

Chairman's Note

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Trust Board paper C

Dear Board Member,

Key Considerations

There are three issues that I would like to highlight in my report for this particular Board meeting.

Performance (4 hour targets) in Emergency Department and issues arising from this

1. Following our July Board meeting, we subsequently had a review meeting with our performance regulator (NHS Improvement) where most of the discussion focused on the unacceptably poor level of service being provided to patients by the Emergency Department (ED) with the key indicator here being the national four hour target. This is of course a whole hospital issue because the four hour indicator reflects not only the time taken within the ED setting but also acts as a proxy for other factors including flow throughout the hospital. The Executive Team have considered these issues in detail and put forward an Action Plan for consideration at this particular Board meeting. In addition to this I had invited the Non-Executive Directors, a Patient Partner representative, a consultant from another acute Trust and a CCG lay representative to participate in a 'deep dive' process in the Emergency Department so that we had an informed perspective on what we thought was happening as well as the ability to contribute to further discussions in an effective manner. Following this activity we had a Special (non public) Board Meeting on 25th July 2017 which I had already decided to convene following our discussions with the regulator. The focus of this Board meeting was to consider a draft Action Plan and take note of the perspectives round the table in formulating an effective response to tackling this major service challenge. It is my intention that all future Board meetings dealing with the ED and associated matters will be discussed on the public part of the agenda, unless there is commercially sensitive information.
2. It is important that as a unitary Board we consider these issues affecting the ED against the context of the whole hospital needing to play its part. We also need to recognise the hard work and commitment of staff in the ED and elsewhere. However we also have a collective responsibility as a Board to focus on the Action Plan with robust and constructive challenge in terms of holding the appropriate Directors to account and probe where it either goes off plan or we feel behavioural or other performance issues are not being addressed effectively. Within a unitary Board it is the role of Executives to undertake effective actions (ie realisable with clear outcomes) and it is the role of Non Executives to hold them to account against an accountability framework incorporating clarity of responsibilities and expectations. The overall 4 hour target we have to reach

by the end of September is 90%. This can only be achieved if all Clinical Management Groups play their part in this; the Executive Team holds them to account; and we as a Board are appropriately assured this is happening in practice.

Diversity at senior levels

3. I was recently invited by the Bishop of Leicester to assist in the planning of a conference he will be convening later in the year for an invited audience of Chairs and Chief Executives from the private, public and third sectors. The focus of the conference will be on the lack of representation of persons from minority ethnic communities at senior levels across many sectors in Leicester, Leicestershire and Rutland (LLR). This is set against a background context of significant changes in the demography of our community during the past five decades or so. As one of the largest employers in the LLR area the Board has a responsibility to take note and respond proactively to the question I have been asked on various occasions “why is UHL not more reflective of its local community at senior levels given that merit is evenly spread across all communities?” It is important in my view to triangulate external (and probably more critical) perceptions against internal belief systems held within organisations.

4. Again as a unitary Board we need to demonstrate to internal and external audiences that we take these issues seriously (and the aspirations reflected in our targets as opposed to quotas which are not legally permissible). I hope that the discussion around the diversity report on the Board agenda and our reporting requirements under the national Workforce Race Equality Strategy (WRES) focuses on how the executive team assures the Board as a whole that this is happening in their own direct areas of control as well as ensuring that the Clinical Management Groups are demonstrably aligned to this aspiration in practice. Data which highlights what is happening at the shortlisting, interview, job offer stages together with other indicators should form the basis of any assurance on performance in this area being provided. Given the relative lack of movement for this particular indicator on the Board dashboard I think it is clear that we need to go further and faster on equality.

The well led framework for assessing corporate governance within NHS Trusts

5. At a national level it is clear that two of the national regulators (NHS Improvement and the Care Quality Commission) are now working together in order to develop a common framework for assessing corporate governance in the NHS and more commonly known as the well led framework for NHS Boards . The two previous Board Thinking Days have focused on this theme with the assistance of external facilitators and speakers sourced by NHS Providers. The questions and issues arising from these sessions will be used to inform a specific session at the next Board Thinking Day with some proposals for how we could go further in the implementation of an effective and robust Performance and Accountability Framework.

6. I think one immediate change we can implement at the Board immediately is as part of this approach is to ask all of you under the Any Other Business agenda – do you think the Board at this meeting has given consideration to the most important issues facing the organisation? If not what else should we be considering at Board meetings which we are not? It is not my intention to ignite a discussion around this item when I ask this question but I would welcome responses either orally (immediately) or by email within a day or so after the meeting.

I look forward to seeing you at our forthcoming Board meeting on 3 August 2017.

Karamjit Singh
Chairman, UHL