

Report to:	Trust Board (Public)	Agenda item:	SFT4116
Date of Meeting:	04 October 2018		

Report Title:	Well-Led Action Plan update			
Status:	Information	Discussion	Assurance	Approval
			x	
Prepared by:	Fiona McNeight, Director of Corporate Governance			
Executive Sponsor (presenting):	Cara Charles-Barks, Chief Executive Officer			
Appendices (list if applicable):				

Recommendation:
The Board to note the progress made against delivery of the Well-Led action plan

Executive Summary:
<p>The purpose of the well led action plan is to improve the Trusts leadership and governance structures using the CQC Well Led Key Lines of Enquiry (KLOE) and the NHSI Well Led framework as key reference documents.</p> <p>The Well-Led action plan is formed from several sources of information:</p> <ul style="list-style-type: none"> • Executive gap analysis against the CQC Well Led KLOEs • Executive gap analysis against the NHSI Well Led Framework • Outcome report and recommendations from Well Led review conducted by Deloitte in January-March 2018 • Outputs of Board seminar June 2018 where the Deloitte report was considered <p>The action plan is monitored through the CQC Steering Group and Trust Management Committee, with weekly oversight at the Executive Director meeting (with a view to move to bi-weekly reporting).</p> <p>Good progress has been made with delivery against the plan.</p> <p>There are 3 actions overdue the deadline. All are being actively progressed. There are 5 actions with revised deadlines.</p>

Board Assurance Framework – Strategic Priorities	Select as applicable
Local Services - We will meet the needs of the local population by developing new ways of working which always put patients at the centre of all that we do	<input checked="" type="checkbox"/>
Specialist Services - We will provide innovative, high quality specialist care delivering outstanding outcomes for a wider population	<input type="checkbox"/>
Innovation - We will promote new and better ways of working, always looking to achieve excellence and sustainability in how our services are delivered	<input checked="" type="checkbox"/>
Care - We will treat our patients, and their families, with care, kindness and compassion and keep them safe from avoidable harm	<input checked="" type="checkbox"/>
People - We will make SFT a place to work where staff feel valued and are able to develop as individuals and as teams	<input checked="" type="checkbox"/>
Resources - We will make best use of our resources to achieve a financially sustainable future, securing the best outcomes within the available resources	<input checked="" type="checkbox"/>

1.0 Summary

1.1 Overdue actions:

There are 3 actions overdue deadline.

- Meeting arranged with NHS Employers to use national real time engagement model (Sept). Meeting in the process of being arranged.
- Chief Clinical Information Officer to be appointed (Sept). In progress.
- Deputy Medical Director to be appointed (Sept). Job description drafted. In progress.

1.2 Actions with revised deadline

- Non-Executive Director (NED) representative to work with Chief Operating Officer (COO) to review executive performance review meetings and escalation report (Sept 18 to 31.10.18). Review complete. NED to attend reviews in September. Changes to be implemented end of October 18.
- Clear triangulation framework and assurance map in place which describes the role of audit in relation to other committees – included in updated governance framework (Sept 18 to 31.10.18). Integrated Governance Framework to be updated once governance model agreed with Executives.
- Quarterly update regarding Cost Improvement Program (CIP) and associated Quality Impact Assessment (QIA) to be reviewed at Clinical Governance Committee,(CGC) (Sept 18 to 31.10.18). On CGC agenda October.
- Digital strategy developed (Aug 18 to 31.12.2018). 2nd draft (Exec summary) to Strategy Committee 25.9.18. Full version currently under revision.
- Publication of corporate objectives to the organisation (August 18 to 31.10.2018). Out to printers and will go out with October pay slips.

1.3 Forthcoming actions (October)

- Corporate Strategy
 - 2 months communication plan to ensure Trust strategy is widely known and embedded across the Trust
 - Staff handbook in place to give staff reference point for values and trust strategy
 - 2 month program of work to develop a program of implementation to ensure a multi-disciplinary approach regarding strategy
- Clinical strategy fully integrated in 'case for change'
- Internal leadership development programme – including Quality Improvement approach
- NED representative to work with COO to review executive performance review meetings and escalation report
- Board development program updated to incorporate NED development and NED engagement program across the organisation
- Incidents and complaints: Rolled out corporate governance approach across the organisation
- Clear triangulation framework and assurance map in place which describes the role of audit in relation to other committees – included in updated governance framework
- BAF updated and enhanced to include the developmental aspects associated with KLOE 5
- Quarterly update regarding CIP program and associated QIA to be reviewed at CGC
- Performance reporting: Report and dashboard development
- Shared learning: Map out current cross Directorate learning opportunities

Fiona McNeight
Director of Corporate Governance