

## Board of Directors

4<sup>th</sup> May, 2023

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| <b>Report Title:</b>             | <b>Annual Effectiveness Review</b>            |
| <b>Executive/NED Lead:</b>       | Steve Parsons, Interim Director of Governance |
| <b>Report author(s):</b>         | Steve Parsons, Interim Director of Governance |
| <b>Previously considered by:</b> | N/A   |

Approval
  Discussion
  Information
  Assurance

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| <p>In line with the requirements of the Code of Governance for NHS providers, an exercise to review the effectiveness of the Committee has been undertaken. This focused on capturing the views of members related to key matters that impact on effectiveness, looking beyond just compliance with the Terms of Reference to ensure that the processes of the Committee are providing appropriate assurance.</p> <p>The outcomes of the effectiveness survey for the Board are shown in the attached PDF. Key issues for the Board to consider from the outcomes are-</p> <ol style="list-style-type: none"> <li>i. There are divergences of view on the quality of papers being brought for Board consideration (Q9 to 11 and 13)</li> <li>ii. The size of the Board pack overall is seen as on the large side, which impacts on the ability of Directors to thoroughly review and engage with the papers prior to the meeting (Q14)</li> <li>iii. There is a slight view that the balance of Board time leans too much towards operational matters, when balanced against consideration of strategy (Q31)</li> <li>iv. There are a range of view regarding Board visibility for proposals as they are developing, and before they come to Board for final approval (Q32)</li> <li>v. Responses lean towards the view that Board Committees meet more often than is necessary (Q34); although there is a clearer split between Executive Director and Non-Executive Director views on this question, with Executive Directors tending to feel meetings are too often</li> <li>vi. There is a divergence of view as to whether the Board is getting assurance that its decisions are being implemented appropriately (Q38)</li> </ol> <p>There is also a concern regarding the visibility to Board of the work of the Integrated Care System and the Alliances, which is being reflected through the exercises being reviewed for each Committee.</p> |  |  |
| <b>Action requested of the Committee</b>   |  |  |
| The Board is invited to note the outcomes of the effectiveness review exercise.  |  |  |
| <b>Link to Strategic Objectives (SO)</b>   |  | <b>Please tick</b>   |
| SO1  | Keep people in control of their health | <input type="checkbox"/>   |
| SO2  | Lead the integration of care           | <input type="checkbox"/>   |
| SO3  | Develop our centres of excellence      | <input type="checkbox"/>   |
| SO4  | Support and develop our staff          | <input type="checkbox"/>   |
| SO5  | Drive technology enabled care          | <input type="checkbox"/>   |
| <b>Risk Implications for the Trust</b> <i>(including any clinical and financial consequences)</i>  |  | <b>N/A</b>   |
| <b>Trust Risk Appetite</b>   |  | The Board has a cautious risk appetite when it comes to compliance and regulatory issues. Where the laws, regulations and standards are about the delivery of safe, high quality care, or the health and |

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|   | safety of the staff and public, it will make every effort to meet regulator expectations and comply with them and will only challenge them if there is strong evidence or argument to do so and the gain will outweigh the adverse consequences. |
| <b>Legal and regulatory implications</b> ( <i>including links to CQC outcomes, Monitor, inspections, audits, etc.</i> ) | The NHS Provider Code of Governance requires that the effectiveness of the Board, Board Committees and individual Directors is reviewed on an annual basis.  |
| <b>Financial Implications</b>   | N/A  |
| <b>Equality and Diversity</b>   | N/A  |