

Board of Directors Annual Workplan								
Meeting	Board of Directors							
Date	08/12/2021 Agenda item 14							
Lead Director	Alison Hughes, Director of Corporate Affairs							
Author(s)	Alison Hughes, Director of Corporate Affairs							
Action required (please tick the appropriate box)								
To Approve ☑ To Discuss □ To Assure □								
Purpose								
The purpose of this paper is to provide the Board of Directors with an updated and revised								

The purpose of this paper is to provide the Board of Directors with an updated and revised workplan which maps throughout the year the public business of the Board of Directors of Wirral Community Health & Care NHS Foundation Trust.

This has been revised following comments at the meeting of the Board of Directors in October 2021 to review the timetable for the submission of Annual Reports.

Executive Summary

In accordance with its Terms of Reference, the Board of Directors sets the strategic direction for the Foundation Trust, takes corporate responsibility for all Trust activity, whilst monitoring performance across the organisation and ensuring national policy and legislative requirements are effective addressed and implemented. It is therefore essential that the Board of Directors has an annual workplan to determine the flow and reporting of information in a timely way and in accordance with the Board's cycle of meetings.

The workplan enables a structured and streamlined approach when setting the Board agendas and ensures that all the statutory and regulatory business is submitted to the meetings of the Board of Directors in a timely manner.

The workplan also ensures the governance and strategic aspect of Board business is covered and has recently been updated to reflect amendments and additions that have been made.

Risks and opportunities:

The annual work plan includes the presentation of the Board Assurance Framework (BAF) at each Board of Directors meeting. The BAF records the principal risks that could impact on the Trust's ability in achieving its strategic objectives. Risks relating to other agenda items will be detailed in the reports that are presented to the Board of Directors meetings.

Quality/inclusion considerations:

Quality Impact Assessment completed and attached No

Equality Impact Assessment completed and attached No

QIAs and EIAs will be undertaken when required for relevant agenda items set out in this workplan..

Financial/resource implications:

If additional resources are required to address areas for improvement in agenda items presented to the Board of Directors as part of this work plan, business cases will be prepared and considered in line with the Trust's Standing Financial Instructions.

Trust Strategic Objectives

Please select the top three Trust Strategic Objectives that this report relates to, from the drop down boxes below.

Our Performance - growing	Our Populations - improving	Our Performance - delivering
community services across	services through integration	against contracts and
Wirral, Cheshire &	and better coordination	financial requirements
Merseyside		

Board of Directors is asked to consider the following action							
The Board of Directors is asked to receive and be assured by the annual workplan presented.							
Report history							
Submitted to Date Brief summary of outcome							
Board of Directors	[06/10/2021]	Timings of Annual Reports presented to Board to be reviewed.					

	PUBLIC Board						1	la constant de la con
			24	Q1		Q2	Q3	Notes
	Lead	February	April	June	August	October	December	
Statutory Business	Diseases of Company							
Chair's Report	Director of Corporate Affairs	~	~	~	~	~	~	
Report from the Lead Governor	Lead Governor	,	,	,	Ţ	,		
report from the 2000 Coronio.	Director of Corporate							
Chief Executive's Report	Affairs	~	~	~	~	~	~	
Reports from the sub-committees of the Board (inc.	NEDs							
informal board and Staff Council)	Director of Corporate	_	_	~	,	,		
	Affairs							
•	Director of HR & OD							
Governance	Chief Nurse							
Patient/Service User - Journey of Care		~	~	~	~	~	ž	
Staff Story	Director of HR & OD	~	,	~	~	~	· ·	
Vell-Led Developmental Review Action Plan	Director of Corporate	~		~		•		
Annual Declarations of Interests	Affairs Director of Corporate							
and Decardions of Interests	Affairs							
erms of Reference for committee & board - annual	Director of Corporate	İ	İ	1	1	,	Ì	
eview	Affairs							
Report following committee self-assessments	Director of Corporate	1		~				
	Affairs			<u> </u>				
nformal board annual programme	Director of Corporate		~					
Trust Wide Policy Schedule (via Audit Committee)	Affairs Director of Corporate		1	1	1		 	
rust write Folicy Scriedule (via Audit Committee)	Affairs	*				•		
	Audit Chair	1						
Regulatory	, tadit Orian							
Delegated Authority to Audit Committee for sign off of	Director of Corporate		~					
nnual Report	Affairs							
	Director of Corporate			,				
IHS Provider Licence Self-Certification	Affairs			•				
Healthcare worker influenza vaccination campaign -	Chief Nurse					,		
public assurance report						·		
CQC statement of purpose	Chief Nurse			А	s required.			
Nortaility Report - Learning from Deaths (post-QSC)	Medical Director		~	~	~		~	
			<u> </u>				<u> </u>	
nnual Financial Plan	Chief Finance Officer	To be	e confirmed sub	ject to national	planning guida	ance and associate	d timetable.	
Social Value mid-year report	Chief Strategy Officer		~					
Strategy								
Organisational Strategy	Chief Executive		~	ļ	ļ			
rganisational Strategy - Assurance Report	Chief Executive	~				~		
eople Strategy	Director of HR & OD	<u> </u>	~					
nclusion Strategy	Director of HR & OD			~				
Quality Strategy	Chief Nurse		~					
Medicines Optimisation Strategy	Medical Director					,		
Communications & Marketing Strategy	Director of Corporate			~				
	Affairs	<u> </u>		<u> </u>	<u> </u>			
Communications & Marketing Strategy - Assurance	Director of Corporate	~		~	,		~	
Report	Affairs	<u> </u>					<u> </u>	
Digital Strategy	Chief Strategy Officer		~					
usiness								
ntegrated Performance Report	Chief Executive	~	~	~	~	~	~	
Safe Staffing Report	Director of HR & OD	~						
isk Management								
	Director of Corporate			_		J		
oard Assurance Framework	Affairs	l	,	,		•	_	
mergency Preparedness, Resilience & Response						,		
PRR) self-assessment	Chief Finance Officer					· ·		
nnual Reports								
udit Committee	Director of Corporate	1		~				
	Affairs							
Charitable Funds	Chief Finance Officer			~				
Complaints & Concerns	Chief Nurse				~			
	Director of Corporate	I	1		,			
nformation Governance (inc SIRO & Caldicott								1
information Governance (inc SIRO & Caldicott Guardian)	Affairs/SIRO							
Information Governance (inc SIRO & Caldicott Guardian) Freedom To Speak Up	Affairs/SIRO FTSU Guardian					~		
Information Governance (inc SIRO & Caldicott Guardian)	Affairs/SIRO			· ·		~		



External Well Led Developmental Review - progress review								
Meeting Board of Directors								
Date	08/12/202	<u> </u>	Agenda it	em	15			
Lead Director		ghes, Director of Co						
Author(s)	r	es, Head of Corporat	•	1				
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To Approve □		10 Discuss 🗆		10 ASSU	ire 🖭			
The purpose of this with the externally fa	The purpose of this report is to provide the Board of Directors with assurance on the progress with the externally facilitated Trust's well led review of leadership and governance using NHS Improvement's Well-Led Framework.							
Executive Summary	•							
This report sets out the good progress with the delivery of the externally facilitated well led developmental review. Work completed to date includes the planned: • document reviews, • interviews with Board members and internal staff, • observation of key meetings, and; • a survey to Board members. Further work is underway which includes staff surveys and wider engagement with partner organisations. The report also includes the next steps for the feedback and action planning to address any areas for improvement that are identified through the review.								
Risks and opportunities: The review findings present opportunities for the Board to further develop across the well led domain								
Quality/inclusion co Quality Impact Asses Equality Impact Asse	sment comessment coresments and the action mplication are required in line	ipleted and attached impleted and attached d equality impact ass in plan ins: red to address areas	No essments w for improve		ertaken when required ness cases will be			
		t Strategic Objective	s that this re	eport relate	es to, from the drop			
Please select the top three Trust Strategic Objectives that this report relates to, from the drop down boxes below.								
Our Populations - outstanding, safe ca time	re every	Our People - enhar development	ncing staff	commun	ormance - growing ity services across heshire &			

Board of Directors is asked to consider the following action

The Board is asked to note, and be assured by, the good progress with the delivery of the externally facilitated well led developmental review of leadership and governance, using the well-led framework.

Merseyside

Report history						
Submitted to	Date	Brief summary of outcome				
Board of Directors	During 2020-21	Regular updates have been provided on the internal well-led review through the Chair's Report.				
Board of Directors	October 2021	The Board were assured by the plans put in place to deliver an externally facilitated well led developmental review				



External Well Led Developmental Review - progress report

Externally facilitated well led developmental review

- 1. In October 2021 the Trust procured an externally facilitated developmental review which will contribute to the continuous improvement of Trust governance arrangements. The review is being undertaken by Mersey Internal Audit Agency (MIAA), and will support continuous improvement by identifying what is going well and areas for further development. The review will be informed by the findings from the internally facilitated well led review undertaken just prior to the COVID-19 pandemic.
- 2. The Board received and were assured by the proposed plans and methodology for the externally facilitated well led review at the October 2021 Board of Directors meeting.
- 3. This paper provides an update on the delivery of the well led review since the last Board of Directors meeting.

Methodology

- 4. The external review began with an introductory meeting between the Board members and the MIAA leads in October. This meeting included the background to the review, the approach to be taken including the key lines of enquiry, review milestones, and the introduction of the MIAA team who were undertaking the work.
- The MIAA staff undertaking the well led review work are distinct to the MIAA auditors who deliver the annual internal audit plan for the Trust to avoid any potential conflict of interest.
- 6. The methodology for the review was described in detail in the October Board paper and is aligned to the NHS Improvement well led framework. The methodology includes:
 - Desk top document reviews
 - Interviews Board, Council of Governors and senior leaders
 - External partner organisations (invited to contribute)
 - Staff focus groups
 - Observation of key meetings

Delivery of the external well led review

- 7. The review commenced as planned in October 2021 and good progress has been made.
- 8. The work undertaken includes:
 - The completion of the initial desk top review of key documents,
 - All interviews with Board members and senior leaders
 - Three surveys have been prepared, and the survey to Board members was issued in November with a closing date of 1 December. The surveys to senior managers and staff were not issued in November to allow staff to focus on the completion of the national staff survey, which had a closing date of the end of November. These well led surveys will be issued to staff in early December, and;



NHS Foundation Trust

- Observation of the the private and public Board of Directors meeting in October and observation of further assurance meetings that were included in the delivery plan including the Quality & Safety Committee, Education & Workforce Committee and the Finance & Performance Committee.
- 9. Final pieces of work include any additional document reviews or interviews arising from the triangulation of the evidence reviewed to date; and the review team are arranging meetings with the Council of Governors and external organisations.

Feedback and Action Planning

- 10. The plans for the feedback and action planning remain unchanged from those descried in the report to the Board of Directors in October.
- 11. The findings and the initial conclusions will be collated by the review team and presented to the Chairman and Chief Executive for an initial sense-check. Following this, the findings and initial conclusions including good practice will be presented to the Board for discussion at the Informal Board meeting in the New Year. Due to the planned delay in the issuing of the staff surveys, there may be a slight extension to the date for the informal feedback to the Board
- 12. The Board of Directors will receive the report and develop an action plan in response to the areas that have been identified for further improvement. Areas of good practice highlighted by the review will be disseminated across the Trust
- 13. The key themes from the externally facilitated developmental review will be shared widely with staff and external partners and regulators (NHS Improvement and the CQC).

Board action

14. The Board is asked to note, and be assured by, the good progress with the delivery of the externally facilitated well led developmental review of leadership and governance, using the well-led framework and the next steps described.

Alison Hughes
Director of Corporate Affairs

Karen Lees Head of Corporate Governance

2 December 2021