

# Chairman's Note

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Trust Board paper A

Dear Board Member,

This is our first Board meeting dedicated to the forthcoming reconfiguration programme and (as with our usual cycle of Board meetings in the morning dealing with all other issues) we will follow the same monthly cycle and take place in the afternoon on the same day. There will be public and private sessions of these Board meetings focusing on reconfiguration.

I am taking this opportunity to set out my personal assumptions and expectations and also to canvas views from Board colleagues about the topic areas they would wish to see on the agendas of future meetings.

The background context is that we are all very pleased with the announcement last year with a commitment to invest £450m capital funding in our physical infrastructure. This is a once in a generation investment into the acute health services for our local communities.

In relation to reconfiguration I believe our responsibility as a Board is to ensure:

- robust governance and appropriate stewardship of resources so that the physical infrastructure projects are delivered on time and within budget
- we promote public and staff confidence in the transformation of our services which are necessary to meet the emerging needs within our communities and that the capital build should reflect
- as an anchor institution within our local communities we lead in providing economic opportunities through training, employment and contracts in order to address existing health and other inequalities within our local communities .

Whilst the first public session of this Trust Board reconfiguration meeting will be focusing on the work that has been undertaken thus far in terms of capital projects, it is important that we think of our reconfiguration programme as an integrated approach to providing transformed acute health services to our local communities for the next decade and beyond. With this in mind I have already asked Andrew Furlong our Medical Director to lead a discussion at our next meeting in October about the clinical strategy underpinning the reconfiguration programme and how it has evolved. I would also like to see a report at the next public session in October setting out the governance framework for the programme through to the Trust Board and identifying the key executive directors who will be responsible for its various components.

I would like to invite Board colleagues to suggest other items that they believe should be on the public Trust Board agenda when discussing the reconfiguration programme. My assumption is that unless issues are commercially sensitive (and therefore have to be discussed in private) we should be seeking to discuss as much as possible in public.

Whilst our Trust Board will not have the legal responsibility for undertaking the consultation process in relation to the reconfiguration programme and this will be undertaken by the CCGs, I would envisage when it does commence that we will receive regular reports about this process.

I look forward to seeing you at the Trust Board Reconfiguration Meeting on 3<sup>rd</sup> September 2020.

Regards

**Karamjit Singh**  
**Chairman, University Hospitals of Leicester NHS Trust**