

# Chairman's Note

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**Trust Board paper C**

Dear Board Member,

## **KEY CONSIDERATIONS**

I would like to firstly return to the theme I raised in my Note to the last Board meeting, namely how we embed transformation processes within the Trust and how we ensure that we have the appropriate leadership and styles to achieve this.

Last week I had the opportunity to participate as a panellist on a conference organised at the Health Foundation which considered some detailed research on health boards undertaken by the Universities of Birmingham and Manchester Business Schools and the Nuffield Trust. The title of the conference (and research report) was '5 Years On: How has the Francis Report changed leadership in NHS hospitals?'. Colleagues will be aware that the 2013 Public Inquiry chaired by Sir Robert Francis looked at what had gone wrong in the hospital at Mid Staffordshire FT and at local and national level which meant that so many patients were harmed. The Francis Report concluded that part of the problem was the Board which was responsible for the hospital. We are of course aware that our regulators, notably the Care Quality Commission and NHS Improvement, are working closely together to focus on the extent that NHS Boards are demonstrably well led in terms of their ability to understand and respond effectively to the opportunities and challenges facing them whilst ensuring that patient safety and quality is a central part of their focus.

We know that performance in ED and elsewhere in the Trust, workforce challenges, focusing on financial efficiency, keeping abreast of service changes elsewhere and ensuring a consistent patient focus all have to be met in order to provide our local communities with the service they should rightly expect. That requires transformation outcomes and leadership in terms of culture, mind sets and behaviours because the NHS needs to change if it is to remain sustainable in the longer term.

I would like to underline the Board's willingness and commitment to transformation and leadership by ensuring all of the March Thinking Day on March 8th is devoted to these themes. A number of external speakers will complement some internal presentations. In addition to Board members and senior directors, I will be inviting senior representatives from all the Clinical Management Groups so that they can also participate in our discussions.

I would then like to see a continued focus on these themes both at the People, Process and Performance Committee and at the Board when we consider this is appropriate.

My second theme is that this year we will be marking the seventieth anniversary of the NHS which is a remarkable achievement in itself. The comments above have focused on the need for transformation but I would also like the Board at its Thinking Day next week to consider what we should be doing in order to mark this year locally. We will have the opportunity to think about

some suggestions and I would be grateful if Board colleagues could also supplement this with their own ideas. I would like to suggest that one overarching theme should be to ensure that all our diverse communities celebrate this anniversary but also emphasise that we also see ourselves as an integral part of the community.

My third and final theme is to welcome Mrs Victoria Bailey to the Trust Board as a Non-Executive Director and whose appointment was recently approved by NHS Improvement following an openly advertised competition for this role. I am sure colleagues will join me in congratulating her and we look forward to her contributions in due course.

I look forward to seeing you at our forthcoming Board meeting on 1st February 2018.

Regards,

Karamjit Singh

**Chairman, University Hospitals of Leicester NHS Trust**