



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

# Lead NCHD Handbook 2019/2020



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The Lead NCHD Programme is a joint collaboration between  
HSE - National Doctors Training and Planning (NDTP) and HSE's Quality Improvement  
Division

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## 1. Welcome and Thank You for Taking on the Role

Dear Lead NCHD

Congratulations on your new role as Lead NCHD. This role is one of a range of initiatives that has been taken nationally to improve NCHD recruitment and retention in the Irish public health system. NCHDs form an essential component of the Irish public healthcare system and offer a highly valuable insight into the management and leadership of our Hospitals. Over the tenure of your appointment you will provide a formal link at management level between the NCHD cohort and management structures on your site.

The role is a recommendation from the MacCraith Report, and is critical to two way communications between NCHDs and the management structures in hospitals/mental health services around the country, which benefits NCHDs and patients.

The programme is jointly supported by HSE National Doctors Training and Planning (NDTP) and the HSE's Quality Improvement Division (QID). We hope you find this role rewarding and fulfilling and we look forward to working with you over the coming months.



Prof Frank Murray  
Director  
HSE - National Doctors Training & Planning

Dr Philip Crowley  
National Director  
HSE - Quality Improvement Division

## 2. Welcome from Clinical Site CEO / General Manager/ Head of Mental Health

*Sample text/Template letter that Clinical sites may wish to use as a welcome to the role from their CEO/General Manager. Can be edited as deemed necessary by the site.*

TEMPLATE LETTER:

Dear Lead NCHD

As CEO/General Manager/Chief Officer it gives me great pleasure to welcome you to **<insert name of clinical site>**. I wish you every success in your position as Lead NCHD. This role is fundamental in providing an important link between your NCHD colleagues and Hospital/Mental Health Service Management.

Your decision to take on this role is an important one in terms of your career development and management experience. I do hope you enjoy your time as Lead NCHD and find it productive and beneficial to you and your colleagues. I can assure you of my ongoing support to this important initiative and look forward to working with you on key projects over the coming months.

**<insert name>**

Chief Executive Officer / General Manager / Chief Officer

**<insert site name>**

### **3. Lead NCHD Job Description**

#### **Background and Context**

The Lead NCHD initiative is one of a range of initiatives taken at national level to improve NCHD recruitment and retention in the Irish public health system. Its introduction was welcomed by the Strategic Review of Medical Training and Career Structure ('MacCraith Report') which was established in 2013 by the Minister for Health and chaired by Professor Brian MacCraith to address the challenge of doctor recruitment and retention. The 'MacCraith Report' recommended that structured communication arrangements should be established for trainees, including engaging trainees in solutions for patient care. The report recognised the Lead NCHD initiative as having the potential to assist with these communication arrangements.

The Lead NCHD initiative is a response to the historic deficit in NCHD representation at executive level in Irish hospitals / mental health services and is a means of contributing to the improvement of NCHD welfare and working conditions. This initiative is implemented by HSE – National Doctors Training & Planning (NDTP) and the HSE's Quality Improvement Division and Clinical Director Programme. Funding for the initiative is provided by HSE – NDTP. The initiative has been welcomed by the Department of Health, the Medical Council, the Joint HSE/Forum of Irish Postgraduate Medical Training Bodies, the Clinical Director/Clinical Programme Steering Group, the Forum Trainee Subcommittee and the Irish Medical Organisation (IMO).

The initiative was piloted by the HSE in January 2014 in five hospitals. Following a review of the pilot programme the Lead NCHD Initiative was rolled out nationally in 2015. Today, there are lead NCHDs across 32 acute hospitals, and the Community Health Organisations (CHOs), with approximately 70 leads in total. Over 250 NCHDs have held the position of Lead NCHD within acute hospitals and CHOs to date. The Lead NCHD is not a specialty specific role (however CHOs currently appoint mental health and GP leads) and does not serve as a direct link to training requirements or training specific needs.

#### **National Level Structures to Support the Lead NCHD Initiative**

The HSE supports the Lead NCHD initiative at national level, through both National Doctors Training & Planning and the Clinical Director Programme in the Quality Improvement Division. Each year two workshops are organised for the cohort of Lead NCHDs to support them in taking on the role and to provide an opportunity for the Lead NCHDs to meet each other. In 2015 a memo issued from National HR regarding development and support of the Lead NCHD role which includes provision for 4 hours per week protected time. Lead NCHDs are also invited to attend Clinical Director Workshops that run throughout the year. The HSE aims to support the Lead NCHDs in developing consistency in the application of the role across the various clinical sites and to facilitate continuity as the role passes from one NCHD to another. In an effort to do this a Lead NCHD Handbook is being developed that will be available to each new Lead NCHD. The handbook contains a mix of both national and site specific information to assist the Lead NCHD getting up and running in their new role. As the initiative continues to evolve the HSE will seek ways to strengthen and embed the role further in conjunction with the Lead NCHDs and the clinical sites.

#### **National Lead NCHD**

The appointment by the HSE of a National Lead NCHD since July 2016 is an additional support for the Lead NCHD cohort each year. This fellowship is a full time commitment for an NCHD for a 12-month period, encompassing both working in NDTP and undertaking a research project /study as part of a

postgraduate/masters programme. The National Lead for the 2019/20 training year is Dr Carol Norton who can be contacted at [nl.nchd@hse.ie](mailto:nl.nchd@hse.ie).

## Reporting Relationship at Hospital / Mental Health Service Level

The Lead NCHD will report to the Lead (Executive<sup>1</sup>) Clinical Director/nominated Clinical Director in their hospital/mental health service. The Lead (Executive) Clinical Director/nominated Clinical Director and the Lead NCHD should meet regularly at agreed intervals e.g. fortnightly to discuss matters of mutual interest, progress joint initiatives and to ensure that the Lead NCHD is aware, and has an opportunity to input into issues being discussed at the clinical site that are of relevance to and/or affect NCHDs.

## Key Working Relationships

In the execution of the role, the Lead NCHD will, as required, be supported by and engage with:

- NCHD Committee
- CEO / General Manager / Chief Officer
- Chief Operating Officer / Head of Mental Health
- Clinical Directors/ECDs
- HR Director
- Medical Manpower Manager
- Hospital / Mental Health Service Executive Management Team
- Nursing Representatives
- Nursing Management
- Health and Social Care Professional Representatives
- Other Senior Management

## Purpose of the Role

The role of the Lead NCHD is to provide a formal link at management level between the relevant NCHD cohort, NCHD Committee and the clinical directorate/hospital/mental health service management structure, thereby enabling a structured, continuous two-way flow of engagement and communication between management and NCHDs. The Lead NCHD role should help to integrate NCHDs within their clinical site and improve the employment experience of NCHDs. The Lead NCHD role should facilitate enhanced communication between NCHDs and hospital/mental health service management in a way that provides NCHDs, through the Lead NCHD with an opportunity to participate in discussions and decision making regarding; matters that affect NCHDs, the day-to-day running of hospitals/mental health services, and solutions/improvements to enhance patient care.

## Work Programme

Following their appointment, the Lead NCHD should meet with the Hospital CEO / General Manager / Head of Mental Health and the Lead (Executive) Clinical Director / nominated Clinical Director to agree the work programme for their tenure as Lead NCHD. This may include a number of objective(s) to be achieved, agreement as to how the objectives will be progressed and provide a means of tracking progress towards their achievement which can be reviewed at intervals as agreed.

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<sup>1</sup> In mental health services the role is titled 'Executive Clinical Director'

## Principal Duties & Responsibilities

The Lead NCHD role encompasses the following key elements:

- When interacting with hospital management act on behalf of all NCHDs, both training and non-training, within the clinical directorate structure,  
**(note: this is not an industrial relations role - industrial relations matters will continue to be progressed via existing mechanisms);**
- Organise regular meetings with the Clinical Director(s) and Medical Manpower Manager to discuss issues pertinent to NCHDs including; NCHD welfare, training provision and access, EWTD, any executive decisions affecting NCHDs and individual/group grievances;
- Regularly attend the hospital executive management team meetings and participate in discussions and decision making regarding; the day-to-day running of the hospital, solutions/improvements to enhance patient care and matters of importance to NCHDs;
- Attend or nominate other NCHDs to attend key meetings and hospital committees such as;
  - Hospital Executive
  - Medical Board/Medical Executive
  - Clinical Directors Meeting
  - Physicians Sub-Group / Cogwheel
  - Surgical Sub-Group / Cogwheel
  - EWTD
  - Bed Management
  - Infection Prevention and Control
  - Drugs and Therapeutics
  - Audit Committee
  - Quality and Patient Safety
  - Other meetings as appropriate such as: Quality, Risk, HIQA
- Where appropriate attend hospital inspections such as accreditation, college, Medical Council inspections;
- Chair the NCHD Committee;
- Work in conjunction with NCHDs and the NCHD Committee at all times;
- Consider nomination of directorate specific NCHDs if these are currently not nominated and meet with these regularly for the purposes of directorate integration and improved flow of information;
- Meet NCHDs within their hospital or directorate in a regular and structured fashion to inform and be informed of all issues pertinent to NCHDs;
- In conjunction with NCHDs contribute to the organisation and implementation of EWTD-compliant rotas;
- Advise on workloads and appropriate allocation of NCHD posts and tasks;
- Liaise with the CEO, Chief Operating Officer, HR Director, Medical Manpower Manager and other Senior Management as required;
- Liaise with relevant medical departments and with individual consultants as required; and
- Liaise with health and social care professional representatives and nursing management representatives, on any matters of joint interest, including transfer of elements of NCHD workload, and support for NCHDs on-call.

## Requirements of Lead NCHD to Engage with National Initiatives

Each Lead NCHD is required to:

**New for 2019:** Undertake a Certificate in Management for Healthcare Professionals (NFQ Level 9). This course will be delivered predominately online with a minimal number of on-site days with fellow Leads. More course details can be obtained from the course flyer which has been circulated to local Medical Manpower Units.

Contribute to the wider Lead NCHD initiative, through participation in the National Lead NCHD Committee and attendance at the National Lead NCHD workshops;

- Provide feedback as requested by the HSE;
- Interact and engage with the National Lead NCHD/NDTP Fellow;
- Promote continuity of the Lead NCHD role on their site by facilitating a smooth transition and handover to the incoming Lead NCHD.

### Eligibility to Compete

- Be employed as an SHO, Registrar, Specialist Registrar or Senior Registrar, with an NCHD contract and an appropriate clinical commitment in the relevant hospital/mental health service for the period 2019/2020;
- If not already a member of the NCHD Committee, be appointed automatically to same once appointed to the Lead NCHD role. The Lead NCHD should Chair the NCHD Committee;
- Demonstrate a successful track record in engaging and contributing positively to change programmes;
- Demonstrate a commitment to participation in and delivery of training;
- Experience of engaging with and working with a range of stakeholders including NCHD colleagues; and
- Possess the requisite knowledge, skills and attributes to develop this new role within the health service and the capacity to discharge the principle duties and responsibilities associated with the role.

### Lead NCHD Micro funding

Micro funding of up to €500 will be available to all leads for NCHDs initiatives or quality improvement initiatives at site level.

Applications can be sent to [nl.nchd@hse.ie](mailto:nl.nchd@hse.ie).

## 4. Lead NCHD Networking

The HSE is working to support all Lead NCHDs around the country and recognises the value of Lead NCHDs networking with each other. To support this, the HSE organises two workshops for each cohort of Lead NCHDs. The workshops provide a valuable opportunity for Lead NCHDs to meet each other, and to share experiences and learning from across their clinical sites. All Lead NCHDs should make every effort to attend these workshops.

Dates for the workshops will be communicated to each cohort of Lead NCHDs.

Once Lead NCHDs are appointed the HSE will circulate the contacts lists for the group. There is also a WhatsApp group that Lead NCHDs can choose to join if they wish. If you would like to join the WhatsApp group please let us know.

We would encourage Lead NCHDs to make contact with each other and to network and communicate regularly. Please feel free to contact us in NDTP or QID if you have suggestions about this or if we can assist you.

Yvonne McGowan  
Senior Engagement and Medical Workforce planning Officer  
National Doctors Training & Planning  
Yvonne.mcgowan@hse.ie

Dr Carol Norton  
National Lead NCHD  
National Doctors Training & Planning  
nl.nchd@hse.ie

## 5. Lead NCHD Awards

In 2016 NDTP and QID introduced the Lead NCHD Awards. The purpose of these awards is to acknowledge the work undertaken by Lead NCHDs during the course of their tenure on their clinical site.

Lead NCHDs will be provided with details of the awards, the application process, guidelines for entry and closing dates on an annual basis.

## **6. Link between Clinical Director Programme and Lead NCHD Initiative**

The Clinical Director (CD) Programme sits with the Quality Improvement Division of the HSE and shares governance of the Lead NCHD programme with National Doctors Training & Planning.

The CD programme is managed by a programme manager and by a Clinical Lead and aims to promote and develop the clinical director model nationally through education, leadership capacity building and support.

Through fostering links between this programme and the Lead NCHD programme, it is hoped that NCHDs in leadership roles will be better integrated with a network of senior clinical leaders and benefit from master classes and workshops designed to enhance and develop clinical leadership for the future.

### **Background:**

Since the establishment of the Consultant Contract in 2008 Clinical Directors have made significant contributions to the development of the health services. Clinical Directors were appointed to each of the acute hospitals and Executive Clinical Directors (ECDs) were appointed to the mental health services.

The definition of the Clinical Director role is underpinned by the Clinical Director contract following extensive negotiations and agreement.

The purpose of (executive) clinical directorates is to achieve the best clinical outcomes and experience for patients within the available resources. Central to their viability is the involvement of clinicians in leadership positions within the directorates, working closely with other key staff including management, nursing and health and social care professionals in a collaborative manner. The introduction of the (executive) clinical directorate model incorporating Lead authority for the clinical director is one of the most significant changes to occur in the Irish Healthcare Service for many years and represents an unprecedented opportunity for change through clinical leadership.

The issues relating to the (Executive) Clinical Director and Lead NCHD programmes are discussed quarterly at the Clinical Director Steering Group meeting, chaired by the Director General of the HSE and the President of the Forum of Irish Post Graduate Bodies. The National Lead for the clinical director programme and the National Lead NCHD are members of that steering group.

## 7. Local Induction Programme for Lead NCHD

*MMM<sup>2</sup> at a local level to provide details here.*

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<sup>2</sup> CHO HR Manager in Mental Health Services

## 8. Update / Handover from Outgoing Lead NCHD

*To be complete by current Lead NCHD*

### Projects / Initiatives

*Outline details of projects and initiatives that have been completed and are on-going and in particular successful initiatives to be continued.*

Project Title	Project Objectives	Project Lead	Key Stakeholders / Contacts	Current Status (complete / in progress) (including details of paperwork/ file storage etc...)

### Meetings/Committees attended by Lead NCHD

Meeting/Committee Title	Frequency / Dates if available	Meeting / Committee Chair/Lead Contact Details	Summary of role of Lead NCHD at this meeting/on this committee

### Any other details if applicable

*Provide details on particular challenges / important hot topics on the particular site and any other details you may feel will be useful to the incoming Lead NCHD.*

## 9. Template for Introductory Email for Site to use to Introduce the Lead NCHD

*It is envisaged that the Medical Manpower Manager/ Head of Mental Health would notify key stakeholders on their sites of the newly appointed Lead NCHD on an annual basis. The following email template may be of assistance for this:*

Dear colleagues

The role of the Lead NCHD is an initiative taken nationally to improve NCHD recruitment and retention in the Irish public health system. NCHDs form an essential component of the Irish public healthcare system and this post provides for a formal link at management level between the NCHD cohort and management structures on site.

**<Insert Lead NCHD name>** has taken up the role of Lead NCHD from **<insert date>**.

Contact details are as follows:

Email:

Telephone:

Reporting to **<insert name of Lead (Executive) Clinical Director>**, Lead (Executive) Clinical Director/nominated Clinical Director, it is envisaged that the Lead NCHD will represent all NCHDs within the (executive) clinical directorate structure, in their interaction with the (executive) clinical directorate structure and hospital / mental health service management.

I look forward to **<Lead NCHDs name>**'s participation in various management meetings and on committees to discuss matters pertinent to **his/her** NCHD colleagues.

Please join me in welcoming **<Lead NCHD name>** and I have assured **him/her** of the Hospital's continued support over the course of **his/her** tenure in this role.

Yours sincerely

**<Insert name of Medical Manpower manager>/ Head of Mental Health**  
Medical Manpower Manager

## 10. Clinical Site Organisational Structure

*Local HOMH/ECD<sup>3</sup> to insert copy of organisational chart*

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<sup>3</sup> In Mental Health Services include Section 38 organisations with NCHDs

## 11. Contact Information for Clinical Site Management Team

*Local MMM/HOMH to insert contact information for clinical site management team*

Job Title	Name	Telephone	Email
Medical Manpower Manager / HOMH			
Medical HR Team			
CEO/General Manager/Chief Officer			
Lead (Executive) <sup>1</sup> Clinical Director			
Other Clinical Directors			
Clinical Directorate Team (ADON/Business Manager)			
(Area Director of Nursing			
Chief Operations Officer			
Finance Director			
HR Director			
ICT Director			
Clinical Services Manager			
Support Services Manager			
Other relevant members of Hospital management team			
Lead NCHDs in local acute hospital/s <sup>3</sup>			
Section 38 Agencies			
1. Name:			
CEO			
Clinical Director			
2. Name:			
CEO			
Clinical Director			

<sup>1</sup> Head of Mental Health

<sup>2</sup> Applies to those Leads in CHOs.

## **12. CCHD Committee**

*To be completed locally by Hospital / Mental Health Service and outgoing Lead NCHD:*

*Details of names & contact details of NCHD committee*

*Meeting dates & Venues*

*Copies of previous agendas & minutes.*

### 13. Dates & Venues of Committee Meetings for Lead NCHD

*To be completed locally by Hospital / outgoing Lead NCHD:*

*Examples of meetings may include the following:*

- *Hospital/Mental Health Service Executive*
- *Medical Board/Medical Executive*
- *Clinical Directors Meeting*
- *Physicians Sub-Group / Cogwheel*
- *Surgical Sub-Group / Cogwheel*
- *EWTD*
- *Bed Management*
- *Infection Prevention and Control*
- *Drugs and Therapeutics*
- *Audit Committee*
- *Quality and Patient Safety*
- *Other meetings as appropriate such as: Quality, Risk, HIQA*
- *Drugs and Therapeutics*
- *Quality & Patient Safety*
- *Audit Committee*
- *Meetings re: Quality, Risk, HIQA*
- *Approved Centre Policy Committee*
- *Lead NCHD - MHS*
- *Lead NCHD - Acute Hospitals*
- *Any other relevant committees.*

## 14. IT / Email Access

To be completed locally by Hospital / Mental Health Service and previous Lead NCHD

Details of username & password for Lead NCHD email account

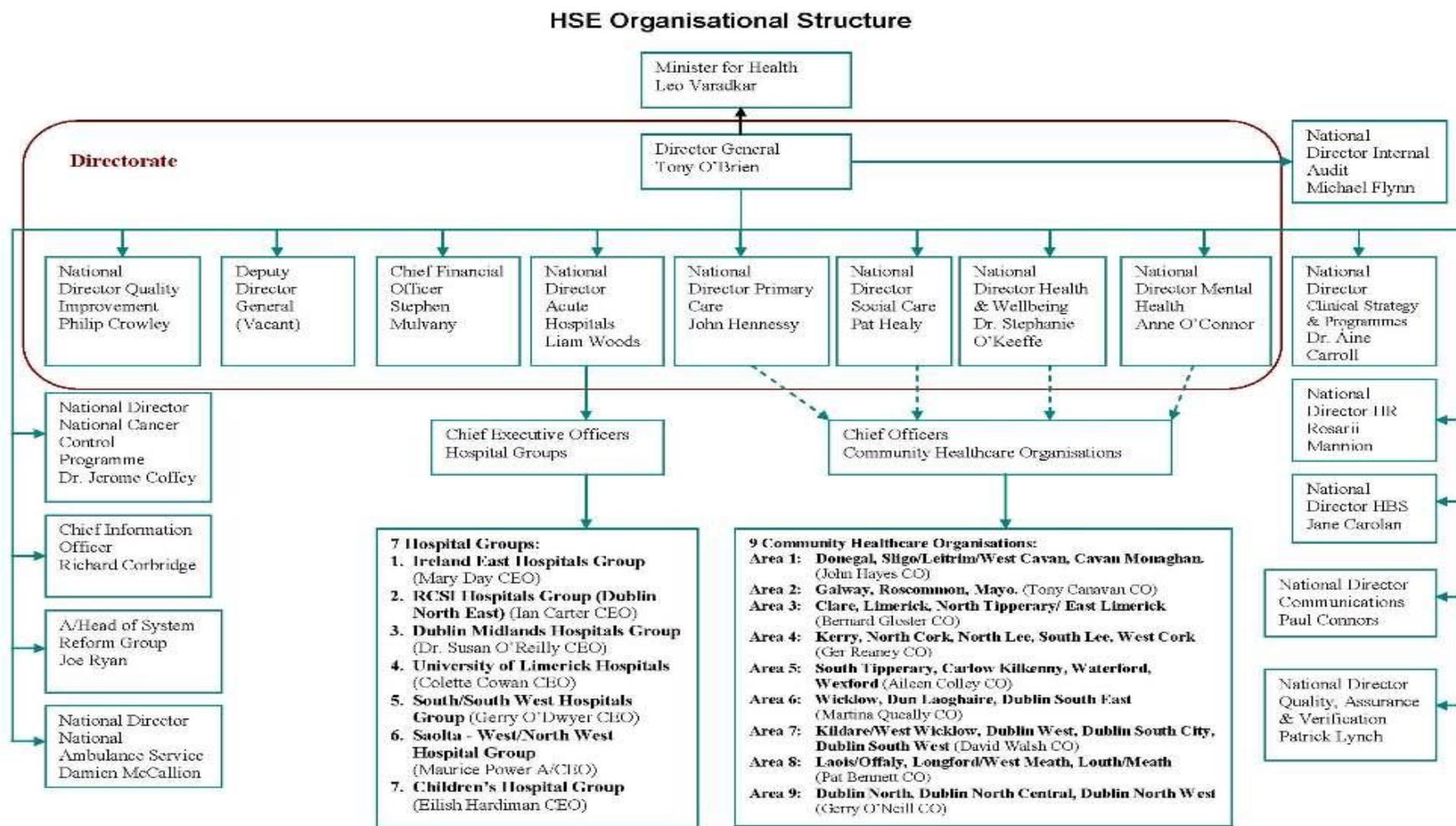
Is there a Lead NCHD folder set up on a drive in the hospital/mental health service network and how to access?

Details for any WhatsApp or similar groups mailings lists used by NCHDs on the clinical Site.

## **15. Induction dates for the clinical site**

Details to be provided locally by Hospital/Mental Health Service site.

## 16. HSE Organisational Structure



## 16.1 Hospital Groups

Public Hospitals nationally are organised into seven Hospital Groups as follows:

### **Ireland East Hospitals Group**

Academic Partner: UCD

CEO: Mary Day

Mater Misericordiae University Hospital  
St Vincent's University Hospital,  
Midland Regional Hospital Mullingar  
St Luke's General Hospital, Kilkenny  
Wexford General Hospital  
National Maternity Hospital  
Our Lady's Hospital, Navan  
St Columcille's Hospital  
St Michael's Hospital, Dun Laoghaire  
Cappagh National Orthopaedic Hospital  
Royal Victoria Eye and Ear Hospital

### **Dublin Midlands Hospitals Group**

Academic Partner: TCD

CEO: Susan O Reilly

St James's Hospital  
St. Luke's Radiation Oncology Network  
The Adelaide & Meath Hospital, Dublin  
Midlands Regional Hospital, Tullamore  
Naas General Hospital  
Midlands Regional Hospital Portlaoise  
The Coombe Women & Infant University Hospital

### **South/South West Hospitals Group**

Academic Partner: UCC

CEO: Gerry O'Dwyer

Cork University Hospital/CUMH  
University Hospital Waterford  
Kerry General Hospital  
Mercy University Hospital  
South Tipperary General Hospital  
South Infirmary Victoria University Hospital  
Bantry General Hospital  
Mallow General Hospital  
Lourdes Orthopaedic Hospital, Kilcreene

### **Children's Hospital Group**

CEO: Eilis Hardiman

Our Lady's Children's Hospital, Crumlin  
Temple Street, Children's University Hospital  
The National Children's Hospital, Tallaght

### **RCSI Hospitals, Dublin North East**

Academic Partner: RCSI

CEO: Ian Carter

Beaumont Hospital  
Our Lady of Lourdes Hospital, Drogheda  
Connolly Hospital  
Cavan General Hospital  
Rotunda Hospital  
Louth County Hospital  
Monaghan Hospital

### **University of Limerick Hospitals**

Academic Partner: UL

CEO: Colette Cowan

University Hospital Limerick,  
University Maternity Hospital Limerick,  
Ennis Hospital,  
Nenagh Hospital  
Croom Hospital  
St. John's Hospital

### **Saolta Hospital Group**

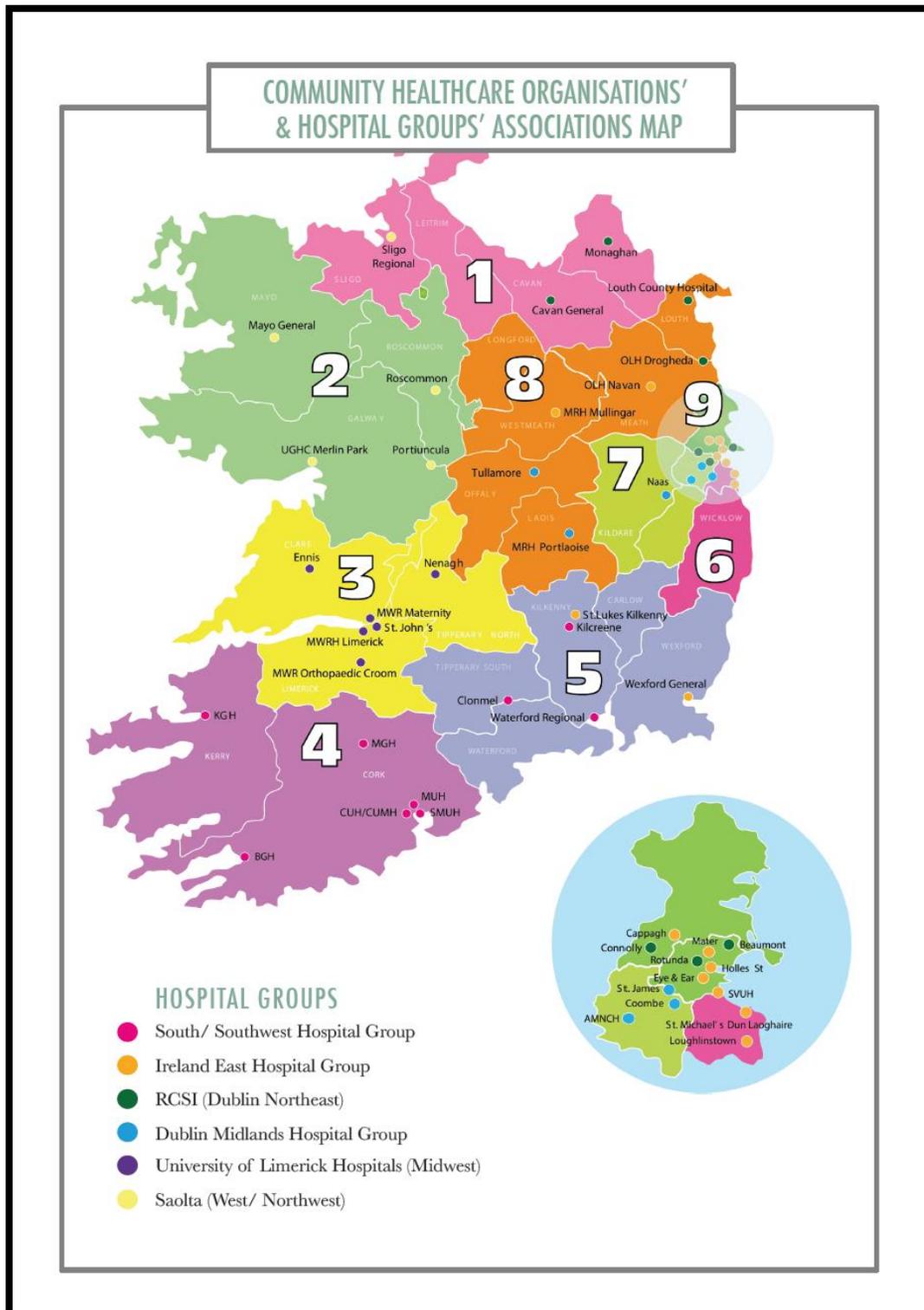
Academic Partner: NUIG

CEO: Maurice Power

University Hospital Galway  
Merlin Park University Hospital  
Sligo University Hospital  
Letterkenny General Hospital  
Mayo General Hospital  
Portiuncula Hospital  
Roscommon County Hospital

## 16.2 Community Healthcare Organisations & Hospital Groups' Associations

Community Healthcare Services supply the broad range of services that are provided outside of the acute hospital system and includes Primary Care, Social Care, Mental Health and Health and Wellbeing Services. These services are delivered through the HSE and its funded agencies to people in local communities. Whilst Mental Health Services are managed through the CHO structure, they have important services and facilities in acute hospitals. These include acute units, liaison psychiatry services and they provide on call services in acute hospitals to both Emergency Departments and wards.



## COMMUNITY HEALTHCARE ORGANISATIONS' & HOSPITAL GROUPS' ASSOCIATIONS



### CHO 1

Donegal, Sligo/ Leitrim/ West Cavan, Cavan/ Monaghan

**Chief Officer : John Hayes**

Tel: (071) 983 4000

Email: john.hayes@hse.ie

Hospital Groups: RCSI (Dublin North-east), Saolta (West/ Northwest)

### CHO 2

Galway, Roscommon, Mayo

**Acting Chief Officer : Bernard Gloster**

Contact: Ms Cathy Munroe

Tel: (091) 77 5404

Email: cho.west@hse.ie

Hospital Groups: Saolta (West/ North-west)

### CHO 3

Clare, Limerick, North Tipperary/ East Limerick

**Chief Officer : Bernard Gloster**

Tel: (061) 46 4445

Email: bernard.gloster@hse.ie

Hospital Groups: University of Limerick Hospitals (Midwest)

### CHO 4

Kerry, North Cork, North Lee, South Lee, West Cork

**Chief Officer : Ger Reaney**

Tel: (028) 40404

Email: ger.reaney@hse.ie

Hospital Groups: South/ Southwest

### CHO 5

South Tipperary, Carlow, Kilkenny, Waterford, Wexford

**Acting Chief Officer : David Walsh**

Tel: (045) 88 2588

Email: david.walsh1@hse.ie

Hospital Groups: South/ Southwest, Ireland East

### CHO 6

Wicklow, Dun Laoghaire, Dublin South East

**Chief Officer : Martina Queally**

Tel: (01) 268 0506

Email: martina.queally@hse.ie

Hospital Groups: Ireland East

### CHO 7

Kildare/ West Wicklow, Dublin West, Dublin South City, Dublin South West

**Chief Officer : David Walsh**

Tel: (045) 88 2597

Email: cho7@hse.ie

Hospital Groups: RCSI (Dublin North-east), Dublin Midlands

### CHO 8

Laois/ Offaly, Longford/ Westmeath, Louth/ Meath

**Chief Officer : Pat Bennett**

Tel: (057) 931 5850

Email: pat.bennett1@hse.ie

Hospital Groups: Ireland East, RCSI (Dublin Northeast), Dublin Midlands

### CHO 9

Dublin North, Dublin North Central, Dublin North West

**Chief Officer : Gerry O'Neill**

Tel: (01) 890 8759

Email: cho.dncc@hse.ie

Hospital Groups: Ireland East, RCSI (Dublin Northeast)

## 17 Resources for Lead NCHDs

### 17.1 Advice on how to set up and run a committee

The success of a committee stems from how it is organised. It is essential that the committee has a clear purpose with a reasonable set of goals/terms of reference. This focuses the work of the committee paving the path for its success. Terms of reference should summarise the purpose of the committee, its composition and specific duties of the committee.

Membership of committee should be carefully considered. Members should be knowledgeable in the area of responsibility and should be a diverse group who will bring different perspectives and have an interest in the overall purpose of the committee. To enhance the effectiveness of a committee it is important that any new members are orientated appropriately into the committee. Members need to be receptive and open to new ideas and other people's opinions. It is important that committee colleagues are treated with respect, listen to one another and work cooperatively even in the face of disagreement.

The chair/leader of a committee plays an important role in ensuring discussions remain within the terms of reference of the committee and remain focussed. They ensure that there is participation in the meetings and encourage discussion to flow. An effective chair of a committee should be a good leader of both people and processes with the ability of guiding committee members to accomplish tasks in a timely fashion.

Committee chairs are responsible for preparing agendas for a meeting, assigning responsibilities to committee members and following up to ensure work is being done. It is important that ground rules are set such as meetings start and end as scheduled, an agenda is followed, mobile phones are turned off etc. See suggested ground rules for meetings below. Members should receive an agenda and any supporting documentation well in advance of the meeting. Minutes of meetings should be recorded. They should outline the decisions/ accomplishments and any action points should be clear. This includes who is responsible for follow up and the timeframe for follow up. See below sample agenda and minute templates. Productive meetings are where healthy discussions take place, clear decisions are taken and progress from the previous meeting can be demonstrated.

## 17.2 Suggested Ground Rules for Meetings

Agreeing a set of ground rules for how a committee will operate can be a useful way of ensuring that meetings run effectively and are of value to attendees. Below are some suggested ground rules:

- Start and finish meetings on time
- Be open to hearing other people's perspectives and new ideas
- Do not interrupt others while they are speaking
- Arrive on time
- Come prepared and ready to contribute
- Be honest
- Pay attention and show respect
- Give everyone a chance to speak, don't monopolise the time
- Do not carry on sidebar conversations
- Say what you think during the meeting and not afterwards
- Respect confidentiality
- Silence means agreement
- Ask questions
- Decisions and action items will be captured
- Owners will assigned to actions and timeframes identified to complete actions
- Agendas will be prepared and circulated in advance
- Minutes will be taken and approved by the group

Sources:

*5 Steps to More Productive Meetings ... The Ground Rules*. Available at: <http://joeypauley.com/5-steps-productive-meetings-ground-rules/>

*The Fundamentals of Effective Meetings and Facilitation Skills*. Available at: <http://slideplayer.com/slide/219636/>

How to Use Meeting Ground Rules to Shape Behaviour and Improve Performance. Available at: <https://intelliven.com/how-to-use-meeting-ground-rules-to-shape-behavior-and-improve-performance/>

## 17.3 Sample Agenda

NAME OF COMMITTEE

<Date, Date> at <Time> in

<Venue>

### Agenda

**Minutes of the Previous Meeting <Date>**

**Matters Arising from the Minutes**

**Item 1**

**Item 2 etc**

**Any other business**

**Date of Next Meeting**

<Insert date>

## 17.4 Sample Minutes Template 1

Agenda Item	Discussion	Action agreed	Person Responsible	Timeframe	Other Comments
1. Minutes of previous meeting					
2. Matters arising from previous minutes					
3. Item 1					
4. Item 2					
5. Any Other Business					

## 17.5 Sample Minutes Template 2

Minutes of meeting of <insert committee name>

<Date>, <Time>

<Venue>

**Attendees:**

**Apologies:**

**Minutes of the Previous Meeting on <date>**

**Matters arising from previous minutes**

**Item 1**

**Item 2**

**Item 3 etc**

**Any Other Business**

**Next meeting:**

<insert date time & venue>

## 17.6 Feedback and Suggestions

Feedback and suggestions about the content for the Lead NCHD Handbook can be directed to Yvonne McGowan and Carol Norton at:

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