Proposal to

Sherwood Forest NHS Foundation Trust

Approach to Board Evaluation



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1 Introduction

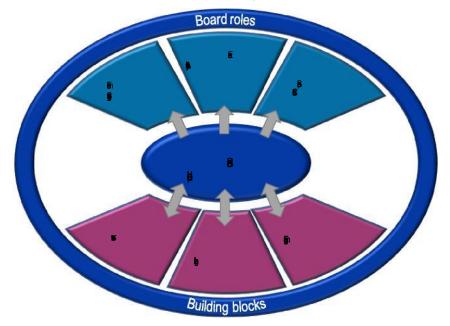
This proposal outlines a proposed menu of approaches to the systematic review of your Board. It builds on the work that we did with you to build a shared understanding of the characteristics of a high performing board – and your identification and ongoing pursuit of key areas for board development.

As you will be aware, we have recently completed a pilot board review aimed at testing the new Monitor guidance and have had sight of the nearly final document. The approach that we set out below would meet these requirements.

We would be very pleased to discuss the optimal combination of review elements to meet your needs.

2 Our Approach

Our approach and all of our tools use the 'Healthy NHS Board: principles for good governance', as the conceptual framework for our work with you. We have recently refreshed our tools and approach to ensure that we attend very specifically to the elements within the Monitor guidance.



As a reminder, the core themes within the Healthy NHS Board are:

As you will be aware, we are strongly committed to an 'organisational development' approach that builds relationships with clients and enables them to find their way to their own solutions, supported by informed and positive challenge. We understand that adults learn best when they have a significant degree of control over the process and when they are enabled to learn in an applied way. **Board Review Proposal**

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Our experience of working in healthcare settings tells us that this empowered and applied approach to development combined with a secure grasp of the evidence-base is particularly important. The cornerstones of our approach are therefore:

- **Relationship building:** We seek to build strong relationships with our clients. We know from client feedback that a key part of this rests on the credibility, seniority and experience of our team.
- **Perceptive and informed diagnosis:** We are respected for our diagnostic skills, which enables us to get to the heart of any underlying issues, enabling us to identify strengths as well as key challenges facing the Board, in its specific context.
- Shared and collaborative problem solving: We recognise the significant breadth and depth of experience, expertise and understanding present within the Board. External consultancy needs to optimise this expertise by engaging in a collaborative and reflective way to explore and understand your unique challenges and your effectiveness thereby securing Board ownership and commitment to the development 'options'

2.1 Board Health Review

The Board Health Review could include a combination of the following elements. Those with asterisks are, in our view, optional.

- Desk review of Board documentation
- Board observation
- Committee observation
- Completion of Board member skills inventory
- On-line assessments of whole Board effectiveness by both Board members and internal and external stakeholders
- Individual 360 degree review for Board members
- In- depth interviews with Board members combined with individual 360 degree feedback in this option is chosen
- Focus groups

The elements with asterisks are options that you may wish to consider but are not essential.

2.1.1 Desk review of Board and Committee documentation

The style of governance documents produced can provide background on the governance architecture in place as well as provide real insights into the preferred ways of working. These preferences are often expressed formally and informally through written documentation. We are aware that you have given considerable focus to

'intelligence' for the Board and so this seems an important area for focused review. Documentation to be reviewed would include a sample of Board and committee papers, minutes, agendas, terms of reference, annual report, audit reports, performance reports, plus any other relevant regulators' reports.

2.1.2 Observation of Board and Committee meetings

Our approach includes observing a Board meeting, both in public and private session, as it is important we see the Board in action working together. This provides an opportunity to observe the dynamics of the Board, the style and approach, how Board information is used, how meeting processes are managed and how the minutes reflect what happened.

You may also wish to commission us to observe key committees in session.*

2.1.3 Board Skills Inventory*

We would propose to work collaboratively with you to tailor to your needs our approach to collecting information about Board member's skills, areas of expertise and specific interests. Board members would be invited to complete an inventory, using the agreed design.

This would provide a comprehensive but easily digestible picture of current Board skills and knowledge to the Governors Nominations Committee in a format that allows them to identify any gaps – and to facilitate regular update as required.

2.1.4 On-line assessment of overall Board effectiveness

We would propose that you use the following two tools:

Whole Board Self-assessment Survey: This online survey is specifically tailored to the needs of Foundation Trusts and incorporates the Monitor guidance model for Board evaluation. We invite all Board members to assess how effectively the Board is fulfilling its role. It also explores the extent to which the Board is following best practice in building Board effectiveness. The survey combines questions that call for both ratings and free text comments. All responses are treated confidentially – individual responses are not attributed in the report that is produced. The survey takes Board members 40 to 45 minutes to complete. The questions are focused around six themes; they test all aspects of governance identified in 'The Healthy NHS Board 2013'.

Stakeholder Survey The online stakeholder survey invites internal (Governors, Senior Managers and Clinicians who have exposure to the Board) and external stakeholders (patient and carer groups, commissioners, partners organisations) to provide their views on the effectiveness and impact of the Board. The questions are tailored to the stakeholder, and the perspectives that they may be able to offer.

2.1.5 Individual 360° Surveys for Board directors*

You may wish to consider including individual 360 degree feedback. This would need careful consideration as it requires significant investment of Board member time but does provide a rich source of feedback to build individual director effectiveness. Board

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directors are given the opportunity to receive feedback, from a range of colleagues, on their effectiveness as a Board director through this 360° survey option. The tool is specifically designed for Board members of Foundation Trusts.

There are four distinct versions of the 360° Surveys, one for each of the following Board roles:

- Chair
- Chief Executive
- Executive Director (would include the Company Secretary)
- □ Non-Executive Director

All the 360° Surveys include core questions that are specifically about directors' corporate Board role, supplemented by a range of additional questions that relate to the particular Board role.

A personal, confidential, report of the 360 degree feedback is prepared for each director. This is delivered through one-to-one feedback prepared and provided by an experienced and accredited consultant within our core team. The feedback is designed to have a developmental focus and will enable the individual to reflect on their strengths and development needs and capture these in a standard format. The individual Board member 360 degree feedback session can be combined with the in-depth interview (see below) to make best use of Board member time.

In line with best practice, our approach to 360 degree feedback suggests that the feedback should 'belong' to the individual, who would then be encouraged to share the insights and the standard PDP emerging from the process with their 'line manager' as appropriate.

2.1.6 In depth Interviews

Once we have the results from the online survey, and if you choose to do this, the individual 360 degree, we will conduct individual one to one interviews with Board members and the Board Secretary. If you choose to do individual 360, we would combine feedback with the in-depth interview to make best use of Board member time. This is a very effective way of developing a detailed and nuanced understanding of how the Board operates.

We conduct these interviews face-to-face. We would use the insights from the selfassessment questionnaire described above to focus the discussions, and would provide a short agenda for the interviews in advance.

Comments made are treated confidentially, as our reporting of findings is thematic. This underpins and encourages open discussions in the interviews.

2.1.7 Focus Groups

The final element of the Board Health Review stage is to conduct focus groups. These could comprise a cross section of Senior Managers and senior Clinical Leaders who are likely to experience the Board but are not part of it. Boards find this perspective and feedback invaluable as they shape their development agenda.

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We would also propose to conduct a focus group comprising a sample Governors and representatives of service user/carer groups as key Board partners. We have proposed to undertake a single focus group with Governors and service user/carer representatives but if resources allow, you may wish to consider the option of running separate focus groups.

We would use the feedback from the 'stakeholder survey' as the basis for the design of this session. Focus Groups provide another opportunity for a more detailed exploration of the 'felt' impact of the Board's recovery and well-being ambition.

2.2 Feedback and Board development planning

This element includes:

- ☐ Feedback to Chair and CE
- Board Development Action Planning Workshop
- Outcomes report from the workshop
- □ White board session to shape Board development programme*

2.2.1 Feedback to Chair and Chief Executive

We believe that the value of our approach to Board review lies in the use of wellconstructed review tools *combined* with thoughtful, expert analysis that enables us to get to the heart of the matter. The Foresight Partnership team considers all the outcomes from the diagnostic 'Board Health Review' and prepares a presentation setting out the main findings and highlighting areas for development. This will also provide a quantitative and qualitative comparative perspective against FT Boards with whom we have worked. Clients will also receive reports from the whole Board and stakeholder surveys. It includes an aggregate overview from the individual director 360s. The focus will be strongly developmental.

We discuss these findings initially with the Chair, Chief Executive and Director of Workforce and OD of the Trust. This provides an opportunity to debate and fine tune the Board development action planning session.

Based on the outcome of the review and the approach agreed with the Chair and Chief Executive, we design a workshop session for the whole Board aimed at sharing overall feedback and constructing a development plan that responds to the needs and issues illuminated through the Board Health Review.

Our experience is that this can be undertaken in a half a day and can therefore often be accommodated within the existing, agreed programme of Board dates.

2.2.2 Feedback and Development Workshop

The programme of evaluation would continue with a half–day Board away-day aimed at sharing the evidence and analysis from the diagnostic stage and testing our preliminary conclusions about Board development needs and support options. As well as building a

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shared view of Board strengths and areas for development, we could use this opportunity to begin to tackle one or two of the priority development needs.

We offer expert facilitation skills to enable the Board to make the most productive use of the time available at the workshop.

2.2.3 Developing a Board development plan*

Our experience is that it is sometimes helpful to take the outputs from the Board Workshop to a facilitated 'white board session' with a small group (usually Chair, Chief Executive and Board Secretary) in order to hone the Board development plan. The alternative would be for this next step to be handled internally,

3 Indicative Timing

Indicative timings are set out below.

Activity	Proposed timing
Board Health Review	
Briefing and set-up	Early June
Documentation Review	Mid - June
Board Observation	26 June or 31 July
Online assessments of overall Board effectiveness:	Launch mid June
- Whole Board -Stakeholder	Complete Mid July
Individual 1-1 interviews	Late July/August
Focus groups with:	Mid late lub.
Senior Managers/clinicians	Mid- late July
Governors and service user/carer reps	

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Activity	Proposed timing
Observation of Committees	ТВС
Skills Inventory	Mid -June
Individual 360s	Launch mid JuneClose mid July.
Feedback and Board development action planning	
Analysis and preparation of feedback	August
Initial feedback to Chair and Chief Executive	Early Sept
Feedback and Development workshop	Mid Sept
Outcomes report from development workshop	Mid Sept
White board session to shape board development plan	

4 Conclusion

In conclusion, we hope that this proposal provides you with a clear sense of the options for how we might approach the review of your Board.

We would be delighted to continue to work with you on your developmental journey as a board and look forward to talking to you about the optimal combination of review elements.