

REPORT TO THE TRUST BOARD - DATE 26 September 2013		F
Title	Trust Development Authority Accountability Framework	

Executive summary
<p>If the Trust wishes at some future date to reapply for authorisation as an NHS Foundation Trust, it will have to make a fresh application to Monitor and go through the application process again from the beginning. Monitor is the regulator of Foundation Trusts to ensure they are well-led and financially sustainable such that they can deliver quality care.</p> <p>The NHS Trust Development Authority (NHS TDA) provides leadership, support and development for the remaining NHS Trusts. It performance manages NHS trusts and assures itself that trusts have robust arrangements for clinical governance and risk management, with the aim of supporting trusts to develop sustainable, high quality services and thereby achieve Foundation Trust status or a suitable alternative, in line with the Government's objective of ensuring all trusts can become Foundation Trusts.</p> <p>When an NHS trust is not able to achieve its goals, the NHS TDA uses a clear, rules-based escalation process to consider its needs for additional support, further direction or even, in extreme cases, intervention.</p> <p>The NHS TDA is a Special Health Authority established under the NHS Act 2006 and, as such, it is not featured in primary legislation, including the Care Bill. It operates in accordance with the directions issued to it by the Secretary of State and will continue to fulfill its role until all NHS Trusts are authorised as Foundation Trusts.</p> <p>As of July 2013;</p> <ul style="list-style-type: none"> • 15 NHS trusts are with Monitor for consideration as Foundation Trusts. • Applications from 16 Trusts were being actively considered by the NHS TDA, with the majority of these being brought to the NHS TDA Board within the next six months. • NHS TDA is working closely with 14 NHS Trusts that were not considered sustainable in their current form, with a view to identifying sustainable solutions. • There is increasing focus on the 43 Trusts for which achievable pathways and timelines had not yet been identified.

In April 2013, the NHS TDA published a new document, *Delivering High Quality Care for Patients: The Accountability Framework for NHS Trust Boards* which describes how those expectations will be delivered; setting out how the NHS TDA will work with NHS Trusts on a day-to-day basis, how they will assess the progress NHS Trusts are making and how they will provide the development support each organisation needs to meet the challenges that lie ahead.

Recommendation

The Trust Board is recommended to:

- Consider the intrinsic link between both models of *Oversight* and *Approvals* as detailed within the *Delivering High Quality Care for Patients: The Accountability Framework for NHS Trust Boards*
- Consider the implications of potential duplication and the need for robust governance and internal triangulation around the required submissions for both the *Oversight* and *Approvals* models
- Consider the impact on current resources to achieve the required standards of both the *Oversight* and *Approvals* models
- Consider the requirement for further Board discussion on the appropriate timing to set and agree the Foundation Trust trajectory including key milestones

Related Trust objectives	<p>We will continuously improve quality and safety, with services shaped from user and carer experience, audit and research.</p> <p>We will build our reputation as a successful transparent and inclusive organisation, working in partnership to improve health and wellbeing.</p>
Risk and assurance	Risk 133 Failure to achieve Foundation Trust status
Legal implications/ regulatory requirements	The Trust will need to satisfy the requirements of The Trust Development Authority Accountability Framework.
Evidence for the Quality Governance Framework	Quality governance is central to the Trust Development Authority Accountability Framework which includes an enhanced quality assessment process; therefore, all 10 questions outlined in Monitor’s Quality Governance Framework will be applicable.
Presenting Director	Cheryl Davenport, Director of Business Development
Author(s)	Judy McCarthy, Head of Strategic PMO
*Disclaimer: This report is submitted to the Trust Board for amendment or approval as appropriate. It should not be regarded or published as Trust Policy until it is formally agreed at the Board meeting, which the press and public are entitled to attend.	

TRUST BOARD – 26 SEPTEMBER 2013

Trust Development Authority Accountability Framework

Introduction/Background

- 1 At the Trust Board meeting on August 29 the Trust Board formally approved the decision to withdraw from the Foundation Trust application process. As outlined in the *Applying for Foundation Trust status: Guide to Applicants* a withdrawn application cannot be reactivated and continued at a future date.
- 2 If the Trust wishes at some future date to reapply for authorisation as an NHS Foundation Trust, it will have to make a fresh application to Monitor and go through the application process again from the beginning.
- 3 The support of the NHS Trust Development Authority (NHS TDA) for the new application will have to be sought and obtained before a new application can be made to Monitor.
- 4 The application process will need to be repeated, including the holding of elections for governors. However, Monitor will not insist that a trust making a new application recruits, from scratch, members for the purposes of that application. The Trust may count as members the individuals who applied to it when it made its original application, provided they remain eligible to be members at the time of the fresh application.
- 5 However, Monitor will want to be assured that the trust has continued to engage with the membership, in particular, to ascertain that the members recruited for the original application wish to be members for the purposes of future applications. The Trust will have to satisfy Monitor that it has taken steps to ensure that the membership of its public constituency will be representative of those eligible for membership in respect of any fresh application.

Aim

- 6 The aim of the report is to provide an oversight of the processes and procedures involved in the NHS TDA's Accountability Framework, and to support discussion in relation to the intrinsic link of both the *Oversight Model* and *Approvals Model* which constitute two of the three elements of the NHS TDA document, *Delivering High Quality Care for Patients: The Accountability Framework for NHS Trust Boards* (<http://www.ntda.nhs.uk/blog/2013/05/03/delivering-high-quality-care-for-patients-the->

[accountability-framework-2/](#)). The third element of the Accountability Framework is the *Development and Support Model*.

Recommendations

- 7 The Trust Board is recommended to
- Consider the intrinsic link between both models of *Oversight* and *Approvals* as detailed within the *Delivering High Quality Care for Patients: The Accountability Framework for NHS Trust Boards*
 - Consider the implications of potential duplication and the need for robust governance and internal triangulation around the required submissions for both the *Oversight* and *Approvals* models
 - Consider the impact on current resources to achieve the required standards of both the *Oversight* and *Approvals* models
 - Consider the requirement for further Board discussion on the appropriate timing to set and agree the Foundation Trust trajectory including key milestones

Discussion

- 8 In April 2013, the NHS TDA published a new document, *Delivering High Quality Care for Patients: The Accountability Framework for NHS Trust Boards* which describes how those expectations will be delivered; setting out how the NHS TDA will work with NHS Trusts on a day-to-day basis, how they will assess the progress NHS Trusts are making and how they will provide the development support each organisation needs to meet the challenges that lie ahead.
- 9 The policies and processes set out in the *Accountability Framework* seek to take account of the vital lessons of the Mid Staffordshire Public Inquiry, particularly the importance of oversight systems focussing first and foremost on the quality of care, and the need for the Foundation Trust assessment to put quality first.

Understanding the Accountability Framework

- 11 The responsibilities of the NHS TDA are much broader than simply providing a framework for NHS Trusts to prepare to become a Foundation Trust in the future.
- 12 As well as overseeing all aspects of a Trust Board's performance on delivering high quality care – starting with assessing and agreeing their overall plan through to monitoring progress on delivery on a day-to-day basis, the NHS TDA have the powers to support Trusts to become sustainable organisations.

The Oversight Model:

- 13 The metrics that NHS TDA measure against will give a clear understanding of how well an organisation is delivering, the strength of the governance arrangements that sit

beneath their approach and the rigour they apply to delivering a sustainable business plan.

- 14 The *Oversight Model* is designed to align as closely as possible with the broader requirements NHS Trusts will need to meet from commissioners and regulators. The ‘access’ metrics replicate the requirements of the NHS Constitution, while the ‘outcomes’ metrics are aligned with the NHS Outcomes Framework and the Mandate to the NHS Commissioning Board, with some adjustments to ensure measures are relevant to provider organisations.
- 15 The framework also reflects the requirements of the Care Quality Commission (CQC) and the conditions with the Monitor Licence – those on pricing, competition and integration which NHS Trusts are required to meet.
- 16 ‘*Oversight*’ begins with the NHS TDA’s planning guidance. All Trusts are expected to submit a final operating plan at the beginning of the financial year; upon receipt the NHS TDA will assess the level of risk to delivery.
- 17 Every month the NHS TDA monitor in-year delivery against plans and against key indicators aligned to three domains; Quality and Governance, Finance as well as progress towards a Sustainable Organisation form.

Three domains of delivery:

<p>Quality & Governance Domain</p> <ul style="list-style-type: none"> • Indicators consist of those in Monitor’s Risk Assessment Framework, with additional indicators to give appropriate assurance to the NHS TDA • Indicators are grouped into five categories and rated monthly; <ul style="list-style-type: none"> ○ CQC concerns ○ Access ○ Outcomes ○ Third party reports ○ Quality governance • The governance rating of Trusts submitting Foundation Trust applications is assessed using a range of tools (e.g. Monitor Quality Governance Framework). 	<p>Monthly:</p> <ul style="list-style-type: none"> • Mandate standards, including, access, outcomes, patient experience (including Monitor metrics) • CQC and third party reports (including Monitor metrics) • Workforce, including senior executive turnover, monthly indicators of staff satisfaction 	<p>Quarterly:</p> <ul style="list-style-type: none"> • Additional measures of governance and organisational health, e.g. staff survey results, board observations • Governance Risk Rating (GRR) moving to Risk Assurance Framework (RAF) self-certification wef 01.10.13 • Compliance with choice and competition licence terms
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<p>Finance Domain</p> <ul style="list-style-type: none"> • The underpinning business plan that supports the Trust's sustainability is considered as important as the delivery of high quality services. • Trusts will be monitored against indicators in two categories <ul style="list-style-type: none"> ○ In-year financial delivery and ○ Progress towards Foundation Trust status • Assurance will be sought that Cost Improvement Plans have been quality impact assessed and that finance, activity, workforce and quality information have been triangulated to ensure the quality of care provided for patients or the ability for staff to do their job effectively are not adversely affected. 	<p>Monthly:</p> <ul style="list-style-type: none"> • In-year performance against plan • In-year financials • Statutory requirements 	<p>Quarterly:</p> <ul style="list-style-type: none"> • Progress against Monitor Financial Risk Rating/Risk Assurance Framework (RAF) • Compliance with pricing licence terms
<p>Delivering Sustainability Domain</p> <ul style="list-style-type: none"> • Through the planning process, the Trust is expected to agree with the NHS TDA a timetable of actions to deliver a plan to ensure they are sustainable in the future. • Monthly self-reporting will be undertaken covering <ul style="list-style-type: none"> ○ Monitoring progress against the Trust's timelines to sustainable organisational form ○ Compliance against relevant NHS Trust Monitor licence conditions ○ Self-assessment against Board statements 	<p>Monthly:</p> <ul style="list-style-type: none"> • Progress against milestones in strategic plan, towards Foundation Trust status or other organisational form 	

- 18 Where delivery is off plan, the NHS TDA will need to understand the actions the Board is taking to recover, and agreements reached with commissioners.
- 19 The NHS TDA holds a 'single conversation' with the Trust encompassing quality, finance and progress towards a sustainable organisation; known as the 'Integrated Delivery Meeting' (IDM). These meetings are held monthly with the Executive Team.
- 20 The Integrated Delivery Meeting is supported by a range of day-to-day interactions. In determining whether intervention is required, the NHS TDA will aim to make an informed judgement based on multiple sources of intelligence. Triggers for escalation will include;
 - a) Current performance against the Quality and Governance, Finance and Delivering Sustainability domains, and trends in the data in previous months
 - b) As assessment of the capacity and capability of the organisation to delivery recovery plans
 - c) 'Soft' intelligence based on routine interactions with the Trust and with partner organisations.

The Approvals Model:

- 21 The NHS TDA's role is to ensure, on behalf of the Secretary of State, that aspirant Foundation Trusts are ready to proceed for assessment by Monitor. As such, the processes outlined below replace those previously undertaken by both Strategic Health Authorities and the Department of Health.
- 22 The *Approvals Model* guidance should be read in conjunction with *Applying for Foundation Trust status: Guide to Applicants* which sets out in detail the NHS Foundation Trust application process. It is anticipated that refreshed guidance will be published by Monitor during the autumn period of 2013.
- 23 Becoming a Foundation Trust can, and should, only occur when an NHS Trust Board can clearly demonstrate that they are able to provide high quality care for patients and have the right business plan in place to ensure they can continue well into the future. The *Approvals Model* sets out how the NHS TDA will support NHS Trusts to develop strong Foundation Trust applications and approve them to move forward for assessment by Monitor.
- 24 The NHS TDA sets out specific steps they will take to gain assurance about the quality, safety and sustainability of applications aligned to three pillars of delivery – 'being Monitor ready'.

‘Being Monitor ready’:

Quality & Performance

- **Assurance from CQC**
 - Registered & no worse than moderate concerns impacting patients
 - No responsive review
 - No investigations including mortality outliers
- **Quality Governance**
 - Quality governance score no worse than 3.5
- **Acceptable performance on targets & standards**
 - No worse than Amber/Green score under the *Compliance Framework*
- **No concerns from Trust Development Authority**

Focus on Delivery

- **Corporate Governance**
 - Self-cert on organisational capacity
 - Capability & experience to delivery strategy
 - Skill set of Non-Executive Director’s
 - Management structure to delivery strategy including risk & performance management
- **Legal Compliance**
 - Compliant constitution
 - Governance arrangements meet the requirement of the act

Sustainability

- **Finances short-term**
 - Working capital opinion from independent accountant
 - Financial risk rating of at least 3 in first year as a Foundation Trust
- **Financial Governance**
 - Independent opinion on financial reporting procedures
- **Finances longer term**
 - Review and challenge of 5 year financial projections covering realism of income & cost assumptions
 - Triangulate income assumptions with commissioners
 - Challenge of Cost Improvement Plans including impact on quality
- **Requirement to show a sustainable I&E under a reasonable set of downside risks & reasonable cash position**

25 The *Approvals Model* consists of three key stages.

Stage 1: Diagnosis and due diligence

This stage involves both the Trust and the NHS TDA establishing a baseline against which the Trust needs to build a high quality, safe and sustainable Foundation Trust application.

Stage 1 culminates in the decision agreed by the applicant and the NHS TDA, to proceed to public consultation on the application.

What the Trust will do	What the NHS TDA will do
<ul style="list-style-type: none"> • Undertake self-assessment and begin production of key documents in line with the <i>Applying for NHS foundation Trust Status: Guide to Applicants</i> • Schedules initial external assessments comprising <ul style="list-style-type: none"> ○ Third party review of Trust self- 	<ul style="list-style-type: none"> • Conduct introductory meetings with Chair and CEO and FT Director. This will include the NHS TDA Medical Director/Nursing Director making contact with the trust Medical Director/Nursing Director and initiating involvement of the NHS TDA’s clinical Quality Director in each region,

<p>assessment of Board Governance Assurance Framework (BGAF)</p> <ul style="list-style-type: none"> ○ Independent third party review by qualified and experienced professionals of Trust self-assessment against Monitor Quality Governance Assessment Framework requirements 	<p>working closely with the Delivery and Development teams</p> <ul style="list-style-type: none"> • The NHS TDA Delivery and Development and Quality teams to develop detailed trust quality and delivery profile which takes into account CQC and other external reports • The NHS TDA Portfolio and quality team will conduct and document <ul style="list-style-type: none"> ○ An initial Board interview and initial Board observation ○ Interviews with commissioner(s) and other purchasing organisation including Local Authorities ○ Interviews with Health Education England (HEE), NHS England, Local Education Training Board (LETB), Clinical Commissioning Groups (CCGs), the Care Quality Commission (CQC) and where applicable, the Local Supervising Authority Midwifery Officer • Set and agree the Foundation Trust trajectory including key milestones • The NHS TDA clinical quality team will conduct an internal review of quality information and associated intelligence which will form the focus for a rapid responsive review • Sign off documents and supporting strategy for public consultation on proposed FT application.
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Stage 2: Development and application

This stage involves the submission of key documents to the NHS TDA and the testing and scrutiny of trust plans and personnel. It begins with the ‘Readiness Review’ and following that review leads to the identification of further development needs and additional work.

Stage 2 culminates in the decision following the NHS TDA Readiness Review to proceed to full and final assessment by the TDA Board.

What the Trust will do	What the NHS TDA will do
<ul style="list-style-type: none"> • Make a formal submission of key FT application documents to the NHS TDA to inform FT readiness review meeting • Prepare for a formal FT Readiness Review meeting with the NHS TDA • Following the Readiness Review, develop further iterations of key documents including their clinical and quality strategy, business plan and financial model in response to NHS TDA feedback • Update on the delivery of outstanding action 	<ul style="list-style-type: none"> • Conduct an internal NHS TDA review of progress against quality, delivery, sustainability plans (including soliciting external views, eg. to incorporate Quality Surveillance Group views) • Complete a clinical review of trust through application of the National Quality Board rapid responsive review methodology • Assess the trust’s internal governance. NHS TDA portfolio teams will observe Board and

<p>plans on quality, safety, service performance and sustainability</p> <ul style="list-style-type: none"> • Deliver FT action plans by the Trust with updates to the NHS TDA and on-going updates of self-assessment and self-certifications 	<p>Trust Board sub-committees including Finance and Quality sub-committees</p> <ul style="list-style-type: none"> • Undertake a readiness review meeting with the Trust Board. The meeting will include the Director of Delivery and Development, two Portfolio Directors (one from across the NHS TDA), the clinical Quality Director and Business Support Director • Feedback on progress. The NHS TDA will formally write to the Trust and confirm the outcome of the readiness review, e.g. the NHS TDA agrees to the commencement of Due Diligence stage 2. Progress will be monitored through regular oversight meetings • Identify additional development needs and support
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Stage 3: Assurance and Approval

This stage involves the full and final submission of documents to the NHS TDA and involves assessment by the NHS TDA Board that the Trust is ready to undergo a detailed Monitor assessment.

Stage 3 culminates in a decision by the NHS TDA Board on whether the applicant is ready to proceed to assessment by Monitor.

What the Trust will do	What the NHS TDA will do
<ul style="list-style-type: none"> • Make board approved final submission of documents to the NHS TDA and involves assessment by the NHS TDA Board that the Trust is ready to undergo a detailed Monitor assessment • Respond to queries from the NHS TDA on any areas of clarification or where further assurance is sought. • Trust to address any outstanding issues • Relevant NHS TDA Director of Delivery and Development, Medical Director, Nurse Director and finance Director present the application to the NHS TDA Executive for their support and sign off 	<ul style="list-style-type: none"> • NHS TDA Portfolio team review of final assurance documents and production of draft Board to Board pack and recommendations • The NHS TDA quality team convenes a quality review meeting with CQC, HEE, NHS England, CCGs and other relevant external parties • Clinical visit by the NHS TDA Medical Director / Nursing Director where quality profile is subject to further assessment • Peer review by a second NHS TDA team of the submissions, draft Board to Board pack and recommendations • Board to Board meeting between the NHS TDA and NHS Trust

Next Steps

- 26 As outlined in the *Oversight Model* above (page 7, paragraph 18: “ *Where delivery is off plan, the NHS TDA will need to understand the actions the Board is taking to recover, and agreements reached with commissioners.*”). Following the recent concerns raised by the QCQ; to support the need to collectively share intelligence and support the Trust to become a sustainable quality organisation, the TDA will lead an ‘Assurance Oversight

Group'. The Oversight Group is an advisory body and will achieve assurance directly from the Trust Board. The Trust remains accountable to the NHS TDA. An inaugural meeting is scheduled for 11 September 2013, where draft Terms of Reference (Appendix A) and the next steps will be discussed and agreed.

- 27 In relation to the *Approvals Model* an informal telephone discussion has been arranged with the NHS TDA on 17 September 2013 to get a feel for the process to support any early planning that may be required once senior colleagues have had opportunity to agree the way forwards.

Conclusion

- 28 Awareness amongst senior colleagues has been raised as to the intrinsic link of both the *Oversight* and *Approvals* models. Monthly Integrated Delivery Meetings (IDM) meetings are held with the NHS TDA covering the key requirements of the *Oversight Model*. Following future Board discussion and agreement on the appropriate timing to set and agree the Foundation Trust trajectory including key milestones, the Trust will commence with the requirements of the *Approvals Model*.
- 29 The Inaugural meeting of the Assurance Oversight Group will be held on 11 September 2013, with further updates being provided to the Board in due course.

Appendix A: Draft Terms of Reference – TDA Assurance Oversight Group

**ASSURANCE OVERSIGHT GROUP FOR
LEICESTERSHIRE PARTNERSHIP NHS TRUST
TERMS OF REFERENCE**

1. PURPOSE

To collectively share intelligence and support the Trust to ensure they become a sustainable quality organisation.

The Oversight Group is an advisory body and will achieve assurance directly from the Trust Board. The Trust remains accountable to the TDA. The roles of each organisation are set out in the table below:

NHS Trust Development Authority	<ul style="list-style-type: none"> • To act in accordance with the Accountability Framework and relevant policy and legislation. • To oversee the assessment of the Trust in its totality • To oversee safety and delivery. • To oversee board and leadership arrangements. • To Chair the Group. • To engage relevant stakeholders. • To work with all parties to ensure effective oversight.
Healthwatch	<ul style="list-style-type: none"> • To update the Oversight Group in respect to the views of service users • To work with all parties to ensure effective oversight.
CCG's	<ul style="list-style-type: none"> • To ensure that services commissioned by the CCG's from the Trust meet the quality and other standards laid out in the contract. • To update and inform the oversight Group in respect to the delivery of the Trust. • To inform the Oversight Group in respect to risks and mitigations and ensure pace takes account of service quality and delivery. • To lead commissioner engagement in respect to Trust issues and outcomes. • To work with all parties to ensure effective oversight.
Local Authority	<ul style="list-style-type: none"> • To update the Oversight Group in respect to quality and safety concerns • To work with all parties to ensure effective oversight.
Leicestershire Partnership NHS Trust	<ul style="list-style-type: none"> • To ensure quality and safety of services are improved and maintained • review and improve the Mental Health Services Pathway • To review ward to board governance • To embed its staff engagement programme across the Trust. • To flag risks and mitigations. • To work with all parties to ensure effective oversight.
NHS England (Leicestershire & Lincolnshire)	<ul style="list-style-type: none"> • Responsible for holding the CCGs to account. • To lead commissioner engagement in respect to NHS England and relevant Area Teams.

Trust Development Authority

	<ul style="list-style-type: none"> • To engage as a direct commissioner of services and to inform the oversight group on procurement and other relevant issues. • To inform the Oversight Group in respect to risks and mitigations. • To work with all parties to ensure effective oversight.
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In addition it will be the responsibility of each member representative to ensure that information and reporting on progress and outcomes is disseminated to appropriate individuals within their own organisation and back into the Oversight Group. All parties will ensure relevant wider stakeholder engagement is in place.

2. Key Objectives

The key objectives of the Oversight Group shall be collectively:-

- Fully understand the Trust's risks
- To manage the accountability of the Trust to its agreed action plan
- To coordinate and organise additional support to the trust in terms of capacity and delivery of the agreed action plan
- To be responsible for signing off changes to the action plan
- To monitor agreed Quality KPI's for the Adult Mental Health Services.

For the TDA to fulfil it's role as set out in the accountability framework http://www.ntda.nhs.uk/wp-content/uploads/2012/04/framework_050413_web.pdf

3. Risk and Issue Management to ensure:

- The identification assessment and prioritization of risks and mitigating actions.
- The identification and management of the actions recorded in the action log to ensure all agreed actions are undertaken in a timely manner.
- The process is managed in line with the Accountability Framework.

4. Membership

Membership for the Oversight Group is as follows:

Healthwatch	Responsible for representing the views of service users Representative:
CCG's	Commissioner of majority of services. Representatives:
Local Authority	Responsible for representing the views of the local authority Representatives:
The Trust	Legal body accountable for all current Trust services & staff. Representatives:
NHS Trust Development Authority (NTDA)	Responsible for holding the Trust to as set out in the Accountability Framework. Representatives:
NHS England (Leicestershire & Lincolnshire)	Responsible for holding the CCG's to account and as direct commissioner of a range of Trust services (e.g.). Representative:

5. Authority and Decision Making

Authority and decision making in relation to the organisational impact and form will be the responsibility of the TDA. Assurance in relation to organisational performance will be in line with the responsibilities and processes of each accountable organisation.

6. Chairmanship

The Oversight Group will be chaired by Jeffery Worrall (Portfolio Director, TDA Programme SRO).

7. Governance and Reporting Arrangements

Jeffrey Worrall shall act as Senior Responsible Owner for this programme and is responsible for the delivery of the programme objectives.

8. Communication Arrangements

The TDA will lead communication at key points. The Oversight Group will inform and support this process. The Trust will remain responsible for internal communications and engagement with the stakeholder group on the contents prior to publication.

9. Quorum

Responsibility shall be with each organisation to ensure appropriate representation at each meeting and appropriate alternate to attend in place of a member who is unavailable at each meeting. A quorum is not required.

9. Meeting Frequency

The Oversight Group shall meet every **TBC** months for **TBC** hours.

Schedule of meetings

Date	Time	Location
11 th September 2013	17.30hrs	Meeting Room 3 1 st Floor West Fosse House Leicester (car parking arranged for all attendees)
30 th September 2013	10.00hrs	TBC

10. Administration

Administration will be managed by the TDA with the intention that:

- The risk register and action log will be reviewed at each Oversight meeting.
- Notes and actions from meetings shall be circulated to members one week after the meeting has taken place via email.
- Meeting papers shall be circulated to members one week prior to each scheduled meeting via email.