

Chairman's Note

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Trust Board paper C

Dear Board Member,

Key considerations

Since we last met the key things on my mind have been:

- Given the unremitting pressures on our emergency services how do we ensure that this does not create an imbalance for our plans for the future?
- As a Board how do we ensure that we continue to champion diversity issues within our organisation as an employer and service provider and also externally as a major player in the local and regional community?
- As one of the NHS organisations within our local health and social care system how do we ensure there is an appropriate governance framework and engagement with our local communities ?

Priority Items & Questions

In preparation for our next Board meeting I would like to highlight the following priority items and a few specific questions to consider.

On this particular Board agenda and as in the past few months, the Chief Executive's monthly performance report and the Chief Operating Officers continue to highlight both the continuing pressures on emergency services and the challenges in achieving targets such as the four hour barometer. The Board continues to be focused on this issue which is not being experienced by this acute Trust in isolation from others. A number of Board representatives visited Heart of England NHS Trust and this was followed by a very informative discussion at the last Thinking Day where their clinicians shared how they had approached these issues. Of particular interest was the manner in which acute physicians as opposed to emergency specialists were managing attendances and admissions. It would appear to be drawing on the recommendations of the Future Hospitals Commission report (published in 2013) which identified up to 40% of attendees at emergency services as having several medical conditions and that the front door response needed to be organised appropriately. By the time this Board meets some members will have visited the Royal Wolverhampton Trust which has had the experience of a new emergency floor for the past twelve months as well as developing some innovative relationships with the

primary care sector. With winter fast approaching the Board will continue to focus on this issue.

Last year the Trust Board agreed to establish a task and finish group to consider diversity issues within the organisation. A number of recommendations were made including establishing targets to address the imbalance at senior levels within the organisation. This issue (in business terms) is about utilising the best human resources that we have to the utmost, ensuring that we live up in practice to our values espousing fairness, and strengthening the well documented link between high levels of motivation to high performance. There is considerable literature (Snowy White Peaks and elsewhere) which effectively makes the point that policies without resources and goals will not achieve their aspirations. The Trust Board now has its monthly dashboard highlighting this issue as well as its reports at regular intervals reporting on progress. In addition to this I propose that we have a session at the January Thinking Day in order to do some deep dives and draw on some external expertise in order to review our progress.

The Board will be aware that both nationally and locally work has been ongoing in relation to the System Transformation Plans (STPs). This will have at least two implications for the Board. The first is that although the STP process is (rightly) focusing on transformation and collaboration on a system wide basis and until there is a change in the statutory position, this Board will continue to have its existing legal and fiduciary responsibilities and be held accountable for them. The second is that both we and our existing health and local authority will need to ensure that there is an appropriate level of transparency and engagement with our local communities. As we go forward with the STP process, as a Board we will need to keep both these dimensions in mind.

Last month I received (on behalf of the Trust) a cheque from the Federation of Muslim Organisations making a contribution to our appeal for a mobile scanner. In addition I also attended a charity dinner organised on behalf of a Sikh family as a tribute to a family member who had died a year ago and donated organs to three individuals. He was a well known promoter of Bhangra music and with nearly twenty live acts, it was a recognition of his contribution . I also attended a Sikh temple where I addressed the congregation. These occasions only serve to illustrate the diversity of our local communities and how we as a public body need to be communicating and engaging with them on a systematic basis.

I look forward to seeing you at our forthcoming board meeting on 3 November 2016.

Regards,
Karamjit Singh

Chairman, University Hospitals of Leicester NHS Trust