

BOARD AND BOARD COMMITTEE GOVERNANCE

Author: Stephen Ward Sponsor: Karamjit Singh Date: Thursday 4 June 2015

Paper V

Executive Summary

Context

This paper summarises the outputs of the Trust Board Thinking Day held on 14th May 2015 when consideration was given to Board and Board Committee reporting arrangements. The paper has been considered by the Audit Committee on 27th May 2015.

Questions

1. Is the Trust Board content with the current and proposed reporting arrangements to the Board and the Board Committees?

Conclusion

1. A number of changes to Board and Board Committee reporting arrangements are recommended for Board approval.
2. The proposed changes were considered and endorsed by the Audit Committee at its meeting on 27th May 2015.

Input Sought

1. The Trust Board is invited to approve the proposed changes set out in the report.
2. The Director of Corporate and Legal Affairs will update the Trust Board orally on the issues identified in section 5 of the report.

For Reference

Edit as appropriate:

1. The following [objectives](#) were considered when preparing this report:

Safe, high quality, patient centred healthcare	[Yes]
Effective, integrated emergency care	[Yes]
Consistently meeting national access standards	[Yes]
Integrated care in partnership with others	[Yes]
Enhanced delivery in research, innovation & ed'	[Yes]
A caring, professional, engaged workforce	[Yes]
Clinically sustainable services with excellent facilities	[Yes]
Financially sustainable NHS organisation	[Yes]
Enabled by excellent IM&T	[Yes]

2. This matter relates to the following [governance](#) initiatives:

Organisational Risk Register	[Not applicable]
Board Assurance Framework	[Not applicable]

3. Related [Patient and Public Involvement](#) actions taken, or to be taken: N/A

4. Results of any [Equality Impact Assessment](#), relating to this matter: N/A

5. Scheduled date for the [next paper](#) on this topic: N/A

6. Executive Summaries should not exceed [1 page](#). [My paper does comply]

7. Papers should not exceed [7 pages](#). [My paper does comply]

To:	Audit Committee					
From:	DIRECTOR OF CORPORATE AND LEGAL AFFAIRS					
Date:	27 th May 2015					
Title:	BOARD AND BOARD COMMITTEE GOVERNANCE					
Author/Responsible Director:	Director of Corporate and Legal Affairs					
Purpose of the report:	To brief the Committee on proposed changes to Trust Board and Board Committee reporting arrangements.					
The report is provided to the Audit Committee for:	<table border="0" style="width: 100%;"> <tr> <td style="border: 1px solid black; padding: 5px;">Decision</td> <td style="border: 1px solid black; padding: 5px;">Discussion √</td> </tr> <tr> <td style="border: 1px solid black; padding: 5px;">Assurance</td> <td style="border: 1px solid black; padding: 5px;">Endorsement √</td> </tr> </table>		Decision	Discussion √	Assurance	Endorsement √
Decision	Discussion √					
Assurance	Endorsement √					
Summary:	The paper summarises the outputs of the Trust Board Thinking Day session held on 14 th May 2015 when consideration was given to Board and Board Committee reporting arrangements.					
Recommendations:	The Committee is invited to consider and comment upon the proposed changes to Trust Board and Board Committee reporting arrangements and provide advice thereon to the Trust Board.					
Strategic Risk Register:	N/A	Performance KPIs year to date: N/A				
Resource implications (e.g. Financial, HR):	N/A					
Assurance implications:	N/A					
Patient and Public Involvement (PPI) implications:	N/A					
Equality impact:	N/A					
Information exempt from disclosure?	N/A					
Requirement for further review?	At Trust Board on 4 June 2015.					

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

REPORT TO: AUDIT COMMITTEE

DATE: 27th MAY 2015

REPORT BY: DIRECTOR OF CORPORATE AND LEGAL AFFAIRS

SUBJECT: BOARD AND BOARD COMMITTEE GOVERNANCE

1. Introduction

- 1.1 The Trust Board discussed Board and Board Committee governance at its Thinking Day session on 14th May 2015.
- 1.2 The session was led by the Director of Corporate and Legal Affairs and Board Intelligence and reflected the Trust's recent work with Board Intelligence on Board and Board Committee reporting arrangements.
- 1.3 This paper summarises the outputs of that session, for consideration by the Audit Committee and onward recommendation to the Trust Board.

2. Changes to Reporting Arrangements

Chief Executive's Monthly Report to Trust Board

- 2.1 Changes to the Chief Executive's monthly report to Trust Board are proposed as follows:-
- the report will be set in the context of our strategic objectives and annual priorities 2015/16;
 - the report will identify 'what is on the Chief Executive's mind';
 - the report will identify how confident the Chief Executive is about achieving our priorities;
 - the report will identify what is driving this (a) what has gone well and implications (b) what has not gone well and implications (c) what are the risks and opportunities;
 - the report will identify areas where the Board's input is sought,
 - the report will set out a conclusion;
 - the report will append the Board Dashboard (see also below).

Board Dashboard

- 2.2 Appended to the Chief Executive's monthly report will be the Quality and Performance Dashboard.
- 2.3 An early draft of the Quality and Performance Dashboard is attached at appendix A to this report for information.
- 2.4 At its Thinking Day, the Trust Board agreed that consideration be given to:-
- expanding the workforce metrics;
 - adding 'forecast date to reach target' and/or the KPIs wherever appropriate.
- 2.5 At the end of each quarter, it is intended that, in addition, an 'annual priorities 2015/16' Dashboard be also attached to the Chief Executive's Board report, summarising the status of the Trust's progress against its Annual Priorities. This Dashboard is under development at present.
- 2.6 Consideration is also being given to developing a Governance Dashboard with the intention, again, of attaching this to the Chief Executive's Board report. This could include information relating to the Trust's key risks; and KPIs arising from a self-assessment by the Board of the recently published Well-Led Framework.

Quality and Performance Report

- 2.7 It is proposed that, as now, the quality and performance report be reviewed at the monthly meetings of the Integrated Finance, Performance and Investment Committee and Quality Assurance Committee, respectively. However, the quality and performance report will not in future separately feature on the Trust Board agenda: instead, the Trust Board will receive a written summary and feedback from the Chairs of the Integrated Finance, Performance and Investment Committee and Quality Assurance Committee on their Committee's consideration of that month's quality and performance report.
- 2.8 The quality and performance report will nevertheless continue to be made publicly available and published on the Trust's website.

Strategy Report

- 2.9 From June 2015, the Trust Board will receive a monthly Strategy report. The structure of this report is under consideration at present but will routinely include sections on the Trust's reconfiguration programme and partnerships, respectively.

Annual Priorities 2015/16 Reporting Framework

2.10 Attached at appendix B is a table showing arrangements which are being put in place to report at Executive, Board Committee and Trust Board level on the Trust's annual priorities 2015/16.

2.11 As stated at paragraph 2.5 above, this reporting framework will be complemented by a quarterly overview of progress against the Trust's annual priorities, reported by the Chief Executive to the Trust Board.

3. Trust Board Thinking Days

3.1 At the session on 14th May 2015, the Trust Board also discussed the forward programme for Trust Board Thinking Day sessions.

3.2 Topics have provisionally been identified for the Thinking Days taking place between June and September 2015.

3.3 The formal programme will be reviewed at the end of each future Thinking Day session and, annually, the Trust Board will be invited to review the previous year's programme and reconsider the Thinking Day forward programme, in the round.

4. Reporting Hub

4.1 Arrangements are in hand to launch the UHL Reporting Hub which will be used for producing all papers submitted to the Trust Board in future. The Hub houses best practice guidance, a suite of report templates and training videos.

5. Issues which remain under consideration

5.1 Arising from the Trust Board Thinking Day, and a discussion immediately afterwards between the Chairs of the Audit Committee, Integrated Finance, Performance and Investment Committee, Quality Assurance Committee and Director of Corporate and Legal Affairs, a number of matters remain under consideration as follows:-

- the most effective way of routing business cases via the Integrated Finance, Performance and Investment Committee while allowing for appropriate consideration of clinical quality dimensions;
- streamlining clinical management group presentations to Board Committees;
- streamlining reporting to Board Committees on particular topics, eg on the performance of Interserve;
- streamlining reporting of the Trust's Cost Improvement Programme, to encompass both financial and quality aspects;

- strengthening Board and Board Committee focus on workforce issues;
- reviewing and strengthening the Trust's reporting arrangements relating to key risks and the Board Assurance Framework, respectively.

5.2 The Chief Executive and Director of Corporate and Legal Affairs are meeting on 26th May 2015 to discuss the matters mentioned at paragraph 5.1 above and the Audit Committee will be updated orally at its meeting on the outcome.

6. Conclusion and Recommendations

6.1 The Audit Committee is invited to consider and comment upon the contents of this paper and provide advice to the Trust Board on the proposed changes to Board and Board Committee reporting arrangements.

Stephen Ward
Director of Corporate and Legal Affairs

21 May 2015

Outcomes

		2014/15 Final		Mar-15		
		Plan	Actual	Plan	Actual	Trend*
Safe	S1A: Clostridium Difficile	81	73	7	7	●
	S2A: MRSA (All)	0	6	0	1	●
	S2B: MRSA (Avoidable)	0	1	0	0	●
	S3: Never events	0	3	0	0	●
	S4: Serious Incidents	N/A	41	N/A	1	●
	S11: Falls per 1,000 bed days for patients > 65 years	7.1	6.9	7.1	6.3	●
	S12: Avoidable Pressure Ulcers Grade 4	0	2	0	1	●
	S13/14: Avoidable Pressure Ulcers Grade 2 & 3	216	160	18	15	●
Caring	C1A: Inpatient friends & family test score	72	72.4	72	74.4	●
	C2A: A&E friends and family test score	54	69.3	54	71.3	●
Well Led	W12: % of Staff with Annual Appraisal	95%	91.4%	95.0%	91.4%	●
	W13: Statutory and Mandatory Training	95%	95.0%	95%	95.0%	●
Effective	E1: Mortality Published SHMI	100	103	100	103	●
	E11: 30 day readmissions	N/A	8.6	N/A	8.5	●
	E12: Neck Femurs operated on 0-35hrs	72%	61.4%	72%	61.5%	●
	E13: Stroke - 90% of Stay on a Stroke Unit - Feb	80%	80.4%	80%	83.5%	●
Responsive	R1: ED 4hr Waits UHL+UCC	95%	89.1%	95%	91.1%	●
	R3: RTT waiting Times - Admitted	90%	82.8%	90%	84.4%	●
	R4: RTT waiting Times - Non Admitted	95%	95.1%	95%	95.5%	●
	R5: RTT waiting Times - Incompletes	92%	94.7%	92%	96.7%	●
	R7: 6 week – Diagnostics Test Waiting Times	1%	1.4%	1%	0.9%	●
	R8: 2 week wait (All Suspected Cancer)	93%	92.2%	93%	91.5%	●
	R10: 31 day target (All Cancers)	96%	94.6%	96%	97.0%	●
	R14: 62 day target (All Cancers)	85%	81.4%	85%	83.7%	●
	R21: Operations cancelled (UHL + Alliance)	0.8%	0.9%	0.8%	0.9%	●
	R23: Delayed transfers of care	3.5%	3.9%	3.5%	1.8%	●
R25: Ambulance Handover >60 Mins	0	3,067	0	418	●	
R26: Ambulance handover >30mins & <60mins	0	11,315	0	1,023	●	

Enablers

		YTD		This month		
		Plan	Actual	Plan	Actual	Trend*
People	W5: Staff recommend as a place to work	N/A	54.2%	N/A	54.9%	●
	W6: Staff recommend as a place for treatment	N/A	69.2%	N/A	71.4%	●
Finance	Surplus/deficit	xxxx	xxxx	xxxx	xxxx	
	Cashflow forecast	xxxx	xxxx	xxxx	xxxx	
	Capex	xxxx	xxxx	xxxx	xxxx	
Estates & facility mgt.	Cleaning standards (metric to be confirmed)	xxxx	xxxx	xxxx	xxxx	

* Trend is green or red depending on whether this month's actual is better or worse than the average of the prior 6 months

Please note: The above metrics represent the Trust's current priorities and the code preceding many refers to the metrics place in the Trust's Quality & Performance dashboards. Please see these Q&P dashboards for the Trust's full set of key metrics.

DRAFT Appendix B

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

ANNUAL PRIORITIES 2015/16 – REPORTING FRAMEWORK

1. SAFE, HIGH QUALITY, PATIENT CENTRED HEALTHCARE			
PRIORITY	REPORTING TO	FREQUENCY	COMMENTS
<ul style="list-style-type: none">• Reduce UHL mortality rate (SHMI) to under 100 (Quality Commitment 1)	EQB/QAC	Quarterly report on Quality Commitment performance.	SHMI also features already in Q+P report.
<ul style="list-style-type: none">• Reduce patient harm events by 5% (Quality Commitment 2)	EQB/QAC	Quarterly report on Quality Commitment performance.	-
<ul style="list-style-type: none">• Achieve a 97% Friends and Family test score (Quality Commitment 3)	EQB/QAC	Quarterly report on Quality Commitment performance.	FFT also features already in Q+P report.
<ul style="list-style-type: none">• Achieve an overall “Good” rating following CQC inspection	EQB/QAC	TBC	CQC Steering Group now established : frequency of reporting to EQB/QAC to be confirmed.
<ul style="list-style-type: none">• Develop a “UHL Way” of undertaking improvement programmes	TB	TBC	Bid to NHS TDA in progress. Reporting arrangements to be confirmed once outcome of bid is known.
<ul style="list-style-type: none">• Implement the new PPI Strategy	TB	3 x p.a.	New reporting arrangement to be introduced 2015/16.

2. AN EFFECTIVE AND INTEGRATED EMERGENCY CARE SYSTEM

PRIORITY	REPORTING TO	FREQUENCY	COMMENTS
<ul style="list-style-type: none"> Reduce emergency admissions through more comprehensive use of ambulatory care 	EQSB/TB	Monthly	More consistent reporting of performance against action plan to be implemented for 2015/16. LLR Dashboard also to be submitted to TB as an appendix to monthly report
<ul style="list-style-type: none"> Improve the resilience of the Clinical Decisions Unit at Glenfield Hospital 	EQSB/TB	Monthly	More consistent reporting of performance against action plan to be implemented for 2015/16. LLR Dashboard also to be submitted to TB as an appendix to monthly report
<ul style="list-style-type: none"> Improve the resilience of the Emergency Department in the evening and overnight 	EQSB/TB	Monthly	More consistent reporting of performance against action plan to be implemented for 2015/16. LLR Dashboard also to be submitted to TB as an appendix to monthly report
<ul style="list-style-type: none"> Reduce emergency medicine length of stay through better clinical and operational processes 	EQSB/TB	Monthly	More consistent reporting of performance against action plan to be implemented for 2015/16. LLR Dashboard also to be submitted to TB as an appendix to monthly report
<ul style="list-style-type: none"> Substantially reduce ED ambulance turnaround times 	EQSB/TB	Monthly	More consistent reporting of performance against action plan to be implemented for 2015/16. LLR Dashboard also to be submitted to TB as an appendix to monthly report.

			This metric to also feature in new Performance Dashboard.
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3. SERVICES WHICH CONSISTENTLY MEET NATIONAL ACCESS STANDARDS			
PRIORITY	REPORTING TO	FREQUENCY	COMMENTS
<ul style="list-style-type: none"> • Deliver the three 18 week RTT access standards 	EPB/IFPIC	Monthly	Features already in Q+P report. Also will feature in new Performance Dashboard
<ul style="list-style-type: none"> • Deliver the three key Cancer access standards 	EPB/IFPIC	Monthly	Features already in Q+P report. Also will feature in new Performance Dashboard
<ul style="list-style-type: none"> • Deliver the diagnostics access standard 	EPB/IFPIC	Monthly	Features already in Q+P report. Also will feature in new Performance Dashboard
<ul style="list-style-type: none"> • Implement tools and processes that allow us to improve our overall responsiveness through tactical planning 	EPB/IFPIC	Bi-annually	New reporting arrangements to be implemented 2015/16.

4. INTEGRATED CARE IN PARTNERSHIP WITH OTHERS			
PRIORITY	REPORTING TO	FREQUENCY	COMMENTS
<ul style="list-style-type: none"> • Deliver the Better Care Together year 2 programme of works 	ESB/TB	Monthly	New reporting arrangements to be implemented 2015/16.
<ul style="list-style-type: none"> • Participate in BCT formal public consultation 	ESB/TB	Monthly	New reporting arrangements to be implemented 2015/16.
<ul style="list-style-type: none"> • Develop and formalise partnerships with a range of providers including tertiary and local services (e.g. with Northamptonshire) 	ESB/TB	Monthly	New reporting arrangements to be implemented 2015/16.
<ul style="list-style-type: none"> • Explore new models and partnerships to deliver integrated care 	ESB/TB	Monthly	New reporting arrangements to be implemented 2015/16.

5. ENHANCED DELIVERY IN RESEARCH, INNOVATION AND CLINICAL EDUCATION			
PRIORITY	REPORTING TO	FREQUENCY	COMMENTS
<ul style="list-style-type: none"> Develop a robust quality assurance process for medical education 	EWB/TB	Quarterly	Trust Board to continue to receive quarterly updates on medical education in 2015/16.
<ul style="list-style-type: none"> Further develop relationships with academic partners 	ESB/TB	Monthly	New reporting arrangements to be implemented in 2015/16.
<ul style="list-style-type: none"> Deliver the Genomic Medicine Centre project 	ESB/TB	Quarterly	Trust Board to continue to receive quarterly updates on research and innovation 2015/16.
<ul style="list-style-type: none"> Comply with key NIHR and CRN metrics 	ESB/TB	Quarterly	Trust Board to continue to receive quarterly updates on research and innovation 2015/16.
<ul style="list-style-type: none"> Prepare for Biomedical Research Unit re-bidding 	ESB/TB	Quarterly	Trust Board to continue to receive quarterly updates on research and innovation 2015/16.
<ul style="list-style-type: none"> Develop a Commercial Strategy to encourage innovation within UHL 	ESB/TB	Quarterly	Trust Board to continue to receive quarterly updates on research and innovation 2015/16.

6. A CARING, PROFESSIONAL AND ENGAGED WORKFORCE

PRIORITY	REPORTING TO	FREQUENCY	COMMENTS
<ul style="list-style-type: none"> Accelerate the roll out of Listening into Action 	EWB/TB	Quarterly	Trust Board to continue to receive quarterly report on Workforce and Organisational development plan 2015/16.
<ul style="list-style-type: none"> Take Trust-wide action to remove “things that get in the way” 	EWB/TB	Quarterly	Trust Board to continue to receive quarterly report on Workforce and Organisational development plan 2015/16.
<ul style="list-style-type: none"> Embed a stronger more engaged leadership culture 	EWB/TB	Quarterly	Trust Board to continue to receive quarterly report on Workforce and Organisational development plan 2015/16.
<ul style="list-style-type: none"> Develop and implement a Medical Workforce Strategy 	EWB/IFPIC	TBC	IFPIC has received reports in the past on the Workforce Strategy; and is to receive reports on the Workforce Cross Cutting workstream.
<ul style="list-style-type: none"> Implement new actions to respond to the equality and diversity agenda including compliance with the new Race Equality Standard 	EWB/TB	Bi-annually	Trust Board to continue to receive bi-annual reports on equality governance 2015/16.
<ul style="list-style-type: none"> Ensure compliance with new national whistleblowing policies 	EQB/QAC – or TB?	Quarterly	Include in monthly Patient Safety report to QAC - alongside 3636/Gripe tool reports – or report quarterly to TB separately in future?

7. A CLINICALLY SUSTAINABLE CONFIGURATION OF SERVICES, OPERATING FROM EXCELLENT FACILITIES

PRIORITY	REPORTING TO	FREQUENCY	COMMENTS
<ul style="list-style-type: none"> • Deliver the actions required for year 2 of the 5 Year Plan: • Develop Site Development Control Plans for all 3 sites • Improve ITU capacity issues including transfer of Level 3 beds from LGH • Commence Phase 1 construction of the Emergency Floor • Complete vascular full business case • Deliver outline business cases for <ul style="list-style-type: none"> Planned Treatment Centre Maternity Children's Hospital Theatres Beds 	<ul style="list-style-type: none"> ESB/TB ESB/TB ESB/TB ESB/TB ESB/TB ESB/TB 	<ul style="list-style-type: none"> Monthly Monthly Monthly Monthly Monthly Monthly 	<ul style="list-style-type: none"> New reporting arrangement to be introduced 2015/16. New reporting arrangement to be introduced 2015/16. New reporting arrangement to be introduced 2015/16. New reporting arrangement to be introduced 2015/16. New reporting arrangement to be introduced 2015/16. New reporting arrangement to be introduced 2015/16.

<ul style="list-style-type: none"> • Develop a major charitable appeal to enhance the investment programme 	CFC	Standing item	Recommend this becomes a standing item on CFC agenda 2015/16.
<ul style="list-style-type: none"> • Deliver key operational estates developments: 	ESB/TB	Monthly	New reporting arrangement to be introduced 2015/16.
<ul style="list-style-type: none"> • Construction of the multi-storey car park 	ESB/TB	Monthly	New reporting arrangement to be introduced 2015/16.
<ul style="list-style-type: none"> • infrastructure improvements at LRI at and GH 	ESB/TB	Monthly	New reporting arrangement to be introduced 2015/16.
<ul style="list-style-type: none"> • Phase 1 refurbishment of wards and theatres 	ESB/TB	Monthly	New reporting arrangement to be introduced 2015/16.

8. A FINANCIALLY SUSTAINABLE NHS ORGANISATION			
PRIORITY	REPORTING TO	FREQUENCY	COMMENTS
<ul style="list-style-type: none"> • Deliver the agreed 2015/16 I&E control total - £36m deficit 	EPB/IFPIC	Monthly	Will also feature in new Performance Dashboard
<ul style="list-style-type: none"> • Fully achieve the Trust's CIP target for 2015/16 	EPB/IFPIC	Monthly	Will also feature in new Performance Dashboard
<ul style="list-style-type: none"> • Revise and sign off by Trust Board and TDA of the Trust's 5 year financial strategy 	ESB/IFPIC/TB	Annually and bi-annually	Financial strategy to be reviewed annually when preparing AOP; mid-year review to be implemented also in 2015/16.
<ul style="list-style-type: none"> • Continue the programme of service reviews to ensure their viability 	ESB/IFPIC	Via CMGs' presentations to IFPIC	CMGs to be briefed to update IFPIC on outcome of service reviews when presenting to IFPIC

9. ENABLED BY EXCELLENT IM&T			
PRIORITY	REPORTING TO	FREQUENCY	COMMENTS
<ul style="list-style-type: none"> Prepare for delivery of the Electronic Patient Record in 2016/17 	EIM&T/IFPIC <u>or</u> TB?	Quarterly	IFPIC receives a report quarterly at present : retain at IFPIC or to TB in future instead?
<ul style="list-style-type: none"> Ensure that we have a robust IM&T infrastructure to deliver the required enablement 	EIM&T/IFPIC <u>or</u> TB?	Quarterly	IFPIC receives a report quarterly at present : retain at IFPIC or to TB in future instead?
<ul style="list-style-type: none"> Review IBM support to ensure that we have the right resources in place to enable IM&T excellence 	EIM&T/IFPIC <u>or</u> TB?	Quarterly	IFPIC receives a report quarterly at present : retain at IFPIC or to TB in future instead?

Note:

It is also intended to introduce quarterly reporting to the Trust Board in 2015/16 on 'Progress against the Annual Priorities 2015/16'. This will be in the form of a dashboard, appended to the Chief Executive's monthly report. First such report to be submitted to Trust Board July 2015.

Key : TB Trust Board
 IFPIC Integrated Finance, Performance and Investment Committee
 EPB Executive Performance Board
 ESB Executive Strategy Board
 EWB Executive Workforce Board
 EIM&T Executive IM&T Board
 EQB Executive Quality Board
 QAC Quality Assurance Committee
 EQSB Emergency Quality Steering Board