

THE CLATTERBRIDGE CANCER CENTRE NHS FOUNDATION TRUST
CORPORATE GOVERNANCE AND COMPLIANCE SUB COMMITTEE CYCLE OF BUSINESS

| Activity Number | Item | Item Detail | Lead | April/May | September | January | March |
|-----------------|--|---|-------|-------------------|-----------|---------|-------|
| CGC01 | Terms of reference (ToR) and cycle of business (CoB) | Review the terms of reference and the cycle of business for the Corporate Governance and Compliance Sub-Committee and recommend changes to the Audit Committee | Chair | X | | | |
| | | Receive a report on changes and the annual review of effectiveness of terms of reference including review of meeting attendance by members for the Sub-committee | | | | | |
| CGC02 | Corporate Governance Structure | Review the effectiveness and efficiency of the corporate governance structure | | At least annually | | | |
| CGC03 | Compliance with the NHSI Licence and changes to or new regulatory requirements | Horizon scan for new or changes to the regulatory environment and receive assurance against compliance or plans to effect compliance and relevant timescales. Monitor implementation of plans | | X | | | |

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| CGC04 | Trust Constitution | Consider proposed changes to the Trust's Constitution prior to recommendation to the Board of Directors and Council of Governors | | As Required | | | |
| CGC05 | Lessons learnt monitoring | Approve the process for recording and monitoring Trust action, improvement and implementation plans | | X | | | |
| | | Receive assurance against the monitoring of Trust action, improvement and implementation plans | | X | X | X | X |

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| CGC06 | Information Governance | IG Toolkit Report <ul style="list-style-type: none"> • Freedom of Information (FOI) Requests by exception / Progress of changes to FOI Publication Scheme • Information Governance (IG) Assurance compliance or improvement Plan • Information Commissioner's Office (ICO) audit outcomes and any associated action plans • Subject Access Requests (SAR) and Data Protection Act (DPA) Requests by exception | | X | X | X | X |
| CGC07 | Year-end reporting requirements | Review the guidance for the year-end and annual reporting requirements (including the Quality Account) and receive assurance that appropriate project plans are in place to ensure timely and accurate development and delivery of the documents | | | | X | X |

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| | | Review the Annual Report, the Annual Governance Statement, the Corporate Governance Statement and compliance with the NHSI Code of Governance prior to submission to the Audit Committee. | | | | | X |
| | | Approve the process for the collation, validation and submission of the Quarterly NHSI Declarations under the Single Oversight Framework | | | | | X |
| | | Review and recommend a year-end Assurance Report to the Audit Committee on the detailed analysis around the compliance with the NHSI Code of Governance, Standards of Business Conduct procedure and other Corporate Registers. | | X | | | |

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| CGC08 | Decision Rights Framework (DRF) | Receive and review proposed changes to the Trust's DRF in line with the change control process | | As required but reviewed at least every three years | | | |
| CGC09 | Legal Framework | Monitor compliance against the Legal Framework and consider the impact of liabilities against Trust services and policies | | | X | X | X |
| CGC10 | Caldicott Guardian | Receive assurance against the advice being sought from the Caldicott Guardian | | X | X | X | X |
| | | Receive the Caldicott Guardian Annual Report prior to reporting to the Board of Directors | | | X | | |
| CGC11 | Risk management | Review risks allocated to the sub-committee and receive assurance in relation to the mitigation and management of those risks | | X | X | X | X |

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| | | Monitor the action being taken to mitigate against risks highlighted on the Risk Register and the BAF. Consider any impact on risk scoring, including moderation of risk scores where necessary. | | X | X | X | X |
| | | Receive a report on the profiling of risks under each BAF and or Risk Register and consider the aggregation of risk and any impact on scoring that this gives rise to. | | X | X | X | X |
| CGC12 | Continuous improvement | Review the outcomes of relevant investigations, audits and reports, including those that highlight good practice, and ensure that appropriate action plans are in place to implement the learning from such reports to improve systems, processes and practice. Monitor the implementation of relevant plans and report outcomes to the Audit Committee by exception | | | | | |

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| CGC13 | Sub-Committee reporting | Identify any topics/issues that members wish to raise/escalate with/to the Audit Committee or with other Committees or Sub-committees as appropriate in the Chairs Report | | X | X | X | X |