The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

# SENIOR LEADERSHIP TEAM

# TERMS OF REFERENCE – September 2021

## 1. Overall Purpose

The Senior Leadership Team (SLT) is a committee of the Board of Directors.

The SLT is authorised by the Board of Directors to act on and investigate any activity within its Terms of Reference.

The SLT has delegated powers from the Board of Directors to oversee the day to day management of an effective system of integrated governance, risk management and internal control across the whole organisation's activities, both clinical and non-clinical, which support the achievement of the organisation's objectives.

The Committee is responsible for the delivery of the Trust's strategic objectives as outlined within the Corporate Strategy;

- S01 – To consistently provide safe and compassionate care for our patients and their families
- S02 - Modernising our hospital (estate, digital infrastructure and medical equipment) to support the delivery of optimal care
- S03 - Strengthening staff engagement to create an open culture with trust at the centre
- S04 - Working with patients and system partners to improve patient pathways and ensure future financial and clinical sustainability
- S05 - Supporting our patients to improve health and clinical outcomes
- S06 - Maximising opportunities for our staff to achieve their true potential so that we can deliver outstanding care

The SLT will develop, implement and review tactical plans, approve and recommend associated policies and monitor the performance of the organisation against its plans and key performance indicators.

The SLT is a key forum for holding teams and colleagues to account for the delivery of plans and operational performance.

SLT is responsible for developing and maintaining systems and processes to ensure the provision of safe, effective and high-quality patient care and that these systems are tested and monitored at an appropriate frequency.

## 2. Key responsibilities

SLT is responsible for reviewing, approving and monitoring;

- The Trust's performance against key targets, business plans, CQC Outcomes and other corporate objectives, delegating and co-ordinating action where appropriate with a specific focus on quality of care and patient experience.

- Actions arising from the Integrated Performance Report and performance management of delivery of any action plans.

- Action plans where remedial steps are indicated to improve performance.

- Business cases for service developments, taking into account the delegated resource responsibilities and the Trust's strategic objectives as outlined within the Corporate Strategy.

- The capital programme prior to Board of Director's approval.

- The effectiveness of the management of significant risks.

- The structures, processes and responsibilities for identifying and managing key risks facing the organisation prior to discussion at the Board of Directors

- The operational effectiveness of policies and procedures.

In addition, SLT will;

- Scrutinise key reports prior to submission to the Board of Directors to ensure their accuracy and quality.

- Provide a corporate view on hospital wide issues of current concern ensuring co-ordination between Divisional teams as appropriate.

- Advise on planning and change management initiatives with a clear focus on delivery of the national 21/22 planning and operational priorities.

- Oversee the delivery of the Cost Improvement Plan within the Trust.

- Ensure that staff are kept up to date on trust wide issues.

The SLT will ensure that governance and assurance systems operate effectively and thereby underpin clinical care. In order to achieve this, the SLT will need to agree underpinning workplans to support delivery of the Corporate Strategy, policies and plans to ensure that the Trust has an appropriate system of controls in place.

**Operational Plan development and delivery**

- Delivery of the six Strategic Objectives as outlined in the Corporate Strategy, with a specific focus on quality of care and patient experience
- Operational Plan development and delivery, including delivery of the annual Cost Improvement Programme.
- Approval of business cases in line with the standing financial instructions and scheme of delegation.
- Making recommendations to the Board of Directors about major service development and reconfiguration.

- Supporting and driving budgetary and cost control, including agency expenditure.
- Oversight of the system for monitoring operational quality, safety and performance against agreed standards and testing and monitoring these systems and processes at an appropriate frequency.
- Ensuring that appropriate action plans are developed in response to any significant deviation from accepted practice; that delivery is monitored and that changes are embedded in operational practice.
- Supporting and driving the delivery of plans to address regulatory concerns.
- Making decisions about the delivery of clinical and non-clinical services within budget and policy.
- Approving Operational Policies and Procedures in line with delegated authority from the Board of Directors.

**Risk**

- Supporting the Board in its monitoring of the Board Assurance Framework, by overseeing the adequacy of designated key controls in place to mitigate the principal risks to the delivery of the corporate objectives

**Integrated Governance**

- Maintaining an appropriate governance infrastructure, systems and processes to ensure the provision of safe, effective and high-quality care.
- Making a regular Chair's Assurance report to the Board, reporting assurance, escalated risks and recommendations where decisions are required, which are outside the delegated authority of SLT.

## 3. Accountability and Relationships

SLT is;

- Directly accountable to the Board of Directors;
- Indirectly accountable to the committees of the Board of Directors in relation to their oversight roles.

Groups reporting to the SLT are:

- Operational Management Group
- Assurance and Risk Executive Group
- Clinical Governance Executive Group
- Investment and Capital Planning Executive Group
- People Executive Group

The SLT agenda will be structured around the Chairs Assurance reports from the above Groups.

## 4. Membership

- CEO – Chair
- Chief Executive Leadership Team
- Director of Transformation and Improvement
- Deputy COO
- Deputy Medical Director
- Deputy Chief Nurse
- Deputy Director of Finance

- Chief Digital and Information Officer
- Divisional Director / General Manger from each Divisional Leadership Team (or their representative from the Divisional Leadership Team)
- Associate Director of Estates and Facilities
- Associate Director of Planned Care

Other colleagues will be asked to attend as appropriate.

Quoracy of the meeting will include representation from all Divisional Leadership Teams and a minimum of 3 Executive Directors.

**5. Frequency of meetings and attendance**

- SLT will meet monthly.
- Members and attendees are expected to attend at least 75% of meetings in a 12-month period.
- Members unable to attend should notify the committee secretary 3 days in advance of the meeting where possible and should identify a substitute to attend, who is appropriately briefed to present any necessary reports and participate in the meeting if appropriate.
- The Deputy CEO will act as Chair of SLT in the event of the CEO being unable to attend.

**6. Rules**

- Meetings will be held in accordance with the Trust's Annual Governance Timetable and will be arranged 12 months in advance.
- Extraordinary meetings may be called with the agreement of the Chair, where necessary.
- Urgent business within the remit of SLT, requiring attention between meetings may be conducted using the urgent actions procedure[i], or escalated to the Board
- 'Any Other Business' to be notified to the SLT Chair prior to the meetings.
- Agendas and papers will be published 3 working days in advance of the meeting, where possible.
- Meetings to be minuted and separate action points recorded and circulated promptly.
- A quorum will consist of half of the membership, including a minimum of three Executive Directors and a Divisional Director.
- Chair's Key Issues will be reported through the Chair's Assurance Report to the next Board of Directors' meeting and reported to the next SLT meeting and reported to the next SLT meeting
- The SLT will undertake an annual self-assessment of its effectiveness against its terms of reference, submitting the self-assessment and any action/improvement plan resulting from the self-assessment to the Board of Directors for approval.
- SLT will make an Annual Report to the Board.

**7. Authority**

- SLT may investigate, monitor and review any activity within its terms of reference. It may seek information from employees and employees are directed to co-operate with requests made by SLT.

- SLT may secure the attendance of any individual with relevant experience and expertise if it considers this necessary.
- SLT may approve proposals with financial implications, within its delegated authority and within policy and budget. SLT will make recommendations to the Board of Directors on proposals outside its delegated authority. SLT shall inform the Board of all decisions taken.

## 8. Monitoring Compliance

SLT's compliance with its Terms of Reference will be assessed through its annual review of its terms of reference.

## 9. Review

SLT's Terms of Reference will be reviewed annually.

| | |
|---|---|
| **Author:** | Carly West-Burnham, Director of Strategy |
| **Reviewed by:** | Senior Leadership Team |
| **Date:** | September 2021 |
| **Ratified by:** | Board of Directors |
| **Ratified date:** | |
| **Review date:** | April 2022 |

[i] Urgent business within the remit of the Senior Leadership Team, requiring attention between meetings may be conducted using the Urgent Actions Procedure, or escalated to the Board;

- In exercising the Urgent Actions Procedure the Chair may:
  - convene an extraordinary meeting of the Senior Leadership Team, or
  - may consult with at least 50% of core members, or
  - may escalate the issue to the Board.
- The exercise of such action will be reported to the next meeting of the Senior Leadership Team and will be reported through the next Chair's Assurance Report to the Board.