

ACCELERATED ACCESS COLLABORATIVE (AAC) BOARD

Paper Title: Accelerated Access Collaborative Governance Review Outputs:
Covering Note to AAC Board

Agenda item: Paper to note

Report by: Matt Whitty, Chief Executive, Accelerated Access Collaborative,
Director of Innovation, Research and Life Sciences
Matthew Newman, Deputy Director, Accelerated Access
Collaborative

Paper type: For Information

AAC Priority Area:

Demand signalling / horizon scanning	<input type="checkbox"/>	Adoption and spread	<input type="checkbox"/>
Increasing research	<input type="checkbox"/>	Working with partners	<input type="checkbox"/>
Increasing uptake	<input type="checkbox"/>	Other (statutory, governance)	<input checked="" type="checkbox"/>

Ask of the AAC Board:

1. To note the recommendation of the Steering Group to resolve to disestablish the AAC Steering Group with immediate effect and progress with the establishment of five AAC Priority Coordination Groups.

The Board will be kept apprised of progress in establishing the refreshed governance through the AAC Chief Executives report. This will include reporting arrangements from the Priority Coordination Groups to Board.

Covering Note

1. An independent review of the AAC Governance was undertaken between May and July 2022 to ensure our governance arrangements remain fit for purpose. A paper was presented to the AAC Steering Group on the 12th October outlining the findings of the review and proposed recommendations (see Appendix A).
2. The paper proposed the following recommendations for consideration by the Steering Group:
 - a. The AAC Steering Group in the current form and format is disbanded. The October 2022 meeting is the last time that this governance forum would convene.
 - b. Five AAC Priority Coordination Groups are convened. They will act as delivery boards, bringing together the relevant policy, programmes and projects contributing to the delivery of each AAC priority.
3. The AAC Board will remain as is and will continue to provide strategic direction for the AAC, delegating into the AAC Priority Coordination Groups

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4. Assurance of the five AAC Priority Coordination Groups will remain with the AAC Board. Outputs of the groups will be reported via the Chief Executive's report and specific papers commissioner by the Chair on behalf of the Board.
5. The Steering Group members expressed support for the proposal and welcomed the opportunity for greater collaboration and a forum for in-depth focused discussion on each priority area.
6. Members raised concerns regarding the potential for duplication with existing arrangements and additional resource required to service all five groups, as for some organisations responsibility would fall to one individual.
7. Matt Newman, Deputy Director AAC, reassured members that where appropriate the coordination groups would align to existing forums and that in working up the detailed proposal emphasis would be placed on avoiding duplication and streamlining arrangements. A further piece of work is needed to map membership of each group, the intention is for there to be some flexibility in membership prioritising areas most applicable to their organisation.
8. Full details of the Steering Group discussion have been recorded in the meeting minutes and available to AAC Board members upon request aac.governance@nhs.net.

Next steps

1. Following the recommendations of the AAC Steering Group members the AAC Steering Group will be stood down, with immediate effect.
2. A Task and Finish group lead by the AAC Secretariat has been established to design and deliver the new governance arrangements
3. Five AAC Priority Coordination Groups to be established, acting as delivery boards to contribute to the delivery of each AAC priority.
4. In line with the agreed action from the June AAC Board meeting to establish an Adoption and Spread subgroup. The new arrangements will be piloted with *AAC Priority 4: Building innovation capacity: supporting the NHS workforce to champion innovation on the front line, so that they are better able to both develop and rapidly evaluate solutions and to drive local implementation of new innovations.*
5. The Board will be kept apprised of progress in establishing the refreshed governance through the AAC Chief Executives report. This will include reporting arrangements from the Priority Coordination Groups to Board.

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Appendix A

Paper Title: Accelerated Access Collaborative Governance Review Outputs

Report by: Matt Whitty, Chief Executive, Accelerated Access Collaborative,
Director of Innovation, Research and Life Sciences
Matthew Newman, Deputy Director, Accelerated Access
Collaborative

Background

1. The Accelerated Access Collaborative (AAC) convenes partners to deliver against five priority areas agreed by the Board. The AAC has established governance that oversees the strategic direction and delivery of the agreed priority areas.
2. The Governance arrangements have continually evolved as the AAC matures, reflecting the expanded remit of the AAC. Set review periods have been introduced to ensure governance remains current and fit-for-purpose. The governance structure underpins how the AAC conducts business from decision-making to delivery. Effective and well-functioning governance will ensure that AAC members receive and can provide assurance that efforts are achieving the aims set out in the five priority areas.
3. The Innovation, Research and Life Sciences (IRLS) team provides a secretariat function on behalf of the AAC.

Considerations

4. The last substantive review of the AAC Board and Steering Group was completed in March 2021. It should be noted that this was limited to a review of the Terms of Reference (ToRs), membership and assessment of ongoing fitness for purpose, as opposed to a full governance review. The refreshed ToRs introduced a clause that commits to an annual governance review.
5. Since the last review of ToRs in March 2021 there have been changes to various AAC partners organisations. This includes the passing of primary legislation, the Health and Care Act 2022. There have also been refreshed strategies at the National Institute for Health and Care Excellence (NICE) and Medicines and Healthcare products Regulatory Agency (MHRA), amongst others.
6. The AAC Secretariat has been undertaking a programme of work to improve the effectiveness of the AAC Board. This has included reviewing the pertinence and number of items for discussion at each meeting and ensuring that there is sufficient differentiation between the work of the Board and Steering Group.
7. In line with the ToR, IRLS, on behalf of the AAC, commissioned PA Consulting to undertake an independent review of the IRLS and AAC's governance arrangements. It was necessary to undertake a review of both aspects of the

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governance together, given the existing hosting arrangements. The review was undertaken between May and July 2022, when final recommendations were produced. Recommendations were subsequently reviewed by the IRLS team between July and September 2022 to determine which aspects to take forwards and the required resources.

8. The independent review involved completing a mapping exercise of current governance arrangements and structures, including a review of existing tools and templates that are used to support governance processes. It considered both IRLS and AAC governance arrangements; the latter is the focus of this paper.

Recommendation

9. The final report recommended eight initiatives that would increase the effectiveness and efficiency of AAC governance arrangements. Following review, not all recommendations in the report will be taken forwards. Others were already in progress, such as increasing AAC Board effectiveness (as set out above).
10. The second initial recommendation was to “[t]ransform the AAC Steering Group into a Portfolio Management Board, thereby providing assurance to the AAC Board on delivery, and allowing it to focus on more strategic questions and challenges”. This was taken forwards and developed further during the Design Authority¹ meetings. During the Design Authority stage the recommendation and design were iterated, resulting in a refinement of the ‘Portfolio Management Board’ naming and approach.
11. Following completion of the Design Authority work, and building on the initial recommendations, it is proposed that:
 - a. The **AAC Steering Group** in the current form and format is disbanded. The October 2022 meeting is the last time that this governance forum would convene.
 - b. Five **AAC Priority Coordination Groups** are convened. They will act as delivery boards, bringing together the relevant programmes and projects contributing to the delivery of each AAC priority. The Priority Coordination Groups will:
 - i. Bring structure to the collective oversight of the programmes and projects being delivered by the AAC members – providing project leads with direction and acting as a point of escalation for project risks and issues.
 - ii. Ensure a standardised structure and programme and project management (“PPM”) approach for all projects. This will maximise the efficiency of projects through PPM best practice.
 - iii. Provide a structure and mechanism to bring together relevant work led by different AAC partners across the priority, and so

¹ The Design Authority included members of the AAC Secretariat and other stakeholders, such as representatives from the Policy and Strategy team.

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- reduce siloed working, encourage collaboration across the AAC, and support the realisation of collective impact.
- iv. Support the design and initiation of programmes of work across partners within the priority area of focus.
12. The AAC secretariat function will support the five AAC Priority Coordination Groups. These will be run on a task and finish group basis, with outputs reported via the Chief Executive's report to the AAC Board. The AAC secretariat will also provide a coordination function between groups. The progress of the AAC Priority Coordination Groups will be kept under review to determine the need for any additional forums, for example to manage interdependencies or undertake joint programmes or projects. In this case all Priority Coordination Groups would be informed of the planned forum.
13. Programmes and projects that contribute to the delivery of the AAC priorities will be coordinated at the AAC Priority Coordination Groups. Projects are accountable to the relevant Priority Coordination Group where they can escalate risks that will prevent the AAC delivering against their priorities. Each group should provide oversight and assurance that the focus priority is being delivered within the specified timescales. A diagram of the proposed arrangement is shown as an appendix.
14. None of the proposed changes set out above are intended to impact upon the organisational governance of any AAC member organisation. The changes are designed to promote a greater opportunity for operational, tactical, and strategic collaboration. Programmes and projects delivered on behalf of the AAC by partners may also have internal governance arrangements. For IRLS, this is to NHS England via the Transformation Directorate.

Next steps

15. If the AAC Steering Group accepts the recommendations set out in this paper and resolves that the forum is to be stood down, then this will take immediate effect.
16. The AAC secretariat function has developed a plan to transition governance from current arrangements and begin establishment of the five Priority Coordination Groups. This will be piloted for AAC Priority 4: *supporting the NHS workforce to champion innovation on the front line, so that they are better able to both develop and rapidly evaluate solutions and to drive local implementation of new innovations*. This aligns with the action at the recent AAC Board, that resolved to form a Sub-group with a focus on the adoption and spread of innovation and research.
17. The Priority Coordination Groups will report to the AAC Board via the Chief Executive's report, where escalations and risks can be highlighted for Board attention.

Steering Group members are asked to:

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18. Discuss and accept the recommendations set out in this paper and suggest and agree any required amendments.
19. Resolve to disestablish the AAC Steering Group and establish five AAC Priority Coordination Groups.
20. Discuss and agree a final report to the AAC Board with the recommendation of the AAC Steering Group.