

## Revised Governance Arrangements April – June 2020: Trust Board and Board Committees

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Sponsor: Karamjit Singh, Trust Chairman

**Trust Board paper H**

### Purpose of report:

This paper is for:	Description	Select (X)
Decision	To formally receive a report and approve its recommendations OR a particular course of action	
Discussion	To discuss, in depth, a report noting its implications without formally approving a recommendation or action	
Assurance	To assure the Board that systems and processes are in place, or to advise a gap along with treatment plan	X
Noting	For noting without the need for discussion	

### Previous consideration:

Meeting	Date	Please clarify the purpose of the paper to that meeting using the categories above
CMG Board (specify which CMG)	N/A	
Executive Board	N/A	
Trust Board Committee	N/A	
Trust Board	N/A	

## Executive Summary

### Context

Revised Trust Board and Board Committee Governance arrangements have been put in place in response to the COVID 19 crisis.

### Input Sought

The Trust Board is invited to confirm the revised Trust Board and Board Committee governance arrangements set out in this paper and the attached appendix, noting that the position will be kept under review between now and their projected expiry at the end of June 2020.

**For Reference (edit as appropriate):**

**This report relates to the following UHL quality and supporting priorities:**

**1. Quality priorities**

Safe, surgery and procedures	[No]
Safely and timely discharge	[No]
Improved Cancer pathways	[No]
Streamlined emergency care	[No]
Better care pathways	[No]
Ward accreditation	[No]

**2. Supporting priorities:**

People strategy implementation	[No]
Estate investment and reconfiguration	[No]
e-Hospital	[No]
More embedded research	[No]
Better corporate services	[No]
Quality strategy development	[No]

**3. Equality Impact Assessment and Patient and Public Involvement considerations:**

- What was the outcome of your Equality Impact Assessment (EIA)? N/A
- Briefly describe the Patient and Public Involvement (PPI) activities undertaken in relation to this report, or confirm that none were required – N/A
- How did the outcome of the EIA influence your Patient and Public Involvement ? N/A
- If an EIA was not carried out, what was the rationale for this decision? On the basis that this is a monthly update report. N/A

**4. Risk and Assurance**

**Risk Reference:**

Does this paper reference a risk event?	Select (X)	Risk Description:
<b>Strategic:</b> Does this link to a <b>Principal Risk</b> on the BAF?	X	Operational instability due to COVID 19
<b>Organisational:</b> Does this link to an <b>Operational/Corporate Risk</b> on Datix Register		
<b>New Risk</b> identified in paper: What <b>type</b> and <b>description</b> ?		
<b>None</b>		

5. Scheduled date for the **next paper** on this topic: TBC
6. Executive Summaries should not exceed **5 sides** [My paper does comply]

## **UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST**

**REPORT TO: TRUST BOARD**

**DATE: 7TH MAY 2020**

**REPORT BY: DIRECTOR OF CORPORATE AND LEGAL AFFAIRS**

**SUBJECT: REVISED GOVERNANCE ARRANGEMENTS APRIL – JUNE 2020:  
TRUST BOARD AND BOARD COMMITTEES**

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### 1. Introduction

- 1.1 This paper/the attached appendix sets out the revised Trust Board and Board Committee governance arrangements which have been put in place between April and June 2020 in the light of the COVID 19 crisis.
- 1.2 They reflect two imperatives: the need to focus on essential matters only/what matters most (in line with our values), and to preserve and protect the time of the Acting Chief Executive and the Executive Team as far as is reasonable/possible in the circumstances – while ensuring that Non-Executive Directors receive sufficient assurance on our most critical issues, namely, our response to COVID 19 and key quality, safety, financial and statutory matters.
- 1.3 The arrangements described here were the subject of brief discussion at the Trust Board meeting held on 26<sup>th</sup> March 2020 and, following subsequent discussions with Board members, the Acting Chief Executive and Director of Corporate and Legal Affairs, confirmed thereafter by the Chairman in his email to Board members on 31<sup>st</sup> March 2020.

### 2. General Comments

- 2.1 The Trust's arrangements are in line with those adopted by other NHS organisations: the principles adopted/common characteristics are summarised below:
  - organisations are introducing significantly revised governance arrangements which are proportionate to the scale and nature of the challenges faced. An agreed objective is for Boards to maintain satisfactory controls and oversight whilst enabling timely decision-making and ensuring Executives can appropriately focus on the operational management of the COVID-19 crisis;
  - the new arrangements are generally being introduced for an initial period of 3 months and will be subject to periodic review to enable further revision or extension
  - there has been a comprehensive switch to virtual, digitally-enabled meetings;
  - Board agendas are being rationalised and the duration of meetings reduced;
  - there has been a significant rationalisation and streamlining of Committee and sub-committee meetings;
  - some organisations are using criteria and categorisation to determine which matters require continuing attention and those which can be deferred or postponed;

- new decision-making processes have been introduced. This is particularly to recognise the need for significant decisions relating to the management of the COVID-19 to be taken without normal Board approval processes. On occasion, Boards are being asked to ratify relevant decisions. Such decisions will, however, generally be taken through defined processes, e.g. requiring the involvement of at least one Executive and two Non Executives. There is, moreover, an acknowledgement of the need for more frequent application of Chairs action- again subject to Board ratification;
- Boards have confirmed that their predominant focus will be on COVID-19 matters and key quality, safety, financial and statutory aspects. All are, moreover, prioritising the mobilisation of support for their staff;
- key information is being shared with all Board members including for example daily SIT REPs to enable consistent insight into fast-changing challenges and pressures;
- the revised governance arrangements specify the importance of efficient logging and record keeping;
- the new arrangements are subject to formal Board approval.

### 3. Recommendation

- 3.1 The Trust Board is invited to confirm the revised Trust Board and Board Committee governance arrangements set out in this paper and the attached appendix, noting that the position will be kept under review between now and their projected expiry at the end of June 2020.

Stephen Ward  
Director of Corporate and Legal Affairs

1<sup>st</sup> May 2020

## UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

### REVISED GOVERNANCE ARRANGEMENTS APRIL - JUNE 2020: TRUST BOARD AND BOARD COMMITTEES

1. The Trust Board meeting on 2<sup>nd</sup> April 2020 is cancelled.
2. Trust Board Thinking Days to be stood down.
3. Trust Board to meet monthly, on the dates currently fixed (NB the April meeting has been cancelled) – these meetings will be virtual and set up via Microsoft Teams physical presence at Board meetings to be avoided, if at all possible.
4. Trust Board meetings to be as concise as possible – and will normally be of no more than 2 hours duration, commencing at 8am and concluding no later than 10am in order to free up as much time as possible for the Executive Directors.
5. Business at Trust Board meetings to be confined to COVID-19, key quality, safety, financial and statutory matters and any time critical/ governance must-dos only.
6. Board agendas to be set by the Chairman in consultation with the Director of Corporate and Legal Affairs.
7. Board papers to be kept as brief as possible.
8. Board Committee meetings to be stood down. The Board Committee Chairs and Vice-Chairs of FIC/PPPC/QOC individually to have a once a month maximum 1 and a half hour assurance catch-up call – virtually – with the lead Executive Director(s) for each Committee, the key points of which will be captured in the form of a written summary prepared by the Corporate and Committee Services Team, circulated to all Board members and received formally at the next (virtual) Board meeting. The Chair of the Audit Committee, who is a member of FIC, will also be invited to participate in the monthly FIC call.
9. These Committee calls similarly to be confined to any time critical issues/governance must-dos only.
10. These Committee calls to take place on the Committee dates currently fixed – 30<sup>th</sup> April 2020, 28<sup>th</sup> May 2020, 25<sup>th</sup> June 2020 - the precise times to be mutually agreed between the Committee Chairs and the lead Executives, but ideally to take place in the morning.
11. The items for discussion on the Committee calls to be determined by the Committee Chair, lead Executive Director(s) and Director of Corporate and Legal Affairs.
12. Other Executive or Senior Directors to be involved in the Committee calls only by exception/if there are time critical/governance must-dos for which they hold lead responsibility; any such issues are to be raised with the Director of Corporate and Legal Affairs in the first instance.
13. The calls can proceed in the event that there is at least one Non-Executive Director and one Executive Director on the call.
14. Importantly, the QOC call will include consideration of the weekly safety reports (prepared by the Director of Safety and Risk) which are being considered at the (virtual) weekly Executive Board meetings and circulated weekly to the Chairman and Non-Executive Directors for information.
15. The Chairman and Acting Chief Executive will **not** participate in the Committee calls.
16. The existing Trust Board and Board Committee calendars of business will help to inform the identification of any time-critical issues/governance must-dos.
17. The following arrangements will apply for the Charitable Funds Committee:
  - (a) the CFC scheduled for 2 April 2020 is **cancelled**. There are no time critical governance issues on the agenda;
  - (b) The CFC Non-Executive Director Chair will meet virtually with the Leicester Hospitals Charity Director to discuss CFC items and prepare a summary report for the Trust

Board. The Corporate and Committee Services Team will also be involved in that virtual meeting and will produce the resulting summary of issues;

- (c) any **time-critical** applications for charitable funding will be circulated to CFC members electronically, either for approval by voting members (if between £10,000 - £50,000) or recommendation to the Trust Board for approval as Corporate Trustee (if above the CFC's delegated limit of £50,000). Non-voting CFC members will be copied in to that electronic circulation for their information. Applications which are not time-critical will wait to be considered. The decision on whether applications are time-critical will be taken by the Director of Leicester Hospitals Charity.

18. Key risks and how they are being/will be managed shall be identified as part of the Committee calls/at the Board meetings, together with mitigations and any residual risks that will need to be tolerated/escalated.

19. On **COVID-19**, information and assurance will be provided to the Board as follows:

- Circulation of daily sitreps – including at weekends;
- Circulation weekly of the LLR System COVID-19 written briefing;
- The Acting Chief Executive will hold twice weekly calls with the Chairman; the Chairman will also be participating in weekly calls with the NHS E/I Regional Director, NHS Midlands and will brief the NEDs on both of these calls on a weekly basis between 8am and 9am on Fridays
- Monthly, all of the Non-Executive Directors will be invited to join one of the Chairman's weekly calls with the Acting Chief Executive – this will be in the middle of each month, ie half way between Board meetings.

**Karamjit Singh**  
**Trust Chairman**  
**31 March 2020**