



Trust Board 26 November 2024

Trust Board Annual Effectiveness Review 2023/24

Purpose

To provide an annual review of the effectiveness of the Trust Board for 2023/24 and provide a touch point review of effectiveness of the Trust Board for 2024/25 to date.

The paper is accompanied by separately provided appendices

- Trust Board Terms of Reference
- Trust Board Workplan
- Trust Board Development Programme

Analysis of the issue

NHS Trust Boards play a key role in shaping the strategy, vision, and purpose of an organisation. They are responsible for holding the organisation to account for the delivery of the strategy and to ensure value for money. They are also responsible for assuring that risks to the organisation and the public are managed and mitigated effectively. Led by an independent chair and composed of a mixture of both executive and independent non-executive members, the Trust Board has a collective responsibility for the performance of the organisation.

The Trust Board meets virtually to hold Public & Confidential meetings on a bi-monthly basis. A development meeting is held face-to-face on the alternate months and additional development sessions take place with the Board of Northamptonshire Healthcare NHS Foundation Trust as part of our Group arrangement.

Effectiveness of the Trust Board Meetings

Trust Board meetings have been evaluated and deemed to be effective during 2023/24 and to date in 2024/25. The review of effectiveness and the Board development programme had been deferred to November 2024 to enable the findings of the external well led review to be taken into account. The Board has engaged in several reflection sessions resulting from the external well led review since July 2024.

Items on the Trust Board work plan were received during the 2023/24 year and to date either in line with expectations or deferred and noted on our Board agenda. There is one exception to this; the quarter 1 update for the delivery of our Step Up To Great strategy is being presented with the quarter 2 update to the Trust Board in November 2024. This is to allow for the outcomes from quarter 1 to be fully realised and presented.

Membership attendance has been satisfactory; each meeting was quorate, and each meeting has included clinical representation across 2023/24 and to date in 2024/25.

Trust Board meetings have been considered as well-run throughout 2023/24 and the year to date. Papers are issued five working days ahead of the meeting and are of good quality. It was raised in last year's annual review that the size of the agenda and papers was lengthy. Whilst this remains to be a challenge, the mapping of governance across the Level 1 Committee continues to support the clarity of work planning for the Trust Board.

The minutes of the meetings continue to reflect thorough and informed debate for items with a rigour for matters not proceeding as expected and support for positive progress as assured. Actions are managed with a dynamic action log which demonstrates good responsiveness across the year.

Each of the level 1 Committees (the Board sub committees) has undertaken a review of effectiveness for 2023/24. Assurance over their effectiveness was confirmed at the Audit and Risk Committee in September 2024; the Board also received assurance over the effectiveness of the Audit and Risk Committee that month.

The Board has continued to focus on the priorities identified in the previous year (2022/23) review of effectiveness which included the following key items

- Maintaining an oversight of key improvements as well as challenges.
- Managing quality and safety risk in a challenging environment
- Ongoing review and maturity of the performance report.
- Post pandemic recovery

Key Findings from the 2023/24 effectiveness reviews from the level 1 committees

The level 1 committees were evaluated as effective during 2023/24 and were subject to ongoing development and improvement. Several common achievements and successes were identified, including improved robust reporting via the AAA report. Common challenges were identified which included the volume of reports and long agendas. The future plans for the committees include the following key areas;

- Consider a balance of assurance from each of the three lines of assurance including staff voice and third-party assurance such as the CQC and Deloitte.

The Board Assurance Framework has been designed around the three lines of assurance and we continue to hear patient and staff voice as each Board meeting. We have introduced a regular agenda item to feedback from service visits for approval this month.

- Ensure that learning from best practice is featured more prominently within the Terms of Reference for 2024/25 including the remit of joint programmes being delivered within the Group and quality improvement activity.

We have updated the Board Terms of Reference to highlight learning from best practice, including opportunities for learning across the Group.

- Align the workplan to the new Board Assurance Framework to promote strategic level discussion and risk-based approach to items on the agenda.

This will be shaped by the Board in readiness for 2025/26.

- Ensure that strategic discussion aligns to system strategy and population health intelligence

We are reviewing the availability of data dashboards for assurance at the level 1 committees.

- Further consider the use of deep dives and joint committee workshops for areas of risk

This is an option which remains in place when required.

- More strategic, succinct and outcome focused updates.

The annual review of the Committee in Common (the Joint Working Group) will be delivered as a Group Trust Board development session in February 2025 this forms part of the wider review of the commitments in the Memorandum of Understanding and discussions around the ambitions of the Group, and the opportunities that it provides.

Key Findings from the external review of leadership and governance

Earlier this year, in line with guidance from NHS England (NHSE), the Trust conducted an externally facilitated, developmental review of its leadership and governance arrangements using the well-led framework. Elements of the feedback relate directly to the Trust Board and have been taken into account as part of this review of effectiveness.

Overall, Deloitte found that the Trust is led by a highly regarded Chief Executive and Chair, who leads a unitary board, that is open, transparent and sets the tone for the organisation. The Trust has made

detailed refinements to strengthen and align governance and risk management arrangements at board, and alongside areas of corporate governance that follow good practice, Deloitte identified opportunities to consider ongoing board development activities and increased capturing of board connectivity with the organisation

In place of the usual internal survey of Trust Board members regarding the effectiveness of the Board, this year we have based our summary and identification of future priorities on the feedback provided by the Deloitte report which include;

1.2 ...Raising the status of the Deputy CEO role in board meetings and enhancing the level of assurance they provide to the Board regarding operational matters.

We are recommending that the Managing Director (Deputy CEO) leads on the service visits section of the Trust Board agenda.

1.3 Consider opportunities for improving board skills and impact, including collective board development activities aimed at improving the quality of board scrutiny and challenge, individual support to recognise high variability in NED requirements, and increased focus on the role of succession planning to enhance the depth of board skills (and 8.2 The Trust should consider the sentiment presented in the board survey responses).

Following the Deloitte report, we have provided a number of development sessions for executive directors and non-executive directors aimed at scrutiny and challenge at Board. We continue to evaluate opportunities both within the Trust Board Development Programme and with additional externally facilitated events.

1.4 Consider scope for a more systematic approach to feeding back observations and learnings from service visits with the full board to maximise the sharing of learnings and impact.

We are recommending that service visit feedback becomes a standing item on the Trust Board public agenda and intend to take advantage of any opportunities to align feedback with the staff and patient voice component of the Board agenda.

There are also learning opportunities across the Group which will continue to feed into the Group Trust Board development sessions.

Proposal

- To receive assurance over the effectiveness of the Trust Board during 2023/24 and to date in 2024/25.
- To review the changes proposed to the Trust Board Terms of Reference. These take account of the opportunities for maximising learning from best practice and across our Group arrangement. They also promote the three lines of assurance.
- To review the changes proposed to the Trust Board workplan which are intended to ensure it remains fit for purpose, to remove any duplication and delegate where appropriate for instance responding to the embedding People and Culture Committee by delegating a number of items that the Trust Board can receive assurance over from the Committees.
- To review the changes proposed to the Trust Board Development Plan; this has been updated to take account of the well led review, and recent national publications to outline the topics planned in for the Trust and across the Group for the remainder of the year.

Decision required

- To confirm a level of assurance over the effectiveness of the Trust Board
- To approve the revised Trust Board Terms of Reference
- To approve the revised Trust Board Workplan
- To approve the revised Trust Board Development Programme

Governance table

For Board and Board Committees:	Trust Board 26 November 2024	
Paper sponsored by:	Crishni Waring Chair of the Trust	
Paper authored by:	Kate Dyer Director of Governance & Risk	
Date submitted:	20 November 2024	
State which Board Committee or other forum within the Trust's governance structure, if any, have previously considered the report/this issue and the date of the relevant meeting(s):		
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e., assured/ partially assured / not assured:		
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	Annual report	
LPT strategic alignment:	Great Health Outcomes	✓
	Great Care	✓
	Great Place to Work	✓
	Part of the Community	✓
CRR/BAF considerations:	List risk number and title of risk	All
Is the decision required consistent with LPT's risk appetite:	NA	
False and misleading information (FOMI) considerations:	Considered	
Positive confirmation that the content does not risk the safety of patients or the public	Y	
Equality considerations:	NA	