

Chairman's Note

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Trust Board paper C

Dear Board Member,

KEY CONSIDERATIONS

In my previous notes to the Board, I have focused on the environmental context of ambiguity, complexity and uncertainty facing Trusts such as ours and the implications of this for the Board and organisation.

One important role for this Board is combining clarity of thinking together with processes focusing on risk and performance that are aligned to a robust governance architecture through Board committees and executive forums to facilitate this.

However the Board's primary responsibility in ensuring the sustainability of this organisation and its contribution to a local health and social care system that meets the needs of a diverse demography and geography needs an outward and forward looking perspective. The recent publication of the national Ten Year Plan should rightly focus our minds on what kind of health services we want to aim for over the next decade.

Whilst we have historically been underfunded in terms of receiving capital resources during the past two decades, we should assume that future resource allocation in terms of capital receipts will probably be very constrained. Against this backdrop our future transformation plans for services (and their sustainability) need to be articulated clearly as well as committing ourselves to an ongoing two way conversation with a variety of internal and external audiences.

I have previously commented about the concept (prevalent in India) known as *Jugaad* and is defined as 'frugal innovation' which is essentially about how to transform processes and organisations so that quality of service to the citizen/customer/consumer is enhanced but at minimal additional cost. It also embraces the concept of opportunity cost so that existing structures, systems, processes and services are critically examined in terms of whether or not they are achieving what they were supposed to do and evaluating the extent of their relative impact. This is at odds with mindsets and practices incorporating the implicit assumption that change can only occur if additional resources are available.

Change occurs in large (and small) organisations when Boards and senior leaders demonstrate their own effectiveness and ability to shape culture and outcomes by working through people. Given that our staff comprise over two thirds of the resources that we utilise each financial

year, creating a culture and structures that provide for empowered and innovative decision making at all levels is essential. We have a large and diverse workforce covering a wide range of clinical and non clinical roles and we need to consider how the future needs of our local communities are met by aligning the changes in provision of our services. This will require a strategic approach that encompasses various strands such as ensuring efficiency, productivity, quality are brought together in a coherent framework and are implemented by leadership and staff at various levels in the organisation. During this journey we will also want to celebrate and recognise the positive and high quality experience that many of our patients receive but we cannot afford to be complacent or assume that our scope for change is constrained. The insights of our staff and our ability to capitalise on them will be key to this. .

There are a wide range of experiences and perspectives around this Board table, covering both the NHS and a range of other sectors which provides us with an opportunity for a diversity of thought and expression during any discussions.

With this in mind I would appreciate your comments on the following issues:

- (a) Are there other strategic issues in addition to those outlined above that you think the Board should be thinking about both in the immediate future (that is the next year or so) and over the next five years or beyond?
- (b) Are there any other emerging risks or opportunities that the Board should be thinking about in the same timescale outlined above?
- (c) What is the weighting or priority that you would wish to see assigned to these themes in terms of future discussions? (These might be planned in terms of formal Board meetings, Board Thinking Days or in appropriate Board committees.)

I look forward to seeing you at our forthcoming Board meeting on 7 February 2019.

Regards,
Karamjit Singh

Chairman, University Hospitals of Leicester NHS Trust