

Reporting to:	TRUST BOARD 1 MAY 2014
Title	TRUST COMMITTEE UPDATES
Sponsoring Director	Julia Clarke - Director of Corporate Governance
Author(s)	
Previously considered by	
Executive Summary	<p>The Trust Committee update contains a summary of the key points of each meeting from the Committee Chair:</p> <p>Finance Committee (29.04.14)* Chair : Dennis Jones Clinical Quality & Safety Committee (23.04.14) Chair : Simon Walford Hospital Executive Committee* (29.04.14) : Chair : Peter Herring Workforce Committee (11.04.14) : Chair: Victoria Maher</p> <p>*Due to the proximity of these Committee meetings to the Trust Board meeting, the papers will be sent electronically to Members, tabled at the meeting and also uploaded on to the Trust website.</p> <p>It is proposed that new Committee of the Board be established called Business Development and Engagement Committee (see attached Draft Terms of Reference attachment 1).</p> <p>It should be noted that the Financial Recovery Board has been disestablished as it was agreed that the current structure was not adding value to the process. In order to gain greater ownership throughout the organisation, there will now be a regular update on progress every two weeks to the Executive Directors and a monthly update to Finance Committee through the Finance Director.</p> <p>Following the appointment of Mr Brian Newman (NED) from 1 April, the Chair has refreshed NED Committee membership and responsibilities, which are attached, along with the current Committee structure (Attachment 2).</p>
Strategic Priorities <input checked="" type="checkbox"/> Quality and Safety <input checked="" type="checkbox"/> Healthcare Standards <input checked="" type="checkbox"/> People and Innovation <input type="checkbox"/> Community and Partnership <input checked="" type="checkbox"/> Financial Strength	Operational Objectives Providing the best clinical outcomes, patient safety and patient experience Delivering consistently high performance healthcare standards Striving for excellence through people and innovation Building a sustainable future

Board Assurance Framework (BAF) Risks	<input checked="" type="checkbox"/> If we do not deliver safe care then patients may suffer avoidable harm and poor clinical outcomes and experience <input checked="" type="checkbox"/> If we do not implement our falls prevention strategy then patients may suffer serious injury <input checked="" type="checkbox"/> Risk to sustainability of clinical services due to potential shortages of key clinical staff <input checked="" type="checkbox"/> If we do not achieve safe and efficient patient flow and improve our processes and capacity and demand planning then we will fail the national quality and performance standards <input type="checkbox"/> If we do not have a clear clinical service vision then we may not deliver the best services to patients <input checked="" type="checkbox"/> If we do not get good levels of staff engagement to get a culture of continuous improvement then staff morale and patient outcomes may not improve <input checked="" type="checkbox"/> If we are unable to resolve our (historic) shortfall in liquidity and the structural imbalance in the Trust's Income & Expenditure position then we will not be able to fulfil our financial duties and address the modernisation of our ageing estate and equipment
Care Quality Commission (CQC) Domains	<input checked="" type="checkbox"/> Safe <input checked="" type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input checked="" type="checkbox"/> Responsive <input checked="" type="checkbox"/> Well led
<input checked="" type="checkbox"/> Receive <input checked="" type="checkbox"/> Review <input checked="" type="checkbox"/> Note <input type="checkbox"/> Approve	Recommendation To receive and review Committee updates and note items brought to the attention of the Board To note the NED membership and role responsibilities and the Committee structure To approve the establishment of the Business Development and Engagement Committee as a formal sub-committee of the Board and to note the new reporting arrangements for financial recovery schemes

**Terms of Reference
Business Development and Engagement Committee**

1. Constitution

1.1 The Trust Board resolves to establish a Committee of the Board to be known as the Business Development and Engagement Committee. As a Committee of the Trust Board, the Standing Orders of the Trust shall apply to the conduct of the working of the Business Development and Engagement Committee. The Committee shall provide guidance and recommendations to the Trust Board.

2. Membership

2.1 The Committee shall be appointed by the Chair of the Trust and shall comprise:

	Member	Nominated Deputy
Chair - Director of Business and Enterprise	Debbie Vogler	Tricia Finch
Communications Director (Deputy Chair)	Adrian Osborne	John Kirk
Assistant Chief Operating Officer	Sara Biffen	Ian Donnelly
Head of Contracts & Performance	Paul Hodson	Shaun Taylor
Senior Finance Officer	Martin Hall	Adam Shields
Head of Planning	Tricia Finch	
Non-Executive Director	TBC	

Attendance when required:

Care Group Medical Directors, Clinical Directors, Lead Clinicians, Centre Managers, Heads of Departments.

Other Corporate and Clinical Managers

Workforce

Paula Dabbs

Joanne Hulse

3. Quorum

3.1 For the Committee to be quorate, it requires the presence of three members.

4. Attendance

4.1 Other managers/staff may be required to attend meetings depending upon issues under discussion with the prior approval of the Committee Chair. The Committee has the power to co-opt, or to require to attend, any member of Trust staff as necessary, and to commission input from external advisors as agreed by the Chair.

4.2 The Director of Business and Enterprise's Executive Assistant will ensure that an efficient secretariat service is provided to the Committee. Namely

- That Members are aware fully of their responsibilities in the delivery of reports in sufficient time to allow meeting papers to be circulated within the defined timescales.
- That Directors are reminded that papers not circulated in time may not be considered at the meeting.
- To manage the action summary and matters arising to ensure their timely follow through.

4.3 Members may appoint suitable deputies to represent them. Deputies must attend when required. It is expected that a member or their nominated deputy will attend for a minimum of 75% of meetings in a year. Attendance will be monitored by an attendance matrix.

5. Frequency of meetings

- 5.1 The Committee shall meet quarterly. Additional meetings may be held at the discretion of the Chair of the Committee.
- 5.2 The Agenda will be circulated with papers at least 5 working days before the meeting.
- 5.3 The agenda will be approved by the Committee Chair prior to circulation.
- 5.4 Requests for non-routine agenda items are to be forwarded to the Committee Chair normally at least 10 working days prior to the meeting.
- 5.5 Members will normally be expected to attend at least 75% of the meetings in the year.

6. Authority

- 6.1 The Committee is authorised by the Trust Board to investigate any activity within its Terms of Reference and is expected to make recommendations to the full Trust Board. It is authorised to seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Committee.
- 6.2 The Committee is authorised by the Trust Board to obtain outside legal or other independent professional advice, and to secure the attendance of others from outside the Trust with relevant experience and expertise, if it considers it necessary. This authority will only be used in exceptional circumstances and prior approval of the Trust Board is required.
- 6.3 The Committee has no executive powers other than those specifically delegated in these Terms of Reference.

7. Duties

- 7.1 The Business Development and Engagement Committee shall undertake on behalf of the Trust Board:
 - Objective scrutiny of the Trust's market assessment, business development plans and engagement strategy. The purpose of the Committee is to provide the Board with a strategic analysis of business development opportunities and engagement activities and to recommend prioritised points of focus.
 - The Committee will operate at a strategic level as the Executive is responsible for the day to day operational delivery and management. Additionally, the Trust Board may request that the Committee reviews specific aspects of business development where the Board requires additional scrutiny and assurance.
 - The Committee will clarify and prioritise SaTH's relationship development with key stakeholders.
 - The Committee will nurture specific exemplar projects to strengthen specific key relationships e.g. GPs/Consultants; Communities/Wards.
 - The Business Development and Engagement Committee will receive and review market information and proposals

8. Reporting from the Committee

8.1 The Business Development and Engagement Committee reports to the Trust Board.

8.2 The Committee Chair will report formally to the next Trust Board meeting on all matters within its duties and responsibilities.

8.3 The Committee will make whatever recommendations to the Trust Board it deems appropriate on any area within its remit where action or improvement is needed, or where it has significant concerns.

8.4 The draft Minutes shall be recorded and circulated to Committee members within 5 working days of the meeting and presented at the next Trust Board meeting for information.

9. Review

9.1 The Terms of Reference will be reviewed annually.

Date: April 2014

MEMBERSHIP – TRUST BOARD AND COMMITTEES**TRUST BOARD****(Monthly. Admin - Sarah Matthey)**

Mr P Latchford	Chair
Mr H Darbhanga	Non Executive Director (NED)
Dr R Hooper	Non Executive Director (NED)
Mr D Jones	Non Executive Director (NED)
Mrs D Leeding	Non Executive Director (NED)
Mr B Newman	Non Executive Director (NED)
Dr S Walford	Non Executive Director (NED)
Mr P Herring	Chief Executive (CEO)
Mrs S Bloomfield	Director of Nursing & Quality(DNQ)
Dr E Borman	Medical Director (MD)
Mrs D Kadum	Chief Operating Officer (COO)
Mr N Nisbet	Finance Director (FD)
<i>In attendance</i>	
Mrs J Clarke	Director of Corporate Governance/Company Secretary (DCG)
Miss V Maher	Workforce Director (WD)
Mr A Osborne	Communications Director (CD)
Mrs D Vogler	Director of Business & Enterprise (DBE)
<i>Quoracy</i>	<i>One ED(or deputy), one NED and one-third of Board</i>

CORPORATE TRUSTEES**(At least twice per year - Admin Sarah Matthey)**

Mr P Latchford	Chair
Mr H Darbhanga	Non Executive Director (NED)
Dr R Hooper	Non Executive Director (NED)
Mr D Jones	Non Executive Director (NED)
Mrs D Leeding	Non Executive Director (NED)
Mr B Newman	Non Executive Director (NED)
Dr S Walford	Non Executive Director (NED)
Mr P Herring	Chief Executive (CEO)
Mrs S Bloomfield	Director of Nursing & Quality(DNQ)
Dr E Borman	Medical Director (MD)
Mrs D Kadum	Chief Operating Officer (COO)
Mr N Nisbet	Finance Director (FD)
<i>Quoracy</i>	<i>6 voting Board members or deputy, including one NED</i>

RISK COMMITTEE**(Quarterly. Admin Sarah Matthey)**

Mr P Herring	Chief Executive (Chair)
Mr H Darbhanga	Non-Executive Director (NED)
Dr R Hooper	Non-Executive Director (NED)
Mrs S Bloomfield	Director of Nursing & Quality (DNQ)
Dr E Borman	Medical Director (MD)
Mrs J Clarke	Director of Corporate Governance (DCG)
Ms C Jowett	Head of Assurance
Mrs D Kadum	Chief Operating Officer (COO)
<i>Quoracy</i>	<i>4 members or deputy, including one NED</i>

CLINICAL QUALITY & SAFETY COMMITTEE (Monthly. Admin - Bergitte McGovern)

Dr S Walford	Non Executive Director (Chair)
Mr B Newman	Non-Executive Director(NED)
Mrs J Banks	Associate Director of Patient Safety
Mrs S Bloomfield	Director of Quality & Nursing (DNQ)
Dr E Borman	Medical Director (MD)
Mr P Fewtrell	Quality Manager
Mrs D Kadum	Chief Operating Officer (COO)
<i>Quoracy</i>	<i>4 members or deputy including one NED</i>

REMUNERATION COMMITTEE (Three times per year minimum). Admin - Alison Kerr-Gold)

Mr P Latchford	Chair of the Trust (Chair)
All NEDs	
<i>In attendance</i>	
Mr P Herring	Chief Executive (CEO)
Miss V Maher	Workforce Director (WD)
<i>Quoracy</i>	4 NEDs

FINANCE COMMITTEE & CHARITABLE FUNDS (Monthly. Admin - Amanda Young)

Mr D Jones	Non-Executive Director (Chair)
Mr H Darbhanga	Non-Executive Director (NED)
Mr N Nisbet	Finance Director (FD)
<i>Quoracy</i>	One NED and FD or FD's deputy

AUDIT COMMITTEE (Five times per year. Admin - Marie Devitt)

Dr R Hooper	Non-Executive Director (Chair)
Dr S Walford	Non-Executive Director
Mr D Jones	Non-Executive Director
<i>In attendance</i>	
Mrs J Clarke	Director of Corporate Governance (DCG)
Mr N Nisbet	Finance Director (FD)
Mr M Owen	Deloitte LLP
Mr A Bostock	KPMG
<i>Quoracy</i>	Two NEDs (and CEO annually)

WORKFORCE COMMITTEE (Bi-monthly. Admin Alison Kerr-Gold)

Ms V Maher	Workforce Director (Chair)
Mrs D Leeding	Non-Executive Director (NED)
Mr P Latchford	Non-Executive Director (NED)
Mrs S Bloomfield	Director of Nursing & Quality (DNQ)
Mr A Osborne	Communications Director (CD)
Mrs J Price	Deputy Finance Director
<i>Quoracy</i>	Three members or deputy (including one NED)

HOSPITAL EXECUTIVE COMMITTEE (Monthly. Admin - Barrie Reis-Seymour)

Mr P Herring	Chief Executive (Chair)
Mrs S Biffen	Assistant Chief Operating Officer (Scheduled Care Group)
Mrs S Bloomfield	Director Nursing & Quality (DNQ)
Dr E Borman	Medical Director (MD)
Mr M Cheetham	Care Group Medical Director (Scheduled Care Group)
Mrs J Clarke	Director of Corporate Governance (DCG)
Mr I Donnelly	Assistant Chief Operating Officer (Unscheduled Care Group)
Dr K Eardley	Care Group Medical Director (Unscheduled Care Group)
Dr D Hinwood	Care Group Medical Director (Radiology)
Mrs D Kadum	Chief Operating Officer
Mrs D Lloyd	Care Group Director (Therapies)
Miss V Maher	Workforce Director
Prof A Malcolm	Care Group Medical Director (Pathology)
Mr B McElroy	Care Group Director (Pharmacy)
Mr C Needham	Associate Director of Estates and Facilities Management
Mr N Nisbet	Finance Director
Mr A Osborne	Communications Director
Mrs C Smith	Care Group Director (Women & Children Care Group)
Mr A Tapp	Care Group Medical Director (Women & Children Care Group)
Mrs D Vogler	Director of Business & Enterprise
<i>Quoracy</i>	3 Directors and 3 Care Group Directors (or deputies)

BUSINESS DEVELOPMENT & ENGAGEMENT COMMITTEE (Quarterly). Admin – Astrid Whild)

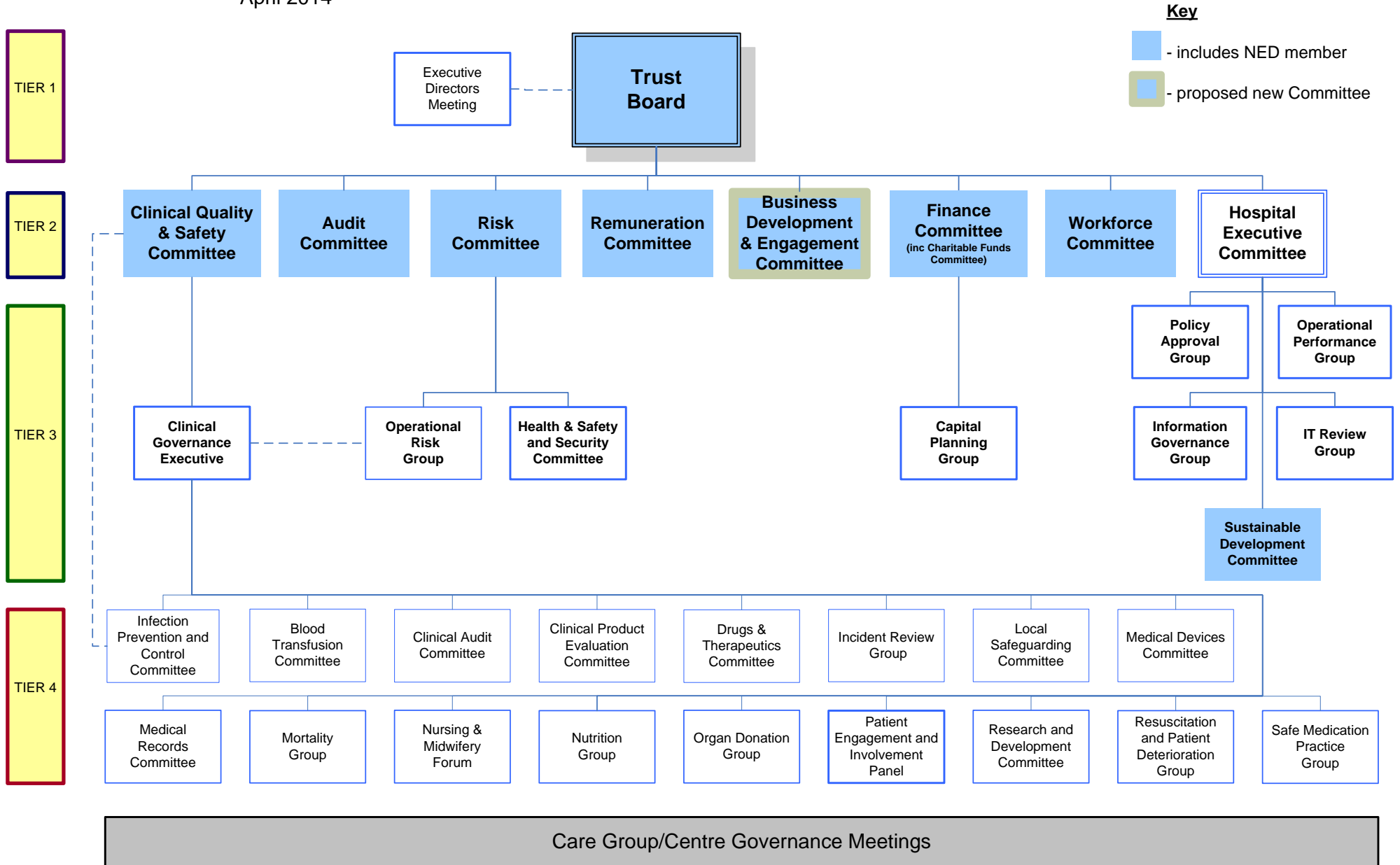
Mrs D Vogler	Director of Business & Enterprise
Mrs S Biffen	Assistant Chief Operating Officer (Scheduled Care Group)
Mrs T Finch	Head of Planning
Mr M Hall	Senior Financial Manager
Mr P Hodson	Head of Contracts & Performance
Mr A Osborne	Communications Director
TBC	NED
<i>Quoracy</i>	<i>3 members</i>

NED LEADS

Whistleblowing	Mr D Jones
Medical exclusions	Dr S Walford
Security	Mr D Jones
Sustainability	Mrs D Leeding
Education and Training	Mr P Latchford
Procurement	Mr B Newman

SaTH Committee Structure

April 2014



Workforce Committee

Key summary points from the meeting held on 11th April 2014

People Strategy

The Committee received the implementation plan for the People strategy, work has been undertaken to ensure that the plan enables the organisations strategic priorities and responds to the staff survey. Discussions focused on making the strategy real, including actions that will have a quick impact versus those that are longer term and support cultural change.

Highlights include the organisations leadership development programme, centralising recruitment and embedding the values further, including training in values based interviewing.

The committee will review progress each quarter.

Improving People Management – Board Action

An action for the committee has been to consider an approach to improving People Management within the organisation. The Committee discussed the purpose of this being to ensure managers understood their responsibility and to support the realisation of the People Strategy. The approach will be for all managers to attend a briefing session led by the Chief Executive; this session will ensure a shared understanding of the role of a manager. The session will also be an opportunity to talk about our values and the importance of managers living the values. In addition a management development programme will develop manager's toolkit and their approach.

The committee was content with the proposal and has requested regular updates.

Health and Wellbeing

The Committee discussed the Health and Wellbeing Plan which has two key focuses, firstly ensuring that the managers and staff are supported through effective and robust processes and policies. Secondly that the organisation is proactive in its support, this included the enhancement of Occupational Health Services and guidance on a healthy lifestyle.

Name of Chair Victoria Maher

Date report prepared 11th April 2014

Quality and Safety Committee

Key summary points from the meeting held on 23rd April 2014

Quality Improvement Strategy and Quality Governance Assurance Framework.

The committee has reviewed these two documents, which were last substantially revised about two years ago. There is agreement that they need greater clarity and focus and that they should reflect the current context of the organisation, the comprehensive and helpful guidance of the regulators about quality governance and be better integrated with the cultural development of the Trust. The next step will be a project brief to be drafted by the Director of Nursing and Quality to set this substantial piece of work in train. The committee has made it clear that we must emphasise the multi-disciplinary nature of the strategy and bring greater clarity to the personal accountability of all staff for their contribution to patient care. It is our intention to ensure our strategy and governance arrangements are clearly aligned to the five domains of quality described by the CQC. We expect the project brief to be agreed in the next month or two and that a small working party through the Clinical Governance Executive will deliver new drafts for consultation within about 2-3 months.

Senior Medical Staff Appraisal and Revalidation

The committee has been exercised about the relatively poor historical compliance with appraisal and revalidation requirements now placed upon senior doctors by the GMC. It has been encouraging to see the substantial improvements made under the leadership of the new Medical Director, not only in compliance but also in the increasing richness of the information about activity, outcomes and complaints which is being provided to each doctor about their work in the Trust, as part of the process.

Adult Safeguarding

Review of the quarterly safeguarding report again reflects a disappointing lack of feedback about concerns raised by the Trust in relation to partner organisations, in contrast to the complete information about concerns raised by external agencies with the Trust. We have supported the view of the Director of Nursing & Quality that the Adult Safeguarding Board would benefit from the appointment of a suitable independent chair, as is the case in many other communities.

Dr Simon Walford, Chairman

24th April 2014