Senior Leadership Team

TERMS OF REFERENCE – AUGUST 2020

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 operational 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 vision, mission and objectives.

The Trust recognise that it is currently in Special Measures and as such, the Committee has a specific focus on ensuring the delivery of high-quality care for our patients and improving their experience. The Committee is responsible the delivery of the Trust's vision and mission.

- Vision – To be the best rural District General Hospital for patient and staff experience.
- Mission – Working with patients, staff and partners to improve the health and clinical outcomes of our local communities.

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

Quality
- 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

Engagement
- 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

Healthy Lives
- 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, to ensure improvements to quality of care, patient and staff experience and the successful exit of Special Measures.

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

SLT is responsible for developing and maintaining systems and processes to ensure the provision of safe, effective and high-quality patient care and experience 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, exiting Special Measures 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 to support the delivery of the Trust's objectives.

- Action plans where remedial steps are indicated to improve performance, including the delivery of quality of care and patient and staff experience.

- 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.

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

- Ensure that staff are kept up to date on trust wide issues and strategies for engaging and empowering staff are embedded.

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 to support the strategic objectives with a specific focus on the delivery of quality care and experience.
- 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, including the successful exit of Special Measures.
- 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 and experience.
- 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:

- Divisional Performance Review meetings and as a result;
    - Medicine Divisional Board
    - Surgery Divisional Board
    - Women and Children Divisional Board
    - Clinical Support Services Divisional Board
- Operational Service Delivery Executive Group
- Assurance and Risk Executive Group
- Clinical Governance Executive Group
- Investment and Innovation Executive Group
- People Executive Group

As per the agreed structure to support the delivery of large-scale projects, the following groups will also report directly to SLT;

- Efficiency Programme
- STP
- New Hospital (Phases 1 and 2)
- Sandringham
- Quality Forum
- Digital Forum

Chair's key issues of the reporting groups, reported through Chair's Assurance Reports, will be a standing SLT agenda item.

4. Membership

- CEO – Chair
- Chief Executive Leadership Team
- Divisional Leadership Teams

5. Frequency of meetings and attendance

- SLT will meet monthly
- Members are expected to attend at least 75% of meetings in a 12-month period
- Members and invited attendees 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.
- A nominated director will act as Chair of SLT in the event of the CEO being unable to attend.

6. Rules

- Ordinary 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 where necessary with the agreement of the Chair
- '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. The minutes will be approved by SLT at its next meeting.
- A quorum will consist of 50% of core members, including a minimum of one Executive Director and one Clinical 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.

- SLT will make an Annual Report to the Board incorporating 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.

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 only approve proposals with financial implications, within its delegated authority and within policy and budget. Where decisions are required which fall outside the delegated authority of SLT a recommendation for approval shall be made to the relevant Board level Committee or Board of Directors via the Chair's Assurance Report and submission of supporting papers. 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: **Director of Strategy**
Ratified by: **Board of Directors**
Ratified date:
Review date: **September 2021**