

# Developmental Well-led Review 2022/23

## Implementation plan

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### **Recommendation 1**

Future Board development activities should include a workshop focused on effective scrutiny and challenge in the context of seeking strategic assurance.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
1.1	Workshop to be arranged for the Board.	Director of Governance Trust Secretary	October 2023	N/a	N/a	N/a

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**Recommendation 2**

The Trust should consider scope for placing greater priority and emphasis on succession planning for NEDs and Executive Directors, with a view to enhancing Board diversity.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
2.1	Review and define the skills and experience required by the Board, both Executive and Non-Executive.	Trust Chair Chief Executive	July 2023	Remuneration and Nomination Committee	July 2023	Approval
2.2	Undertake a succession planning exercise for Executive Directors, focused on how to increase diversity of appointments whilst retaining competence.	Director of People and Organisational Development	October 2023	Remuneration and Nomination Committee	November 2023	Assurance
2.3	Undertake a succession planning exercise for Non-Executive Directors, focused on increasing the current diversity of appointments.	Director of Governance	October 2023	Appointments and Performance Committee	November 2023	Assurance
				Council of Governors	December 2023	Approval

### Recommendation 3

The Trust should consider introducing additional opportunities for engagement with internal and external stakeholders to address a common perception across staff, external stakeholders, Governors and some Board members that there is potential for increased and more timely engagement in strategy development.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
3.1	Ensure good staff engagement as the next five-year strategy is developed.	Director of Strategy, Research and Innovation Director of Communications and Engagement	Continuing to middle 2024	Board of Directors	As plan develops	Assurance
3.2	Ensure the next five-year strategy is developed in consultation with external partners who will be affected.	Director of Strategy, Research and Innovation Director of Communications and Engagement	Continuing to middle 2024	Board of Directors	As plan develops	Assurance

**Recommendation 4**

The Trust should consider relaunching the clinically led model, reinforcing the role of Divisional Directors within this model, and clearly setting expectations regarding accountability and the Trust’s approach to performance review.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
4.1	Undertake questionnaire of senior clinical staff to obtain their views.	Director of People and Organisational Development	May 2023	Board of Directors	June 2023	Assurance
4.2	Identify trusts seen as ‘clinically led’ to learn from.	Chief Medical Officer Director of People and Organisational Development	July 2023	Quality and Patient Safety Committee	September 2023	Assurance
4.3	Internally-promoted candidates to have review at 3, 6 and 12-month points (as with external candidates on probation).	Director of People and Organisational Development	June 2023	People and Organisational Development Committee	November 2023	Assurance
4.4	Review the structure and operation of the Executive Management Committee. [Links to 7.6]	Director of Governance Chief Executive	Sept 2023	Board of Directors	November 2023	Assurance

Continued →

**Recommendation 4 – continued**

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
4.5	Develop the support offered to Divisional leadership teams (Triumvirates).	Director of People and Organisational Development Chief Medical Officer Director of Finance	October 2023	People and Organisational Development Committee	September 2023	Assurance
4.6	Develop programme enabling individuals to be confident to take decisions rather than 'refer up'.	Director of People and Organisational Development	June 2023	People and Organisational Development Committee	September 2023	Assurance
4.7	Develop opportunities for informal contacts/ interactions to resolve issues.	Chief Medical Officer Director of People and Organisational Development	July 2023	People and Organisational Development Committee	September 2023	Assurance
4.8	Ensure all leadership groups are represented/ have access to leadership development programmes.	Director of People and Organisational Development	July 2023	People and Organisational Development Committee	September 2023	Assurance
4.9	Encourage clinical leaders to take up opportunities for below-Board or other leadership roles.	Director of People and Organisational Development Chief Medical Officer	June 2023	People and Organisational Development Committee	September 2023	Assurance

## Recommendation 5

Review the ToR and forward plans for the Performance Assurance Committee, People and Organisational Development Committee, and Quality and Patient Safety Committee, to ensure a balanced coverage of performance and to minimise any duplication across committees. This exercise should also review the rebalancing of committees to mitigate against the need for a separate finance sub-group meeting.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
5.1	Develop a single Integrated Performance Report, with greater focus, for use at Board and all Board Committees.	Director of Finance Director of Operations Director of People and Organisational Development	Dec 2023	Board of Directors	January 2024	Assurance
5.2	Review Board agenda to avoid consideration of items/ performance in 'silos'.	Director of Governance Trust Secretary	Sept 2023	Board of Directors	November 2023	Approval
5.3	Review how Board and Committees can gain necessary visibility and assurance regarding work of Alliances and Integrated Care System.	Director of Governance Directors of Operations	October 2023	Board of Directors	November 2023	Assurance
5.4	Discontinue the 'Finance sub-Committee'.	Chair, PAC	March 2023*	Performance and Finance Committee	March 2023	Approval

\* Already completed at time of this document's publication.

**Recommendation 6**

The Trust should conduct a systematic review of attendance, executive presentations, format of Chair’s Key Issue reports and use of executive summaries and dashboards in committee, with a view to improving consistency and impact. This process should also consider the benefits of engaging support for executive coaching in relation to the effective presentation of papers.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
6.1	[See 5.1 – single IPR for all Committees and Board]	---	---	---	---	---
6.2	Create guidance on the production of clear, compact CKIs that focus on provision of assurance rather than reporting discussion.	Director of Governance	July 2023	Audit and Risk Committee	September 2023	Assurance
6.3	Revise Board cover sheet to focus on key risks, assurances and key factors for consideration.	Director of Governance Trust Secretary	July 2023	Audit and Risk Committee	September 2023	Assurance
6.4	Create guidance for those preparing papers on appropriate detail, focus on risk/ assurance, and drawing attention to key factors for consideration.	Director of Governance	July 2023	Audit and Risk Committee	September 2023	Assurance
6.5	Arrange coaching/ development session for Executive Directors for focused presentations to the Board and Board Committees.	Director of Governance	Sept 2023	Audit and Risk Committee	November 2023	Assurance



**Recommendation 6 – continued**

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
6.6	Revise work-programmes for all Board Committees to ensure Divisional leaders attend to present on their work on a regular basis.	Trust Secretary	Aug 2023	Audit and Risk Committee	September 2023	Assurance

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## Recommendation 7

The Trust should undertake a detailed review of Terms of Reference, agendas and papers across DAMs, ODG, EMC and ELT with a view to identifying scope for streamlining, removing duplication or modifying the range of topics covered across these executive oversight forums.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
7.1	Revise the Terms of Reference for Board Committees to reflect decisions on change.	Trust Secretary	July 2023	Board of Directors	July 2023	Approval
7.2	Review and revise Executive Management Committee agenda structure to give a clearer strategic, clinically led focus. [Links to 4.4 and 7.6]	Trust Secretary	Sept 2023	Audit and Risk Committee	November 2023	Assurance
7.3	Re-state the role of Executive Leadership Team as an informal, non-decision-making forum for discussion. [Links to 4.4]	Director of Governance	July 2023	Audit and Risk Committee	September 2023	Assurance
7.4	Review the scope and Terms of Reference for Operational Delivery Group; and relationship to Executive Management Committee	Director of Governance	August 2023	Audit and Risk Committee	September 2023	Assurance

**Recommendation 7 – continued**

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
7.5	Review structure of Divisional Accountability Meeting packs to enable exception reporting approach.	Director of Finance	July 2023	Performance and Finance Committee	September 2023	Assurance
7.6	Comprehensively review the scope of each of EMC, ODG and DAM meetings to ensure there are no unjustified overlaps. [Links to 4.4]	Director of Governance	August 2023	Performance and Finance Committee	September 2023	Assurance
7.7	Review impact of changes in approach/ membership of Executive Management Committee.	Director of Finance Director of Governance	Dec 2023	Board of Directors	January 2024	Assurance
7.8	Formal annual review of information provision and process for Divisional Accountability Meetings.	Director of Finance	July 2023	Performance and Finance Committee	September 2023	Assurance

## Recommendation 8

The Trust should consider the suggestions made in Section 5.2 of the report for further enhancing the Board Assurance Framework.

Note – the suggestions are:

- Grouping risks under the strategic objectives or a category of risk, either on the summary page or in the main body of the BAF.
- Applying the cause, effect, impact methodology more rigorously to enable a deeper understanding of the risks
- Strengthen the controls by identifying which aspect of strategy will control the risk and how this provides assurance
- Consider setting a numerical score alongside risk appetite statements, to increase objectivity
- Better identification of links between BAF risks and risks on the Corporate Risk Register.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
8.1	Consider categorisation of BAF risks as suggested (by strategic objective or category of risk).	Director of Governance	July 2023	Audit and Risk Committee	September 2023	Assurance
8.2	Review risk descriptions and detail on the BAF to ensure they follow the methodology set out in Trust policy.	Director of Governance Risk owners	July 2023	Audit and Risk Committee	September 2023	Assurance
8.3	Review controls to ensure they reflect strategy-based assurances.	Director of Governance Risk owners	July 2023	Audit and Risk Committee	September 2023	Assurance
8.4	Review the desirability of creating a numerical score to reflect risk tolerance/ appetite.	Director of Governance	July 2023	Audit and Risk Committee	September 2023	Approval

**Recommendation 8 – continued**

Action	Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
8.5	Link risks on Corporate Risk Register to BAF risks (possibly via category).	Director of Governance	October 2023	Audit and Risk Committee	November 2023 Assurance

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## **Recommendation 9**

The Trust should consider the re-introduction of an executive risk management forum as the central forum for assessing and triangulating organisational risk.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
9.1	Re-introduce Risk Management Committee.	Director of Governance	April 2023*	Audit and Risk Committee	May 2023	Assurance

\* Already completed at time of this document's publication.

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## Recommendation 10

The Trust should consider the various suggestions made in Sections 5.4 and 5.5 of the report to improve the corporate risk register and divisional risk registers.

Note – the suggestions are:

- \* Improve titles by use of the cause, effect, impact methodology to adequately describe the risk.
- \* For each Corporate Risk Register entry, include ownership such as an Executive Director lead, and the responsible oversight committee.
- \* Categorise risks on the Corporate Risk Register by type of risk, to easily align to relevant BAF risks and enable review at the relevant Committee.
- \* Ensure all risks on the Corporate Risk Register have a date added, and the date of the last update for the Risk Mitigation Plan.
- \* Reflect the Trust’s risk appetite on the Corporate Risk Register.
- \* Review the reasons for the significant variation in the number of risks held in each Division, with reference to possible differences in reporting culture/risk profile.
- \* Update risk scoring to ensure it reflects risk to the Trust as a whole, not just to the reporting Division.
- \* Ensure all risks scored 15 or over are escalated to the Corporate Risk Register, whilst remaining linked to the Division.

The report notes that most actions for Section 5.4 had been completed following the review but before publication of the report.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
10.1	Review risk titles to ensure they follow the cause, effect, impact methodology in Trust policy.	Associate Director of Governance, Risk and Compliance	Sept 2023	Risk Oversight Committee Audit and Risk Committee	November 2023	Assurance
10.2	Review all risks to ensure they have an identified risk owner and oversight group.	Associate Director of Governance, Risk and Compliance	Sept 2023	Risk Oversight Committee Audit and Risk Committee	November 2023	Assurance
10.3	Review the variation in the number of risks from different Divisions, with a view to identify any reporting culture concern.	Director of Governance	Sept 2023	Risk Oversight Committee Audit and Risk Committee	November 2023	Assurance

Continued →

**Recommendation 10 – continued**

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
10.4	Review the scoring of Corporate Risk Register risks to ensure they are scored on a cross-Trust (not Divisional) basis.	Associate Director of Governance, Risk and Compliance	Sept 2023	Risk Oversight Committee Audit and Risk Committee	November 2023	Assurance
10.5	Review Corporate Risk Register to ensure all risks scored over 15 have been escalated appropriately (to follow the scoring review).	Associate Director of Governance, Risk and Compliance	Oct 2023	Audit and Risk Committee	November 2023	Assurance



**Recommendation 11**

The Trust should further explore the reasons for the unusually low level of familiarity amongst staff regarding quality impact assessments for cost improvements, with a view to assessing whether further guidance or training is required.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
11.1	Include Quality Improvement School within the developing Faculty of Patient Safety Science.	Director of Strategy, Research and Innovation Chief Nurse	Dec 2023	People and Organisational Development Committee	January 2024	Assurance
11.2	Include quality improvement component in Care Accreditation Framework.	Chief Nurse	Dec 2023	People and Organisational Development Committee	January 2024	Assurance

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**Recommendation 12**

The Trust should consider the development of a Board engagement plan aimed at increasing NED connection with the organisation through various electronic and in-person engagement initiatives, such as buddying arrangements with Divisions, participation in webinars or increased divisional engagement at Committee level.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
12.1	Develop NED introduction session at Trust Induction via video.	Director of People and Organisational Development	Sept 2023	People and Organisational Development Committee	September 2023	Assurance
12.2	Develop purpose, support and key documentation for programme of visits.	Director of Communications and Engagement	July 2023	Board of Directors	September 2023	Assurance
12.3	Establish visits programme(s) for Board members, Governors and senior leaders, to cover the entirety of the Trust's work.	Director of Communications and Engagement Chief Nurse	July 2023	Board of Directors	September 2023	Assurance
12.4	Establish similar programmes for senior leaders below Board level.	Director of Communication and Engagement	October 2023	Executive Management Committee	November 2023	Assurance
12.5	Ensure visits have defined purpose and engage with staff appropriately.	Director of Communications and Engagement Chief Nurse	Continuing	Board of Directors	Continuing	Assurance
12.6	Arrange programme of informal engagement opportunities for Executive Directors with staff.	Director of Communication and Engagement Director of People and Organisational Development	Sept 2023	Board of Directors	September 2024	Assurance

**Recommendation 12 – continued**

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
12.7	Ensure feedback from all visits is regularly provided to the Board, and Committees, for triangulation and risk identification.	Director of Communications and Engagement Director of Governance	Continuing	Board of Directors	Continuing	Assurance
12.8	Objectives and Appraisals for Directors and senior leaders to include required targets for engagement.	Director of People and Organisational Development	Q1 2024/25	Remuneration and Nomination Committee	September 2024	Assurance

### **Recommendation 13**

Future Board development seminars should explore the reasons for a significant divergence in views and deviation from the benchmark in relation to how the Board encourages staff to proactively engage with patients and the public.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
13.1	Schedule Board seminar time for this discussion.	Trust Secretary Director of Governance	July 2023	Board of Directors	---	Assurance

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**Recommendation 14**

The Trust should prioritise activities aimed at further embedding QI and for further cross-Trust sharing of learning of themes and learning from incidents, including triangulation of themes from incidents with findings from complaints, SIs and legal cases.

Action		Lead	Timeline	Reports to	Reporting timeline	Assurance or Approval
14.1	Arrange Board Seminar to set direction of travel on Quality Improvement / understanding of using data for improvement	Trust Secretary Chief Nurse	Dec 2023	Board of Directors	January 2024	Approval
14.2	Make proposals for better Board understanding of the Quality Improvement work delivered by various teams.	Executive leads	Dec 2023	Board of Directors	January 2024	Approval
14.3	Provide regular Board time to review and discuss delivery of Quality Improvement work.	Trust Secretary Chief Nurse Chief Medical Officer	Sept 2023	Board of Directors	September 2023	Assurance
14.4	Ensure Quality Improvement work links to the revised CQC Key Lines of Enquiry.	Chief Nurse Director of Governance	Sept 2023	Quality and Patient Safety Committee	October 2023	Assurance

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