The Morecambe Bay Investigation ‘Kirkup’ Report Implementation Group

Terms of Reference

CONSTITUTION

1. The Board of Directors, via the Morecambe Bay Investigation Report sub-committee, hereafter known as ‘the committee’, approved the establishment of the Morecambe Bay Investigation Report Implementation Group (known as “KRIG” in these terms of reference) for the purpose of:

   a) developing and implementing a project plan which addresses the recommendations set out in the Report of the Morecambe Bay Investigation (“the Kirkup report”)

   b) ensuring that this plan describes the detailed actions, timescales and responsibilities that will ensure recommendations are fully responded to.

   c) proposing additional actions as may be required to fully address the body and spirit of the ‘Kirkup’ report, and agreeing these, and any revisions as may be considered necessary, with the committee.

   d) ensuring that, where appropriate, and as agreed and defined by the committee, the action plan is developed in line with other key initiatives including the RCOG report and to take account of relevant issues raised in national / local reports, patient surveys, serious untoward incidents, clinical incidents and inquests.

   e) ensuring timely and well-coordinated delivery of all actions working with and involving project leads in the work of the KRIG.

   f) establishing comprehensive and auditable processes to enable scrutiny of performance and the delivery of actions by the committee; in order for them to provide assurance to the Board of Directors.

   g) ensuring that this progress is reported regularly to the committee, and demonstrates the ways in which stakeholders are informed and engaged as appropriate in the governance and delivery of actions.

   h) establishing and building a comprehensive portfolio of evidence in support of actions taken and the improvements in place.

2. The KRIG is directly accountable to the Morecambe Bay Investigation ‘Kirkup’ Report Sub-Committee, and any changes to these terms of reference must be approved by this sub-committee.

DUTIES

1. In particular the KRIG will:

   Comprehensive Project Plan
APPENDIX 4

a) develop a comprehensive and detailed project plan that takes account of the findings of the Kirkup report and in particular its recommendations.

b) ensure that these projects and actions are consistent with and help to further develop and promote the vision, values and culture of clinical governance, quality, patient safety and clinical standards across the organisation;

c) ensure that clinical leaders and service users are engaged and involved in the development and delivery of the action plan.

d) secure and manage the funding and resources necessary to deliver the project plans and associated actions.

e) develop a comprehensive communication and engagement plan that will apply to service users, families, public and staff as well as statutory partners and stakeholders and the media.

Performance management

f) adopt a programme management approach to implement and deliver the agreed project plan, linking to the Trust Programme Management Office (PMO) to achieve coherence and compatibility with other key initiatives.

g) establish task and finish groups, reference groups, and work streams as required to ensure timely delivery of actions.

h) prepare progress reports for the committee, describing delivery of key actions and work streams included in the project plan.

i) prepare and provide exception reports to the Chair of the sub-committee between regular meetings if issues are identified that impact on delivery of the action plan thus enabling the committee to take necessary steps.

j) work with Independent PPI experts and others to ensure that there is appropriate contribution and involvement from stakeholders and service users in respect of the action plan and implementation of recommendations.

k) propose and coordinate communication and media activities in respect of the Trust’s actions and progress in implementing the Kirkup report recommendations.

l) produce a monthly ‘single version’ report that will be submitted to the committee, Board of Directors, commissioners, regulators and other stakeholders and which will be publically available. This report to include progress and exception reports and evidence that provides assurance on actions implemented.

Finance

m) Where a matter relating to implementation of the recommendations has a significant financial implication the KRI G will refer that matter to the Committee or for further consideration by the Finance Committee as appropriate.
2. The Morecambe Bay Investigation Report ‘Kirkup’ Implementation Group will include the following members:
   
   a) David Walker - Medical Director  
   b) David Wilkinson – Director of Human Resources  
   c) Owen Galt – Clinical Director, Women and Children’s Division (WACS)  
   d) Tina Turner – Divisional General Manager - WACS  
   e) Judith Griffin – Senior Programme Advisor  
   f) Margaret Williams – CCG representative  
   g) Fiona Wise – Monitor representative  
   h) David Burch – Consultant Obstetrician  
   i) Sascha Wells - Head of Midwifery  
   j) Lindsey Lewis - Project Manager  
   k) Louise Jones – Communication Manager

3. Project leads and/or project sponsors may also be in attendance at each KRIG meeting or invited for specific meetings to report on progress and issues.

4. The Chair of the KRIG is the UHMB Medical Director; The Deputy Chair of the KRIG is the WACS DGM. If the Chair is not present, then the Deputy Chair will chair the meeting.

ATTENDANCE

5. The group will identify other individuals who will be invited to attend in support of the work of the group.

QUORUM

6. A quorum will be five. Of these members, then one will be the chair or the vice chair.

FREQUENCY

7. The KRIG will meet fortnightly in the first instance.

AUTHORITY

8. The Morecambe Bay Investigation KRIG is authorised by The Morecambe Bay Investigation Sub-Committee

DECISION MAKING

9. The KRIG will operate in accordance with the instructions of the sub-committee.

REPORTING

10. The Morecambe Bay Investigation Report ‘Kirkup’ Implementation Group will be accountable formally to The UHMB Trust Board, reporting directly to a specifically established sub-committee of the Board, the Morecambe Bay Investigation ‘Kirkup’ Report Sub-Committee, which will offer assurance and oversight to the Trust response to the recommendations of the report.
REPORTING GROUPS

11. The Kirkup Report Project Groups

   a) Education, Learning and development
   b) Clinical and Women and Children’s
   c) Workforce
   d) Governance
   e) Estates
   f) Communication and Engagement
   g) Partner organisation (TBC)

ADMINISTRATIVE ARRANGEMENTS

12. All meetings of the KRG will be provided with full administrative support from a dedicated KRG administrator.

REVIEW

13. Terms of Reference will normally be reviewed annually, with recommendations on changes submitted to the sub-committee.

Date Approved and issued
Version Number:
Next Review:
To be reviewed by:
To be approved by:
Executive Responsibility