

From: Date:		Trust Board				
Data		CHIEF EXEC	-			
		26 JUNE 201	4			
CQC regulatio	n.	N/A				
Title:				PORT – JUNE 2014		
Author	/Respo	nsible Directo	or: Direc	tor of Corporate and L	egal Affa	irs
Purpos	e of th	e Report: To	brief the	Board on key issues a	nd identif	fy important
change	s or iss	ues in the exte	rnal envi	ronment.		
The Re	nort is	provided to tl	he Comr	nittee for:		
THE IVE						
	Decision			Discussion	\checkmark	
	Assurance		\checkmark	Endorsement		
Strategi either a	ic Direc re requ	tion and Board ired.	Assurar	sked to consider the rence Framework (if any)	and dec	ide if updates to
Previou	usiy co	nsidered at al	nother c	orporate UHL Commi		
Strateg	jic Risk	Register: No)	Performance KPIs y	/ear to d	ate: N/A
		Register: No			/ear to d	ate: N/A
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UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD

DATE: 26 JUNE 2014

REPORT BY: CHIEF EXECUTIVE

SUBJECT: MONTHLY UPDATE REPORT – JUNE 2014

- 1. In line with good practice (as set out in the Department of Health Assurance Framework for Aspirant Foundation Trusts : Board Governance Memorandum), the Chief Executive is to submit a written report to each Board meeting detailing key Trust issues and identifying important changes or issues in the external environment.
- 2. For this meeting, the key issues which the Chief Executive has identified and upon which he will report further, orally, at the Board meeting are as follows:-
- (a) the Trust's financial position as at month 2 2014/15;
- (b) emergency care performance;
- (c) the development of an LLR Health and Social Care 5-year Strategy directional plan for the Better Care Together Programme; and the development of the Trust's 5-year Plan;
- (d) the new Congenital Heart Disease Review visit by the NHS England review team to the Trust on 30 May 2014;
- (e) the publication on 13 June 2014 by NHS England, the NHS Trust Development Authority and Monitor of a framework to support planning for operational resilience during 2014/15 (including elective as well as urgent care) which heralds the evolution of Urgent Care Working Groups to become 'System Resilience Groups'.
- 3. The Trust Board is asked to consider the Chief Executive's report and, again, in line with good practice consider the impact on the Trust's Strategic Direction and decide whether or not updates to the Trust's Board Assurance Framework are required.

John Adler Chief Executive

19th June 2014