

Overview of the roles and responsibilities of Board Sub-Committees and provide recommendations for the establishment of new Sub-Committee arrangements

Report to Board of Directors 7th September 2023

A review of existing Board sub-Committee arrangements has been undertaken with the objective of ensuring that each of the following has Board Sub-Committee ownership for governance and assurance on behalf of the Board of Directors:

- Trust Strategic Objectives and enabling sub-strategies
- Integrated Performance Report domains
- Board Assurance Framework Principal Risks

Audit and Assurance Committee and Charitable Funds Committee were not included within the scope of the review due to their discreet and statutory roles.

Findings

1. Strategic Objectives

Not all Strategic Objectives currently have enabling sub strategies in place and/or approved by Board. An overview of the current status is as follows:

- *Provide outstanding care in the best place at the right time*
We have a Quality Strategy in place and a Clinical Services Strategy is being developed.
- *Improve health and wellbeing within our communities*
We have Maternity action plans scrutinised by Quality Committee and Board and a Maternity Strategy is being developed.
We do not have an enabling sub-strategy or action plan to improve Health Inequalities or the health and wellbeing of our community. It is recommended that this is developed.
- *Empower and support our people to be the best they can be*
We have a People Strategy in place.
- *Continuously learn and improve*
We have enabling sub-strategies for Digital and Research in place.
We have an agreed structure and workplan for the Improvement Faculty but no Innovation and Improvement Strategy. It is recommended that this is developed.
- *Sustainable use of resources and estate*
The Financial Strategy requires review and refresh.
We have an Estates Strategy and a Green Plan in place.
- *Work collaboratively with partners in the community*
We do not have an enabling sub-strategy or action plan in place. It is recommended that this is developed.

2. Reporting Performance to Board of Directors

Performance is reported directly to the Board on a quarterly basis via the Integrated Performance Report or IPR (formerly named Single Oversight Framework report or SOF). It is suggested that this continues with assurance and oversight undertaken by sub-Committees by exception and/or at the request of the Board of Directors.

This is the current framework for the IPR domains of Quality Care, People and Culture and Best Value Care (alignment is with Quality Committee, People and Culture Committee and Finance Committee respectively). Timely Care does not routinely have ownership by a sub-Committee, although the Quality Committee does, by exception, scrutinise the patient impact of adverse performance. It is suggested that the Quality Committee is formally recognised as having responsibility and oversight for this domain.

3. Strategic Objectives currently not aligned to a Board Sub-Committee are:

- Improve health and wellbeing within our communities
- Work collaboratively with partners in the community

It is suggested that these are aligned to a Board Sub-Committee.

4. Learn and Improve is a Strategic Objective which is partially aligned to the People Culture and Improvement Committee. This committee does not currently have oversight of the Research and Digital Transformation elements of this Objective.

5. BAF Risks currently aligned to Board Sub-Committees:

PR1 Significant deterioration in standards of safety and care	Quality Committee
PR2 Demand that overwhelms capacity	Quality Committee
PR3 Critical shortage of workforce and capacity	People, Culture and Improvement Committee
PR4 Failure to achieve the Trust's financial strategy	Finance Committee
PR5 Inability to initiate and implement evidence-based improvement and innovation	People, Culture and Improvement Committee

The following are currently not aligned to a Board Sub-Committee are:

- PR6 Working with Partners
- PR7 Major disruptive incident

Risk Committee has oversight and updates are reported to Board via the CEO monthly report.

It is suggested that PR6 is aligned to a Board Sub-Committee and PR7 remains aligned to the Risk Committee and reported to Board via the Chief Executive's monthly report.

Suggestions for change

The Board has discussed establishing new Sub-Committee arrangements. There are 2 Strategic Objectives without alignment (Health and Wellbeing & Work collaboratively), and it is suggested that these are aligned to the new Sub-Committee, along with BAF risk PR 6 (Working with Partners). There is strong correlation between these Objectives and risk. The role of the Committee will be to ensure sub-strategies are in place which promote collaborative working, reduce health inequalities and are consistent with system wide strategies. The Maternity element of the Health and Wellbeing Strategic Objective should remain reported to Quality Committee and Board.

It is suggested that the new Sub-Committee be named 'Partnerships and Communities Committee'.

It is also suggested that the Quality Committee takes ownership of the Strategic Objective to Learn and Continuously Improve and BAF risk PR5. This would remove the responsibility for Improvement from the People, Culture and Improvement Committee and enable the whole of the Strategic Objective (which also includes Research and Digital) to receive focus and provide full assurance to the Board.

Furthermore, it is suggested that the Quality Committee is formally recognised as having responsibility and oversight for the IPR domain of Timely Care. This is consistent with the Committee's current ownership of BAF risk PR2 and the importance of recognising the importance of the inter-dependency between PR1 and PR2.

The adoption of these suggestions adds to the workload of the Quality Committee and therefore careful consideration should be made in respect of frequency of meetings, content of agendas and the underpinning architecture supporting the Committee. It is suggested that the Committee moves to a monthly meeting - reflecting both the increase in workload and the high risk scores for PR1 and PR2. It is further suggested that the annual workplan demonstrates a quarterly focus for Timely Care and for Improvement and Innovation.

The Appendix attached demonstrates each of the suggestions made and the resultant roles and responsibilities of each Board Sub-Committee. These arrangements should be reviewed for their effectiveness after 12 months.

The Board remains the place for oversight of the Trust wide corporate strategy which will be underpinned by separate sub-strategies reflecting the 6 Strategic Objectives all aligned with Sub-Committees. The Board also continues to scrutinise operational performance through receipt of the quarterly Integrated Performance Report and is supported through assurance and oversight undertaken by Sub-Committees by exception and/or at the request of the Board of Directors.

Appendix

Summary of the suggested roles and responsibilities

Sub-Committee	Quality	People and Culture	Finance	Partnerships and Communities
Strategic Objectives	Provide Outstanding Care in the best place at the right time To continuously learn and improve	Empower and support our people to be the best they can be	Sustainable use of resources and estate	Improve health and wellbeing within our communities Work collaboratively with partners in the community
Integrated Performance Report domain	Quality Care Timely Care	People and culture	Best value Care	
BAF Principal Risks	PR1 Significant deterioration in standards of safety and care PR2 Demand overwhelms capacity PR5 Inability to initiate and implement evidence-based improvement and innovation PR7 Major disruptive incident remains aligned to Risk Committee	PR3 Critical shortage of workforce capacity and capability	PR4 Failure to achieve the Trust's financial strategy PR8 Failure to deliver sustainable reduction in the Trust's impact on climate change	PR6 Working more closely with local health partners does not fully deliver the required benefits
Existing enabling Sub-Strategies	Quality Research Digital	People	Estates Green Plan	
Enabling Sub-Strategies in development	Clinical services Maternity Innovation and Improvement		Financial	Health Inequalities Partnership