

Report to Trust Board of Directors

Date of Meeting:	2 June 2015
Enclosure Number:	18
Title of Report:	Board Development Plan
Author:	Jacky Stockdale, Acting Company Secretary
Executive Lead:	Gina Tiller, Chair
Responsible Sub-Committee (if appropriate):	N/A
Executive Summary:	<p>The purpose of the Board is to govern effectively, and in doing so, build patient, public and stakeholder confidence that their health is in safe hands.</p> <p>The Board Development Plan, which is aligned to the Trust's Organisational Development Plan, is designed to assist the Board in the delivery of safe services and it prioritises the recommendations from external inspections regarding the Trust Board.</p> <p>Also included is the Board Planning Cycle</p>
Risk Rating (high, medium, low risk) and any recommended changes to risk rating:	N/A
Board Assurance Framework Reference:	N/A
Compliance, legal and national policy regulatory requirements:	N/A

Financial

N/A

Implications:		
Actions required by the Board:	To approve:	Discussion and decision
	To note:	Where the Board is made aware of key points but no decision required
	For information:	For reading and consideration and for discussion by exception only
	The Board is requested to approve the Board Development Plan and to note that the Plan will be revised and updated throughout the year.	
Data quality:	Source:	N/A
	Validated by:	
	Date:	

North Cumbria University Hospitals NHS Trust

Board Development Plan

2015 – 2016

May 2015

Board Development Programme 2015/2016

The purpose of the Board is to govern effectively and in doing so build patient, public and stakeholder confidence that their health is in safe hands. This fundamental accountability to the public is delivered by building confidence:

- In the quality and safety of our services
- That resources are invested in a way that delivers optimal health outcomes
- In the accessibility and responsiveness of our health services
- That patient and public can help to shape health services to meet their needs
- That public money is spent in a way that's fair, efficient, effective and economic.

This Board Development Programme is designed to assist the delivery of the above. It also prioritises the recommendations from external inspections regarding the Trust Board.

This Plan delivers the action outlined in the Board Development Section of the Trust's overall Organisational Development Plan, approved by the Board on 2 June 2015.

Board Development Action Plan 2015 – 2016

Work Stream 1 - Board Development							
Ref	What <i>Description of what is to be done</i>	Why <i>Include the reasons for completing this work e.g. reference to national guidelines etc.</i>	Who / How <i>How is it to be delivered</i>	When <i>Start / End date</i>	Measure	MCP / Strategic Obj.	RAG Rating
1.1	Increase Non-Executive visibility in the Trust.	To increase staff engagement and visible leadership and provide personal assurance	JLS Create a calendar for Non-Executive visit programme to hospital areas	April 2015	Programme dates set and feedback reported to the Trust Board – June 2015	1.1, 2.2	
1.2	Determine an organisational narrative for cascade during board visits.	To ensure consistency and reinforcement key messages to all staff	AF/GT/CR Prepare a crib sheet to be used on visits ensuring same story is being relayed and received by all staff.	June 2014	Staff understand the direction of travel of the trust.	2.2, 4.1	
1.3	Update the Board Development Plan using an independent advisor.	To maintain board awareness and knowledge of key areas for strategic focus.	GT/AF/JLS From the baseline set, determine and commission a refreshed board development programme, including evaluation. Create an internal and external evaluation schedule for the board and build into annual	Sept 15	Questionnaires collated and results received. Board Development Programme completed and agreed by Board.	4.1, 1.1, 5.1	

			board cycle.				
1.4	Develop strong sustainable relationships with partners further	Ensure alignment with partners	AF/GT Contribute to system level groups and developments.	Quarterly updates 15/16	Recognition of proactive system leadership. Report to Board.	1.1, 5.1	
1.5	Board informed of strategic progress through relevant committees. Delivery of MCP monitored via Improvement Board.	Provide leadership and governance to the Trust	AF/DF Strategies completed Review and progress monitored	Quarterly Updates 15/16	<ul style="list-style-type: none"> Key priorities managed via Master Change Plan, evidence by regular performance reports. Reports received, acted upon and agreed by Board. 	MCP1-5	
1.6	Refresh the 2015/16 Board Development plan.	Development plan updated following feedback form CQC inspection April 14	JLS Plan updated with reference to key documents	July 2015	Plan updated and reported to Trust Board.	1.1	
1.7	Work with NHS England and the TDA to determine a business strategy for the North Cumbria system to ensure we are clinically and financially stable in the longer term.	Provide a sustainable clinical and financial strategy	AF/GT To provide collective leadership to the system following announcement of the process to take us forward.	Autumn 2015	A refreshed strategy is approved by the Board in accordance with the timescales within this year.		

Date & Time	Subject Area	Presenters
28 April 2015 1pm	<ul style="list-style-type: none"> ▪ Developing Strategic Vision and Clarity: ▪ Governance and Legitimacy: ▪ Governance beyond acquisition: 	Paul Stanton
3 June 2015 at 10.00am	Feedback from clinical teams on Maternity Review Report	Clinical Teams
16 June 2015 at 12 noon	<ul style="list-style-type: none"> ▪ Executive and Senior Leaders' Capacity – One Year On ▪ Governance: 	Morven Smith, Helen Ray and Gail Naylor Jeremy Rushmer, Gail Naylor and Ramona Duguid
30 June 2015 1pm	<ul style="list-style-type: none"> ▪ Benefits of CLIC – clinicians to feedback: 	Gina Tiller, Ann Farrar, David Fillingham Clinical and Change Team representatives
20 October 2015 1pm	<ul style="list-style-type: none"> ▪ Draft Board Development Plan for 2015/16 ▪ Update on health policies following General Election 	Gina Tiller and Ann Farrar Gail Naylor, Jeremy Rushmer, Ramona Duguid
15 December 2015 1pm	<ul style="list-style-type: none"> ▪ CLIC and NCUH Improvement Work - Update by Stephen Singleton 	Stephen Singleton, Debbie Freake

Public Trust Board: Business Planning Cycle 2015/16

	April 2015	May 2015 (meeting to take place 2 June 2015)	June 2015	July 2015	August	September 2015
Safety and Quality	No Board Meeting	<ul style="list-style-type: none"> ▪ Safety & Quality Report ▪ Medical Director's Report ▪ Complaints Annual Report ▪ Clinical Audit Plan 	No Board Meeting	<ul style="list-style-type: none"> ▪ Safety & Quality Report ▪ Medical Director's Report ▪ Chief Inspector of Hospitals Report 	No Board meeting	<ul style="list-style-type: none"> ▪ Safety & Quality Report ▪ Winter Plan ▪ Clinical Audit Report ▪ Medical Director's Report
Strategy, Policy & Engagement		<ul style="list-style-type: none"> ▪ Standing Financial Instructions & Standing Orders ▪ Patient Experience Report ▪ Charitable Funds Annual Report and Auditors Report 2013/13 ▪ Review Clinical Strategy Progress 		<ul style="list-style-type: none"> ▪ R&D Strategy 		<ul style="list-style-type: none"> ▪ Patient Experience Report ▪ 6 month review of Plan Delivery
Delivery		<ul style="list-style-type: none"> ▪ Finance Report ▪ Core Performance Report ▪ Workforce & OD Report 		<ul style="list-style-type: none"> ▪ Finance Report ▪ Core Performance Report 		<ul style="list-style-type: none"> ▪ Finance Report ▪ Workforce Report ▪ Core Performance Report
Regulatory		<ul style="list-style-type: none"> ▪ TDA Self Certification Report ▪ SIRO/Caldicott Guardian Annual Report 2013/14 ▪ DPCI Annual Report 2013/14 		<ul style="list-style-type: none"> ▪ TDA Self Certification Report ▪ Local Counter Fraud Annual Report ▪ Board Assurance Framework 		<ul style="list-style-type: none"> ▪ TDA Self Certification Report ▪ Board Assurance Framework ▪ Declaration and Register of Interests
For Information		<ul style="list-style-type: none"> ▪ EMT Minutes ▪ CPG Minutes ▪ Workforce Committee Minutes ▪ Audit Committee Minutes ▪ Safety & Quality Committee Minutes ▪ Charitable Funds Minutes ▪ Assurance Committee Minutes (depending on frequency of meetings) ▪ Reputation Risk Register 		<ul style="list-style-type: none"> ▪ EMT Minutes ▪ CPG Minutes ▪ Workforce Committee Minutes ▪ Audit Committee Minutes ▪ Safety & Quality Committee Minutes ▪ Charitable Funds Minutes ▪ Assurance Committee Minutes (depending on frequency of meetings) ▪ Reputation Risk Register 		<ul style="list-style-type: none"> ▪ EMT Minutes ▪ CPG Minutes ▪ Workforce Committee Minutes ▪ Audit Committee Minutes ▪ Safety & Quality Committee Minutes ▪ Charitable Funds Minutes ▪ Assurance Committee Minutes (depending on frequency of meetings) ▪ Reputation Risk Register

	October 2015	November 2015	December 2015	January 2016	February 2016	March 2016
Safety & Quality		<ul style="list-style-type: none"> ▪ Safety & Quality Report ▪ Winter Planning Report ▪ Safeguarding Report ▪ Medical Director's Report ▪ Emergency Preparedness Resilience & Response 		<ul style="list-style-type: none"> ▪ Safety & Quality Report ▪ Emergency Planning Report ▪ Medical Director's Report ▪ Progress report on implementation of improved appraisal system 		<ul style="list-style-type: none"> ▪ Safety & Quality Report ▪ Safeguarding Report ▪ Clinical Audit Report ▪ Medical Director's Report ▪ S&Q Priorities
Strategy, Policy & Engagement				<ul style="list-style-type: none"> ▪ Patient Experience Report ▪ Draft Annual Plan ▪ Review of Plan Delivery ▪ Approval high level planning priorities for forthcoming year 		<ul style="list-style-type: none"> ▪ Approve Annual Plan ▪ Review of 2 Year Plan Delivery
Delivery		<ul style="list-style-type: none"> ▪ Finance Report (CIP progress) ▪ Workforce Report ▪ Core Performance Report 		<ul style="list-style-type: none"> ▪ Finance Report (CIP progress) ▪ Core Performance Report 		<ul style="list-style-type: none"> ▪ Finance Report (CIP progress) ▪ Workforce Report (OD Plan and Staff Survey) ▪ Core Performance Report
Regulatory		<ul style="list-style-type: none"> ▪ TDA Self Certification Report ▪ Board Assurance Framework ▪ Organ Donation Annual Report 		<ul style="list-style-type: none"> ▪ TDA Self Certification Report 		<ul style="list-style-type: none"> ▪ TDA Self Certification Report ▪ Board Assurance Framework ▪ Review of Trust Board and Sub-Committee Terms of Reference
For Information		<ul style="list-style-type: none"> ▪ EMT Minutes ▪ CPG Minutes ▪ Workforce Committee Minutes ▪ Audit Committee Minutes ▪ Safety & Quality Committee Minutes ▪ Charitable Funds Minutes ▪ Assurance Committee Minutes <p>(depending on frequency of meetings)</p> <ul style="list-style-type: none"> ▪ Reputation Risk Register 		<ul style="list-style-type: none"> ▪ EMT Minutes ▪ CPG Minutes ▪ Workforce Committee Minutes ▪ Audit Committee Minutes ▪ Safety & Quality Committee Minutes ▪ Charitable Funds Minutes ▪ Assurance Committee Minutes <p>(depending on frequency of meetings)</p> <ul style="list-style-type: none"> ▪ Reputation Risk Register 		<ul style="list-style-type: none"> ▪ EMT Minutes ▪ CPG Minutes ▪ Workforce Committee Minutes ▪ Audit Committee Minutes ▪ Safety & Quality Committee Minutes ▪ Charitable Funds Minutes ▪ Assurance Committee Minutes <p>(depending on frequency of meetings)</p> <ul style="list-style-type: none"> ▪ Reputation Risk Register

