

Report to:	Public Board of Directors	Agenda item:	15
Date of Meeting:	30 October 2019		

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

Purpose
To update the Board of Directors on the activity of the Non-Clinical Governance Committee held on 30 th September 2019.
Background
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.
Business Undertaken
<p>Process behind QIPP delivery</p> <p>The Service Line Reporting (SLR) and Planning Finance Manager provided an update on the current framework that reflects the roles and responsibilities for QIPP identification and delivery across the Trust. QIPP targets are set as part of the Trust's operational plan in line with NHSI and NHSE requirements. Each division is allocated a QIPP target to achieve and they are required to develop and own a QIPP plan that demonstrates how the savings will be delivered. The delivery of savings had become more challenging in recent years due to the significant amount of savings required to achieve allocated finance control totals and the Committee noted the levels of efficiency delivered in recent years. The Improving Together Programme creates an improvement culture, making financial savings everyone's responsibility. The Better Value Better Care group has been established to ensure efficiencies and monitor QIPP delivery. The Committee awarded significant assurance with some improvement required and requested to review the system in one year.</p> <p>Acute Collaboration: Procurement</p> <p>The Head of Operational Procurement gave a presentation describing the acute collaboration across the B&NES & Wiltshire STP and extended procurement collaboration with other acute partners in the areas of Pathology, Medicine Supply Chain and Wound Care. The Committee noted the STP procurement workplan, split into 5 workstreams and the benefits of the shared workplan. By involving all local team members in collaborative procurement, resource is more focused on strategic activities, shared resource and knowledge, learning from best practice, supporting unwarranted variation in the NHS and delivery of quicker financial benefit. The financial efficiencies achieved to date were presented as well as challenges for the</p>

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RUH procurement team. These include new ways of working across 3 sites, variances in job roles, conflicting priorities locally and within the STP and different contractual terms. The Committee noted the update which was provided for information and agreed to review again in May 2020.

Temporary Staffing

The Bank and Roster Systems Manager gave a presentation which outlined the systems and process in place to manage temporary staffing. The Committee noted the recruitment process for temporary staff and the current arrangements in place for sourcing agency doctors and authorising temporary nursing staff via an agency (when shifts have not been filled by bank staff).

The Trust collaborated with BNSSG STP to put in place a neutral vend contract for nursing agency supply and from 2nd September 2019 has put a plan in place to stop the use of the high cost tier 4 agency entitled ‘project switchover’. Measures put in place to help with this include increased rates for tier 1 agency nurses from 5th August 2019 and a pay increase for nurses undertaking shifts in the Emergency Department and Medical Assessment Unit.

The Strategic Workforce Committee was currently monitoring mandatory training compliance of bank nurses who are not compliant with mandatory training. The Committee awarded partial assurance in light of it being early days in the project switchover and issues with training compliance, however, they were confident in the process in place for temporary staffing.

Recruitment and ITR

The Head of Resourcing presented the paper. The Committee noted the recruitment process and KPIs which demonstrate that the time to recruit had decreased in the earlier part of the year, however it had increased again recently due to delays with Occupational Health clearance. The process for obtaining references had been streamlined and a project plan was being introduced to improve turnaround times further. A course for recruiting managers takes place monthly to engage managers and equip them with the skills to recruit effectively and efficiently. The Committee awarded partial assurance and agreed assurance of recruitment would move to the People Committee in the future.

Business Impact Analysis

The Deputy Resilience Manager gave a presentation and the Committee noted that as part of the NHSE EPRR Core Standards Assessment in 2018 the Trust was deemed to be partially compliant in aspects relating to Business Continuity Management. The Trust remains partially compliant in the 2019 self-assessment but progress had been made with the introduction of a Business Continuity Management System divided into generic and departmental continuity plans. Embedding and continuous improvement of business continuity management was being accelerated with workshops being held with critical departments and enabling services. The generic continuity plan gives a framework for the whole Trust and makes business planning analysis less onerous but as yet business continuity was still not embedded across the Trust. The Committee were assured that progress was being made, they awarded partial assurance in light of the ongoing work needed. The Committee requested the system come back to the Committee in January once the workshops

had been concluded.

Performance Management Framework

The Chief Operating Officer presented the paper on the Trust’s performance management framework which had been developed with support from KPMG to incorporate the Improving Together Programme methodology. The Committee noted that the Medicine Division were in the transition process of using the new framework and all three divisions will migrate to the new framework by the end of 2019/20. The Committee agreed that, as the framework was yet untested, to award partial assurance, however the paper effectively described the system and how it will work. The Committee will review again in 6 months.

Asbestos

Referred to the Committee following the Private meeting of the Board in July 2019 where it was reported that asbestos continued to be an area of key risk and focus. Shortcomings with the existing management survey data were identified last year and as a result, a new management survey had been procured and commenced in March 2019. Additional controls had been instigated for asbestos management with improved process and communication when asbestos is identified. The Committee noted the update and asked for the issue to return to the Committee in May 2020.

The Committee noted the following reports:

- Board Assurance Framework
- Audit Tracker
- External Agency Visits

Key Risks and their impact on the Organisation

None identified.

Key Decisions

The Non Clinical Governance Committee awarded:

- partial assurance to the performance management framework.
- partial assurance to business impact analysis.
- partial assurance to the recruitment and ITR process.
- partial assurance to the temporary staffing process.
- significant assurance with some improvement required on the Process for QIPP delivery.

Exceptions and Challenges

None identified.

Governance and Other Business

- The meeting was convened under its Terms of Reference.
- There were no items to be referred to the Clinical Governance Committee (CGC).

Future Business

The Committee conducted business in accordance with the 2019 work plan. The

forthcoming agenda items within the workplan for NCGC are:

- Fire
- Asbestos
- Telephony Resilience
- Energy
- Contract Management
- Volunteer Checks
- Acute collaboration: payroll and pensions

Members of the CGC to advise if they have wish to have visibility of the papers/presentation associated with any of these items.

With the establishment of the People Committee, the Chief Operating Officer will take over as the Executive Lead for the Non Clinical Governance Committee from November 2019. The following items will move to People Committee:

- Review of People Practices
- E Rostering
- Recruitment
- Managing Sickness Absence

Volunteer checks will remain with the Non Clinical Governance Committee for continuity.

Recommendations

It is recommended that the Board of Directors note this report.