

<b>Report to:</b>	<b>Public Board of Directors</b>	<b>Agenda item:</b>	<b>13</b>
<b>Date of Meeting:</b>	<b>22 February 2017</b>		

<b>Title of Report:</b>	<b>Non-Clinical Governance Committee Update Report</b>
<b>Status:</b>	<b>For information</b>
<b>Sponsor:</b>	<b>Joanna Hole, Non-Executive Director/ Chair of the Non-Clinical Governance Committee</b>
<b>Author:</b>	<b>Catherine Soan, Executive Assistant to the Director of Human Resources</b>
<b>Appendices</b>	<b>None</b>

<b>Purpose</b>
To update the Board of Directors on the activity of the Non-Clinical Governance Committee held on 9 <sup>th</sup> January 2017.
<b>Background</b>
The Non-Clinical Governance Committee is one of three assurance committees supporting the Trust Board in fulfilling its objectives. The Committee is responsible for testing the robustness and effectiveness of the non-clinical systems and processes operating within the Trust to provide assurance to the Board of Directors.
<b>Business Undertaken</b>
<p><b>Performance Management</b></p> <p>The system was last reviewed by the Committee in May 2016, a level of assurance was not given as the system was still being embedded at that time. The Trust is still in a period of transition following the introduction of the NHS Improvement Single Oversight Framework but the Chief Operating Officer described the internal system.</p> <p>The Operational Delivery Review (ODR) meetings had been established to support the Executive Performance Reviews, chaired by the Deputy Chief Operating Officer with nursing, finance and divisional representatives in attendance. The monthly meetings have become a useful vehicle enabling in depth discussions of all performance issues across the division, allowing the performance management meetings to focus on the high level issues.</p> <p>Operational Delivery Reviews are working well although more assurance will be sought to ensure they are not over-burdened.</p> <p>The Committee asked for clarification on what the triggers were for calling a Star Chamber and the Chief Operating Officer will establish what they are with her Executive colleagues.</p> <p>The Committee agreed to give significant assurance with minor improvements and will review the system again in 12 months.</p>
<p><b>Data Accuracy</b></p> <p>The system was last reviewed by the Committee in January 2015 and significant assurance with minor improvements was awarded.</p>

Data Quality is essential to the successful operating of the Trust from a performance point of view. The responsibility of data accuracy is with the teams who capture and record data. The Trust has a Data Quality Steering Group to oversee data quality and the Head of Business Intelligence is currently looking at the membership of this group so it becomes more operational.

The Committee noted the significant achievements made since the last report and future work programmes (such as the introduction of electronic patient records, which allows easier access to source data for analysis and audit checks).

User satisfaction had been assessed previously but the Head of Business Intelligence thought that it would be useful to carry out a further assessment on this.

The Executives agreed that the Business Intelligence team were very responsive, highly skilled and efficient and asked the Head of Business Intelligence pass this on to the team.

The Committee agreed that they would like more assurance around clinical coding and will review this system at a future meeting.

The Committee agreed that in terms of data quality they were significantly assured with minor improvements and would review the system again in 12 months.

#### **4 hour maximum wait in A&E target**

The Chief Operating Officer reported that performance is being reported to the Fit for the Future Board.

The Trust's position is indicative of the national position of social care challenges. The Trust continues to have compromised flow however; we have seen some improvement with our health partners in responding to challenges including the non-emergency transport provider.

We have a new escalation framework with new terminology called the Operating Performance Escalation Levels which is a national mandate. This is being adopted and people are responding to it.

The Chief Operating Officer has been notified that a suite of measures, other than the 95% target will be brought in including measuring patient and staff experience. The Trust should do well in the patient experience measures, our Friends and Family Test results are always in the top 5.

The Committee noted the updated.

#### **External Agency Visits**

The Board of Directors Secretary will be undertaking a whole review of the external agency visit log but updated the Committee on some additions.

The Board of Directors Secretary will liaise with divisional leads to ensure she

<p>receives notification of forthcoming visits.</p> <p><b>Board Assurance Framework (BAF)</b> The Committee noted the BAF in its entirety.</p> <p><b>Audit Tracker</b> The Committee reviewed the audit tracker and closed all of the actions recommended for closure.</p> <p><b>CQC Registration – Statement of Purpose</b> The Board of Directors Secretary presented the statement of purpose which she had been updating following its review at the last meeting. It is still a work in progress and the Committee will review again at the next meeting.</p>
<p><b>Key Risks and their impact on the Organisation</b> None identified.</p>
<p><b>Key Decisions</b> The Non Clinical Governance Committee:</p> <ul style="list-style-type: none"> <li>a) The Committee reviewed the workplan and requested to add Clinical Coding, Impact of STP collaboration work and Recruitment and ITR process.</li> <li>b) Were significantly assured, with minor improvements on the Data Accuracy system.</li> <li>c) Were significantly assured, with minor improvements on the Performance Management system.</li> </ul>
<p><b>Exceptions and Challenges</b> None identified</p>
<p><b>Governance and Other Business</b> The meeting was convened under its Terms of Reference.</p>
<p><b>Future Business</b> The Committee conducted business in accordance with the 2017 work plan. Systems for review at the next meeting on 13<sup>th</sup> March include the commercial decision making process, IT Strategy and Sustainability</p>
<p><b>Recommendations</b> It is recommended that the Board of Directors note this report.</p>