

## Board of Directors (in Public)

### Item 5.4

**Subject:** Annual Evaluation of Board of Directors and Board Development Plan  
**Date of meeting:** Tuesday 26<sup>th</sup> April 2022  
**Prepared by:** Karan Wheatcroft, Director of Risk and Improvement  
**Presented by:** Val Davies, Chair  
**Purpose of Report:** For Approval

BAF Ref	Impact on BAF
All	This report provides assurance of compliance with Trust constitution with regard to the requirement for an annual Board evaluation

Level of assurance (please tick one) <i>To be used when the content of the report provides evidence of assurance</i>			
<input checked="" type="checkbox"/> <b>Acceptable assurance</b> Controls are suitably designed, with evidence of them being consistently applied and effective in practice	<input type="checkbox"/> <b>Partial assurance</b> Controls are still maturing – evidence shows that further action is required to improve their effectiveness	<input type="checkbox"/> <b>Low assurance</b> Evidence indicates poor effectiveness of controls	

#### 1. Executive Summary

The Chair is required, at least annually, to lead a performance assessment process for the Board of Directors. This process should act as the basis for determining individual and collective professional development programmes for Directors (LHCH Constitution, Annex 8, Paragraph 11).

This paper summarises the evaluation process and board development work undertaken in 2021/22.

The Board is asked to consider the report and to confirm its ongoing commitment to the process for the ongoing Board development programme.

#### 2. Board Evaluation

The 2021/22 annual Board evaluation process has comprised five components:

##### i) Regular Evaluation of Board Meetings

The Board routinely undertakes an informal evaluation of the Board at the end of every Board meeting and a summary of the feedback from Directors is recorded in the minutes of the meeting.

Throughout the year the quality of papers and contribution from members and officer has been good.

For the majority of the year the Board operated via MS Teams due to the coronavirus pandemic; with virtual access provided for meetings in public. The Board continued the process for recording and submission of NED comments and questions in relation to Board papers in advanced of the meeting. The purpose of this was to mitigate any risk of technical problems, and to support smooth running of the meeting. The Board adhered to the agreed etiquette for the conduct of online / video meetings throughout 2021/22.

In 2021/22 the Board is will look to resume face to face meetings. This decision will be guided by IPC requirements and consideration of community prevalence of COVID 19.

The Board has also continued with the following processes to ensure the efficiency and effectiveness of Board time:

- use of *starred*\* items on the Board agenda to improve time management and enable richer discussion on items for decision.
- re-enforcement of use of presentations in support of (rather than instead of) written papers.
- guidance on report writing setting out the principles of focused, succinct and tailored reports to meet the needs of audience, with insightful executive summary and clear recommendations.
- improved connectivity and linkage between assurance reports and the Board Assurance Framework.

By the end of March 2022, all essential Board items had been reviewed with continued focus placed on recovery. The national timeframe for operational planning 2022/23 continued over year end, with the Board fully briefed on this through the formal meetings as well as the development sessions.

## **ii) Evaluation of Board Assurance Committees**

The Audit Committee completed its annual evaluation of each of the Assurance Committees and concluded that all had met their key objectives for 2021/22. All Terms of Reference had been reviewed and an assurance report provided to the Board of Directors in April 2021. The Audit Committee also evaluated its' performance through review of the Audit Committee checklist and a workshop session to confirm full compliance with its' terms of reference.

## **iii) Individual Performance Reviews and Personal Development Planning**

There is an established process in place for individual performance review and objective setting for each Director on at least an annual basis. Each Director also has a personal development plan. The outputs of annual appraisals are reported to the Council of Governors (for the Chair and Non Executive Directors) and to the Nominations and Remuneration Committee (Executive) for the Executive Directors. The appraisal process for the Chair and Non Executive Directors was approved by the Council of Governors and is aligned to NHSE/I guidance. Governors were actively involved in the Chair's appraisal process. All Director appraisals for 2021/22 will be completed by June 2022.

Throughout 2021/22 the Chair has maintained regular one-to-one discussions with each Non Executive Director as has the Chief Executive with each member of the executive team. The Executive Team have continued to be present on site throughout the week with a formal Executive Team meeting every Wednesday. In addition, the Chair held monthly MS Teams calls with the NEDs to keep them fully informed of Trust, ICS and national developments, risks and priorities. Due to IPC measures, NEDs walkabouts did not take place during 2021/22.

A new NED was appointed and undertook a formal induction in 2021/22. Two current NEDs were also re-appointed (for varying terms). Whilst the new Chair formally joins the Trust from the 1st April 2022, their induction and development commenced during 2021/22 as part of the handover process.

#### **iv) Well Led and Board succession planning**

The Trust was last re-inspected and rated by the CQC in 2019/20 achieving a rating of 'outstanding' overall and for Well Led. During 2020/21 the Board decided not to commission an independent well led review (due March 2020) given the context of prevailing circumstances and the limited value that this might offer at the present time. The Board has continued to routinely evaluate the effectiveness of the Board and to review and implement a Board development plan (Appendix 1).

The Board succession plan has been reviewed in 2021/22 and there have been a number of changes to Non Executive Director and Executive Directors. In particular, much consideration continues to be given to the diversity of the Board in the context of the succession plan and recruitment campaigns. A new Chair and two Non Executive Directors will join the Board in early 2022/23 and a focus placed on their induction and ongoing development.

#### **v) 2021/22 Board Development Plan**

The 2021/22 Board Development Plan is attached at Appendix 1 and summarises the development work undertaken by the Board of Directors during the last 12 months.

All Board directors participated in the 2021/22 Board Development Plan with dedicated time scheduled throughout the year. In addition to the collective programme, individual Board members have throughout the year participated in numerous online webinars and reviewed briefing papers and guidance issued by NHSE/I, NHS Providers, NHS Northwest, Cheshire and Merseyside ICS, NHS Confederation, Good Governance Institute, alongside the regular emergency response communications and NHSE leadership webinars. Topic areas included the White Paper reforms and ICS development, collaborative working, health inequalities, digital and information, clinical strategy and operational planning. This engagement has provided significant personal development and has supported Board members in keeping abreast of key issues, challenges and policy direction along with the Trust's response. The 2022/23 Board development plan will continue to build on these themes (Appendix 2).

Individual professional development programmes supplement this collective programme and are agreed between each executive team member and the Chief Executive (Chair for the Chief Executive) and between each NED and the Chair. The Trust regularly accesses the development programmes provided by NHS Improvement, NHS Providers, MIAA, AQuA and other bodies to support the development of Directors as well as clinical leaders and senior managers.

The annual joint Board of Directors and Council of Governors meeting (9<sup>th</sup> November 2021) provided opportunity to engage with Governors around the Trust's future plans and seek Governor feedback. Governors also reviewed the arrangements in place to provide support, training and development for governors and the information provided for Council meetings and it was confirmed that Governors' needs continued to be met.

### **3. Recommendations**

The Board of Directors is asked to:

- i) review and note the report;
- ii) note the Board Development work undertaken in 2021/22 (Appendix 1); and
- iii) support the outline Board Development Plan 2022/23 (Appendix 2) noting that this will subject to continuous review.

## Board Development 2021/22

<b>29<sup>th</sup> June 2021</b>	Mike Farrar facilitated discussion on response to the white paper, system reform and positioning of LHCH.
<b>2<sup>nd</sup> November 2021</b>	Development sessions included: <ul style="list-style-type: none"> <li>• Health Inequalities/Systems Data and The Untold Heartbreak BHF Report</li> <li>• The changing landscape, key influences/drivers and transformative programmes along with the White Paper, ICS Design and Provider Collaboratives</li> </ul>
<b>9<sup>th</sup> November 2021 (Joint BoD/ CoG)</b>	Development sessions included: <ul style="list-style-type: none"> <li>• ICS developments</li> <li>• National Inpatient Survey</li> <li>• Integrated Care Systems and shaping LHCH strategy</li> <li>• Financial Framework</li> </ul>
<b>14<sup>th</sup> December 2021</b>	Development sessions included: <ul style="list-style-type: none"> <li>• LHCH clinical strategy</li> <li>• Making data count, facilitated by NHSEI</li> </ul>
<b>22<sup>nd</sup> February 2022</b>	Development sessions included: <ul style="list-style-type: none"> <li>• New models of care and provider frameworks, supported by Hill Dickinsons</li> <li>• Emerging provider collaboratives</li> <li>• Facilitation through digital platforms</li> <li>• Operational planning 22/23</li> </ul>

### Topics scheduled into the Board meetings also included:

- Dr Foster presentation (27<sup>th</sup> July 2021)
- Clinical Presentations:
  - The Breathe Programme (27<sup>th</sup> April 2021)
  - Medical Devices (28<sup>th</sup> September 2021)
  - Organ Donation and Transplantation (30<sup>th</sup> November 2021)
  - Targeted Lung Health Check Programme (25<sup>th</sup> January 2022)
  - The role of the Medical Examiner (29<sup>th</sup> March 2022)

## Outline Board Development Plan for 2022/23

<b>14<sup>th</sup> June 2022</b>	<p>Development sessions planned:</p> <ul style="list-style-type: none"> <li>• Divisional updates, partnerships and clinical strategy</li> <li>• Risk appetite refresh</li> <li>• Well led framework</li> </ul>
<b>25<sup>th</sup> October 2022</b>	<p>Dates for Board development protected and topics to be prioritised during the year. To consider:</p> <ul style="list-style-type: none"> <li>• Population health and health inequalities</li> <li>• ICS, provider collaboratives and integrated services</li> <li>• Governance developments</li> <li>• Dr Foster presentation</li> <li>• Research and innovation</li> <li>• Ethics (including treatment, innovation and research)</li> <li>• Health and Safety for Boards – Hill Dickinsons</li> <li>• Equality and inclusion</li> <li>• Organisation learning</li> <li>• Clinical audit and improvement</li> <li>• CIP</li> </ul> <p>Clinical presentations will also be scheduled across the year for Board meetings. To consider:</p> <ul style="list-style-type: none"> <li>• ACHD</li> <li>• Community services</li> <li>• CF service</li> </ul> <p>Focus will also be placed on team building / onboarding of new Directors/ NEDs.</p>
<b>8<sup>th</sup> November 2022 Joint BoD / CoG</b>	
<b>13<sup>th</sup> December 2022</b>	
<b>28<sup>th</sup> February 2023</b>	