Bradford District and Craven Health and Care Partnership

Closing the Gap Business Case Appraisal Panel

Terms of Reference

Version control

Version:	Draft v2.0
Approved by:	Partnership Leadership Executive
Date Approved:	[xx] September 2024
Responsible Officer:	Accountable Officer at Place
Date Issued:	[xx] October 2024
Date to be reviewed:	April 2025

1. Introduction

1.1 The Closing the Gap Business Case Appraisal Panel (the Panel) is established as a nested group reporting to the Closing the Gap Programme Board.

1.2 These terms of reference set out the remit, responsibilities, membership and reporting arrangements of this Panel and may only be changed with the approval of the Partnership Leadership Executive. The Panel has no executive powers, other than those specifically delegated in these terms of reference.

1.3 Bradford District and Craven Health and Care Partnership is part of the West Yorkshire Integrated Care System (ICS). The ICS has four primary purposes:

- Improving outcomes in population health, healthcare, and wellbeing;
- Tackling inequalities in outcomes, experience, and access;
- Enhancing productivity and value for money; and
- Supporting broader social and economic development.

1.4 The ICS has identified a set of guiding principles that shape everything we do:

- We will be ambitious for the people we serve and the staff we employ;
- The Partnership belongs to its citizens and to commissioners and providers, councils, and the NHS. We will build constructive relationships with communities, groups, and organisations to tackle the wide range of issues which have an impact on health inequalities and people's health and wellbeing;
- We will do the work once – duplication of systems, processes, and work should be avoided as wasteful and a potential source of conflict;
- We will undertake shared analysis of problems and issues as the basis of acting; and
- We will apply subsidiarity principles in all that we do, with work taking place at the appropriate level and as near to local as possible.

1.5 The Panel will conduct its business in line with the Arrangements for Conflict of Interest and Standards of Business Conduct Policy, Standing Orders, Standing Financial Instructions, and Scheme of Reservation and Delegation.

2. Purpose, role, and responsibilities

2.1 The Panel will support the Health and Care Partnership in delivering its strategic ambition to reduce health inequalities and improve population health and wellbeing for the People of Bradford District and Craven. We are committed to our Partnership vision of keeping people 'Happy, Healthy at Home' through the actions taken to support our population to stay healthy, well, and independent throughout their whole life.

2.2 The role of the Panel is principally to support the work of the Partnership's programme of work known as 'Closing the Gap: a collaborative response to our financial challenge'. The Panel will consider business cases that are known to, and have been received by, a Priority or Enabling Programme Board.

2.3 This Panel shares the imperative that is driving our Health and Care Partnership to have to scrutinise all of our services and consider what 'must' we commission and what 'must' we provide.

2.4 The Panel will consider Business Cases for new, ongoing, or revised investment and disinvestment proposals. Cases submitted to the Panel will have the endorsement of the relevant programme board(s). Cases will be proportionate to the investment proposal.

2.5 By exception, the Panel will consider cases referred by the Partnership Leadership Executive that fall outside of its general remit. The rationale for this being that the Panel membership offers a forum for robust deliberation and consideration of business that affects the Health and Care Partnership. This includes acting within an established process, and governance and assurance model of business.

2.6 In summary, this Panel will be the mechanism to consider Business Cases that affect the Health and Care Partnership, using a transparent process and an agreed set of criteria. Its responsibilities are:

a. To establish and maintain a robust and transparent process for the consideration of HCP Business Cases.

b. To take an evidence-informed and data-driven approach in its deliberations using appropriate tools and frameworks.

c. To make recommendations to the Partnership Leadership Executive on commissioning decisions in relation to Business Cases considered by the Panel.

d. To advise the Partnership Leadership Executive should the recommendations indicate the need for engagement, involvement, or consultation.

3. Membership and attendance

3.1 The membership will comprise:

- HCP Lead for Strategy – Chair and Lead Manager
- HCP Lead for System Finance – Vice Chair
- HCP PLE member for the VCSE sector
- HCP Lead for Health Inequalities
- HCP Lead for Public Health
- HCP Lead for Quality
- HCP Lead for Operational Delivery
- HCP Lead for the Priority Programmes
- HCP Lead for Communications and Involvement
- Operational Director of Finance for Bradford District and Craven Place or their nominated deputy

The Board is supported by the Programme Manager and Programme Officer.

3.2 Attendees

Partner representatives (sector/collaborative) and subject experts may be invited to attend as required. ICB officers may request or be requested to attend the meeting when matters concerning their responsibilities are to be discussed or they are presenting a paper.

4. Arrangements for the conduct of business.

4.1 Chairing meetings

The meeting will be run by the Chair. In the event the Chair of the Panel being unable to attend all or part of the meeting, the Vice-Chair shall chair the meeting.

4.2 Quoracy

No business shall be transacted unless 50 % of the membership, and including the following, are present: the Chair or the Vice-Chair. Members may participate in meetings by telephone, video, or other electronic means where they are available and with the prior agreement of the Chair. Participation by any of these means shall be deemed to constitute presence in person at the meeting. With the permission of the Chair, members of the Panel may nominate a deputy to attend a meeting of the Panel that they are unable to attend. The deputy may speak on their behalf.

4.3 Frequency of Meetings

The Panel will meet monthly. The Chair may call meetings at any time by giving not less that 7 calendar days' notice in writing to members of the Panel. Should there be no business to be considered the meeting will be stood down.

4.4 Declaration of Interest

If any member has an interest, financial or otherwise, in any matter and is present at the meeting at which the matter is under discussion, they will declare that interest as early as possible and act in accordance with the ICB's Conflicts of Interests Policy. Subject to any previously agreed arrangements for managing a conflict of interest, the chair of the meeting will determine how a conflict of interest should be managed. The chair of the meeting may require the individual to withdraw from the meeting or part of it. The individual must comply with these arrangements, which must be recorded in the minutes of the meeting.

4.5 Support to the Panel

Administrative support will be provided to the Programme Board by officers of the ICB. This will include:

a. Agreement of the agenda with the Chair, keeping an accurate record of attendance, key points of discussion, matters arising and issues to be carried forward.

b. Maintaining an on-going list of actions, specifying members responsible, due dates, and keeping track of these actions.

c. Ensuring all submissions include the minimum required information in order to make an informed decision, including a short-form QEIA (Quality and Equality Impact Assessment) and front sheet (confirming finance and quality input) as a minimum.

d. Sending out agendas and supporting papers (Business Cases) to Panel members five working days before the meeting.

e. Drafting recommendations to the Partnership Leadership Executive for comment and approval by the Chair within two working days of the meeting, and then submitting the recommendations to the Partnership Leadership Executive for the next available meeting.

f. Informing the author and sponsor of Business Cases of the outcome.

5. Authority

5.1 This Panel is authorised to seek any information it requires, within its remit, from the health and care system and they are directed to cooperate with any such request made by the Programme Board. The Panel may not delegate the powers set out in these terms of reference.

6. Reporting

6.1 The Business Case Appraisal Panel reports to the Programme Board. The Chair, on behalf of the Panel, shall make recommendations to the Partnership Leadership Executive on Business Cases that have been considered by the Panel.

6.2 The Panel may, on occasion, be required to report to the System Finance and Performance Committee and/or the System Quality Committee for assurance purposes.

7. Conduct of the Panel

7.1 All Members and Attendees will operate in accordance with the Strategic Partnering Agreement (SPA) and any other relevant policies or documents agreed by the Partnership Board.

7.2 Members must demonstrably consider the equality and diversity implications of decisions they make and consider whether any new resource allocation achieves positive change around inclusion, equality, and diversity.

7.3 Members of the group will abide by the ‘Principles of Public Life’ (The Nolan Principles) and the NHS Code of Conduct.

7.4 The Panel shall undertake a self-assessment of its own performance against the membership and terms of reference. This self-assessment shall form the basis of an annual report from the group if agreed appropriate by the parent group.