Agenda Item 19

The Queen Elizabeth Hospital King's Lynn
NHS Foundation Trust

REPORT TO THE BOARD OF DIRECTORS (IN PUBLIC)

RESPONSIBLE DIRECTOR:	REPORT FOR:		IMPACT ON BUSINESS:		
Prof. Steve Barnett, Trust Chairman	Decision	✓	High	Med	Low
	Discussion	✓	✓		
	Information				
LEAD MANAGER:	**REPORT TYPE:**		**BAF REFERENCES & RAG:**		
	Strategic				
	Operational				
	Governance	✓	**RELATED WORK: (PREVIOUS PAPERS TO COMMITTEE)**		
PEER ASSIST:	**PEER REVIEW:**				
Gill Rejzl, Trust Secretary					
CQC Domain: (safe, caring, effective, responsive, well-led)	Well-Led				

Meeting Date: **29 January 2019**

Report Title: **PwC – External Board Review**

PURPOSE:

To seek the Board's endorsement of proposed actions in response to the findings and recommendations of the PwC Board Review.

SUMMARY:

A Board Review of Board capability, capacity and effectiveness was jointly commissioned by NHSi and the Trust and carried out in November 2018.

This report sets out the report's findings, recommendations and the Trust's plans to address the issues identified, together with a summary progress update for January 2019.

RISK ASSESSMENT:

Strategic / External	Operational/ Organisational	Financial	Clinical	Legal/ Regulatory	Reputational / Patient Experience
				✓	✓

RECOMMENDATION/S:

The Board is invited to:

- consider the findings and recommendations of the PwC Board Review report
- endorse the proposed actions

Background

A Board Review was jointly commissioned by NHSi and the Trust, following the CQC's September 2018 assessment that the Trust is rated 'Inadequate' in the 'Well-Led' domain.

The Independent review of Board capability, capacity and effectiveness was undertaken in November 2019, by PwC and the Board considered the outturn report at a Board Development Workshop on 11 December 2018.

Review methodology

The review involved the following assessment features:

- Interviews with all Board members and external stakeholders;
- Surveys of the Executive team and the Board as a whole to understand perceptions and views on current working and effectiveness;
- Observations of key meetings, including the Board and its sub- committees; and
- Document review of minutes, papers and other relevant material.

In undertaking the review, PwC utilised the NHS Leadership Academy's 'Healthcare Leadership Model: Nine Dimensions of Leadership Behaviour', providing a frame of reference for the review team's judgements.

Findings – summary

In summary, the review team identified significant areas for improvement in the following areas:

- Executive capacity
- Board leadership and governance
- The unitary Board, Board relationships, cohesion and collective responsibility
- Relationships between executive and divisional leaders and their involvement in decision-making
- Non-executive development to ensure effective securing of assurance and strong accountability
- Recently established management structures
- Clear vision, strategy (inc. clinical strategy) and improvement trajectory
- The Trust's relationships with its system partners and the STP
- The quality of reports to Board and committees
- Risk management
- Cultural development – open, accountable and patient centred culture
- Board and committee effectiveness

Next Steps

The Trust has since November 2018, appointed both a new Trust Chairman and a new CEO. These are clearly key appointments in respect of driving the delivery of the actions that will address the issues identified by the CQC's Well-Led inspection and the November 2018 Board Review.

A development plan to address these matters will be an early task for the new Trust Chairman and CEO. As soon as this early work has been concluded, the 'target date' column in the action plan model overleaf will be populated and 'status RAG'/ 'remedial actions' columns added. The model has for information, been updated with some of the activities undertaken to date to begin to address the issues identified.

Progress against this action plan will be triangulated where appropriate with the Quality Improvement Plan.

Progress against the action plan will be reported to the Board in public.

	Board Review (November 2018) - Recommendations and Action	Priority	Lead	Target date	Progress Update – (January 2019)
1	**Executive Team Capacity** - Urgently address capacity and capability at both Executive and wider organisational levels for the successful delivery of improvement plans.	*High 0-3 months*	CEO / Chairman	tbc	- New Chairman appointed (Nov 2018) - New CEO appointed (Jan 2019)
2	**Board Development** - Strengthen Executive team leadership and team working to establish consensus on priorities, objectives, joint working and collective ownership for improvement.	*High 0-3 months*	CEO / Chairman	tbc	- New CEO appointed (Jan 2019)
3	**Board Assurance -** Accelerate support being provided to Divisional and CBU leadership teams, and provide more structure and clarity for performance and accountability, including delegated authority and decision making.	*High 0-3 months*	CEO / COO	Tbc	- Accountability Framework in development – to TEC in Feb 2019
4	**Board Development -** Investment of Board time to develop strong collective ownership and understanding of robust plans to address the Trust's urgent performance issues, including: financial recovery plan; medium term financial plan; winter plans; quality improvement.	*High 0-3 months*	CEO / HRD	tbc	- Financial Recovery Board in place from Dec 2018 - External financial support procured – Jan 2019
5	**Stakeholder Engagement -** Engage with external stakeholders and rebuild trust through demonstrable commitment to system developments and plans and prioritisation of delivering on agreed actions.	*High 0-3 months*	CEO / CTO	tbc	- improved engagement with / attendance at STP and Acute Services Review - STP Chair and Accountable Officer invited to attend Board Development workshop – 12 Feb - UEA Board:Board – 10 Dec 2018
6	**Board and Committee Reporting -** All Executives to adopt principles of good reporting when providing information to the Board, including robust analysis, summaries, key risks and proposed action.	*High 0-3 months*	CEO / Trust Sec.	tbc	- New IPR in development (to Board in Feb 2019)
7	**Board Strategy -** Board to revisit and refresh the Trust's strategy and use this as a frame of reference for prioritisation and decision making, aligned to QEHKL future sustainability and system plans , and used to set, and articulate, the strategic direction of the Trust.	*Medium 3-6 months*	CTO	tbc	- New Trust CEO and Chairman to revisit Trust Corporate Strategy - Clinical Strategy clinical consultation complete. Draft to Board – Mar 2019
8	**Board Development -** The Board should use its development time to reset how it functions, establish a more collaborative approach between Executives and NEDs, and rebuild trust.	*Medium 3-6 months*	CEO / Chairman	tbc	- Board Development workshops programmed monthly. - Programme to be revisited with new Chairman and CEO – Jan 2019. - Board meetings scheduled to include an opportunity for informal Board engagement and team-building
9	**Non-Executive Directors -** NEDs to reflect on their collective and personal contribution and effectiveness for ensuring adequate assurance is sought on a consistent basis, thereby ensuring stronger accountability.	*Medium 3-6 months*	Chairman	tbc	- NED recruitment and succession planning underway with governors. NED development programme to be

	Board Review (November 2018) - Recommendations and Action	Priority	Lead	Target date	Progress Update – (January 2019)
					arranged when newly appointed NEDs in place
10	**Non-Executive Directors -** Targeted development and support for NEDs, where required, to ensure those without prior NHS experience are equipped with requisite knowledge.	*Medium 3-6 months*	Chairman	tbc	
11	**Board Strategy -** Develop communications plan for staff which begins to set out vision and goals of the trust, both in the short and medium term, and how various improvement initiatives and plans will support this.	*Medium 3-6 months*	CTO HRD	tbc	
12	**Board and Sub-Committee Reporting -** Integrate risk management as part of sub-committee business and review risk management process to ensure this is working effectively.	*Medium 3-6 months*	MD / Trust Sec.	tbc	