordshire Council
Lorraine Mattis	Non-Executive Member	BLMK ICB
Penny Harris	Strategic Adviser	BLMK ICB
Kathy Nelson	Programme Director	BLMK ICB
Suzanne Tracey	Commercial Director	BLMK ICB
Duncan McConville	Senior Transformation Manager	BLMK ICB

9 Conflicts of Interest

Declarations: All members and those in attendance must declare any actual or potential Conflicts of Interest. This is recorded in the meeting notes.

Exclusions: The Programme Board will follow and apply the ICB's Procurement Policy with regards to the management of Conflicts of Interest. This means that the Chair will consider the exclusion of members and / or attendees from discussion and / or decision-making if individuals have a relevant material or perceived interest in a matter under consideration.

10 Meeting frequency

The meeting will be held monthly and otherwise as required. Additional meetings may be convened on an exceptional basis at the discretion of the Programme Board Chair.

11 Review

These terms of reference will be reviewed by the BLMK CMHST Programme Board annually or sooner if required.

Version Control		
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BLMK CMHST Programme Board	April 2025	V0.1
BLMK CMHST Programme Board	May 2025	V0.3
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