

TRUST BOARD – 27th NOVEMBER 2014

Chairman's Monthly Report

DIRECTOR:	Chairman
AUTHOR:	Chairman
DATE:	21 st November 2014
PURPOSE:	(concise description of the purpose, including any recommendations) To brief the Board monthly on the Chairman's perspective.
PREVIOUSLY CONSIDERED BY:	(name of Committee) N/A
Objective(s) to which issue relates *	<input checked="" type="checkbox"/> 1. Safe, high quality, patient-centred healthcare <input checked="" type="checkbox"/> 2. An effective, joined up emergency care system <input checked="" type="checkbox"/> 3. Responsive services which people choose to use (secondary, specialised and tertiary care) <input checked="" type="checkbox"/> 4. Integrated care in partnership with others (secondary, specialised and tertiary care) <input checked="" type="checkbox"/> 5. Enhanced reputation in research, innovation and clinical education <input checked="" type="checkbox"/> 6. Delivering services through a caring, professional, passionate and valued workforce <input checked="" type="checkbox"/> 7. A clinically and financially sustainable NHS Foundation Trust <input checked="" type="checkbox"/> 8. Enabled by excellent IM&T
Please explain any Patient and Public Involvement actions taken or to be taken in relation to this matter:	As stated in the report.
Please explain the results of any Equality Impact assessment undertaken in relation to this matter:	N/A
Organisational Risk Register/ Board Assurance Framework *	<input type="checkbox"/> Organisational Risk Register <input type="checkbox"/> Board Assurance Framework <input checked="" type="checkbox"/> Not Featured
ACTION REQUIRED *	
For decision <input type="checkbox"/>	For assurance <input type="checkbox"/>
	For information <input checked="" type="checkbox"/>

- ♦ We treat people how we would like to be treated
- ♦ We do what we say we are going to do
- ♦ We focus on what matters most
- ♦ We are one team and we are best when we work together
- ♦ We are passionate and creative in our work

* tick applicable box

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: TRUST BOARD

DATE: 27 NOVEMBER 2014

REPORT BY: CHAIRMAN

SUBJECT: CHAIRMAN'S MONTHLY REPORT

Meetings

I have continued to meet a wide range of staff (in particular on my Saturday visits around different parts of the Trust) and appreciate the warm personal welcome that I have received as well as the enthusiasm when discussing their services. I have also continued to hold meetings with a wide range of opinion formers in such sectors as political life, faith communities, the media, patient groups and the business community. I see both of these activities as important components of my role as Trust Chair. Each member of the Board will have a wide range of contacts and we will be thinking about how we can use these networks effectively as part of our engagement process internally and externally.

Innovation

During my visits I have already come to appreciate there is a wide range of individuals and teams who are either trialling new and innovative approaches in their service provision or who need assistance in taking their ideas to the next stage. I always ask the question why do we do things in this way and if you had a chance, what would you do differently? Some of the changes suggested are relatively small in terms of process but they might have a considerable impact. I have been struck by the fact that we do not appear to have a Board level focus on innovation because I believe the extent to which we welcome new approaches will be one of the key issues which differentiates us from other organisations.

Performance, Quality, People and Resources

As a Board we have focused in the past (and will continue to do so) on performance issues in areas such as emergency admissions which will have significant people, quality and quality dimensions. However it is also the case that as a Board we have to focus on the performance of other services and sites within the Trust and assess these dimensions in that context. The Board will be reordering its own business agendas and that of its committees so that there is a sharper focus on the direction of travel or strategy for the organisation and that decision making is aligned to this. I have also been struck that the people delivering these services as clinicians and nurses have no insights into their relative costs. I look forward to seeing future developments which deliver this kind of change.

Being receptive, responsive and reflective

As a major organisation within the local health system with roles as an employer, service provider and public body we have a responsibility as a Board to think about our wider role in the community. We need to demonstrate our values such as listening carefully to patient voices and others with an interest in the health and well being of the community; that we have responded in a considered and structured manner to the issues raised; and that as a model employer and service provider we seek to reflect the diversity which exists in our local communities across the city and counties by providing opportunities in a fair and open way. These three Rs require us to think about the culture that we want to encourage throughout the Trust.

Karamjit Singh CBE
Chairman, UHL Trust