

OFFICIAL SENSITIVE
INFECTED BLOOD COMPENSATION AUTHORITY: POLICY FORUM TERMS OF
REFERENCE

1. CONSTITUTION

1.1 IBCA ExCo's Terms of Reference paragraphs XIII and XIV state that they 'may establish further subcommittees ... to report to them', and commits them to reviewing 'whether or not the Governance arrangements are appropriate to the programme and organisation'.

1.2 IBCA ExCo has agreed to establish a subcommittee, known as the Policy Forum, with terms of reference as set out below.

1.3 These terms of reference have been reviewed and accepted by the Policy Forum membership on 21st March 2025.

2. PURPOSE and SCOPE

2.1 The Infected Blood Compensation Authority (IBCA) Policy Forum has been established to

- a. review operational policy options and positions relating to the Compensation Service, and either ratify them or recommend them for consideration by ExCo.
- b. to prepare a recommendation to take to ExCo on strategic and/or potentially contentious operational policy decisions.
- c. ensure critical but highly technical operational policy decisions and positions are properly considered and ratified in a timely manner.
- d. explore and identify policy gaps and requirements, reverting to a-c above if necessary.

2.2 These operational policy options and positions will be set out in discussion papers reviewed by legal and/or clinical advisors before submission to the Policy Forum, so that the discussion is informed by this expert knowledge and advice.

2.3 The Policy Forum is also intended to identify the potential impact of its proposals across teams.

2.4 The thresholds for escalation from this forum to ExCo will be financial (above the £500K delegated authority of an individual Director or where spend might be shared between Directorates), strategic goals and risks (whether or not IBCA's strategic objectives as set out in Annex A are impacted), and cross-cutting (at the point at which the impact stretches beyond the tolerance of Directorate-representatives within the meeting).

3. CHAIR

3.1 These meetings will be chaired by the Infected Blood Compensation Service Service Owner (Celine McLoughlin).

4. MEMBERSHIP

4.1 Membership will include empowered working level leads from Service Design, Data and Operations; the Delivery Programme team, Programme Planning, Commercial, should also be in attendance. Subject-matter experts such as IBIRT and UCs may be invited but in an advisory only capacity.

4.2 Members must be empowered to make recommendations and are expected to prioritise attendance. If members are unable to attend the meeting, they should nominate an empowered deputy to attend in their place.

4.3 Core membership of the Project Board will comprise

- a. Celine McLoughlin, Service Owner and Digital Director
- b. GRO-D Operational Policy
- c. Hannah Probert, Strategy and Governance Deputy Director
- d. GRO-D Professional Services Lead
- e. Tom Carney, Communications
- f. GRO-D Head of Advanced Analytics & Intelligence
- g. Alix Crabtree, Deputy Director for Data Operations
- h. GRO-D Head of Product
- i. TBC, General Counsel
- j. GRO-D IBCA Ops
- k. GRO-D IBCA Ops Fraud

5. MEETING FREQUENCY

5.1 Meetings for the IBCA Policy Forum will be held fortnightly, unless urgent decisions require discussion and ratification more urgently. In such situations, we will either call an additional meeting of the Forum, or we will ask for discussion and ratification by correspondence.

6. AGENDA and MINUTES

6.1 The Chair will nominate a member to serve as the secretary for the group and will be responsible for minuting and sharing the agenda, giving members enough time to review the agenda and any papers.

7. REVIEW and AMENDMENT

7.1 These Terms of Reference will be regularly reviewed as needed to ensure they remain relevant and effective in guiding the operations and direction of the IBCA Policy Forum.

7.2 Any necessary amendments will be documented and shared with ExCo for review and approval to ensure these terms continue to align with the goals and broader strategic objectives set out.

DRAFT

Annex A - IBCA's Strategic Objectives

- a. Everyone who is entitled to compensation is able to claim and gets paid.
- b. This is done as quickly as possible for the community while protecting them, and the taxpayer, from fraud.
- c. This is done as seamlessly as possible using information already provided and navigating individuals through the process.
- d. People applying for compensation feel supported throughout the process.
- e. IBCA staff feel enabled to provide a professional and caring service.
- f. IBCA will work with partners and other organisations to consider the holistic needs of the community.
- g. IBCA colleagues consider it to be a great place to work.
- h. The Infected Blood community (IB) trusts IBCA to deliver compensation competently and fairly.
- i. These objectives will be achieved by actively and continuously seeking feedback and responding to it to improve.