

Agenda Item 11.4 (iii)

Committees 2023/24 objectives

Objectives as 17 May 2023

Audit Committee

- To support the induction of the new Committee Chair.
- To develop and deliver a fit for purpose training plan for the Audit Committee training plan.
- To provide assurance over the Trust's ESG commitments are tracked and reported accurately.
- To continue to build relationships with Audit Committees across the region to seek and adopt best practice.
- To provide assurance over the key controls over activities contributing to achieving the 23/24 commitments as part of the level 2 risk deep dives.
- To provide assurance over the action plan from the internal audit Cyber Security Ransomware review in 2021/22.
- To provide increased scrutiny of productivity across the Trust.
- To challenge Audit Committee papers in excess of 10 pages to understand the barriers to presenting information more succinctly and seek to address these.

Quality Assurance Committee

- To escalate reports which will affect asset management to the Finance and Performance Committee.
- To focus on assurance related to healthcare associated infections and the actions that are being taken to mitigate the risks to patient safety.
- To consider the impact on staff wellbeing and retention whilst receiving assurance reports.
- To escalate reports which will affect the financial plan to the Finance and Performance Committee.
- To continue to support the Trust's Covid-recovery plan, focusing on gaining assurance on:
 - the impact on patient safety whilst awaiting treatment.
 - the impact on patient safety and health inequalities.
- To escalate reports which will affect the culture of research to the research and Innovation Committee.
- *To seek assurance of the delivery of the existing quality objectives; aligned to the Quality Account & Quality Improvement Strategy*

F & P Committee

- To scrutinise and seek assurance on the delivery of the capital programme (in year, from the 5-year programme), ensuring the pipeline of developments/investments is appropriately prioritised and approved, giving considering for, and balancing of: clinical needs/patient safety/mitigation of risks on the risk register/ innovation/ staff benefits / workforce planning/ financial benefits.
- To work collaboratively with Leeds Hospital Charity to prioritise requests for investment support aligned to the Trust priorities.
- To give greater focus to benefits realisation – ensure expected benefits from investments are tracked, delivered and sustained.
- To review, challenge and assure on the difficult financial choices which will have to be made to achieve the plan, balancing the impacts on patient quality, staff and the financial impact, and triangulate appropriate assurance between Board Committees.
- To review, challenge and assure on the plans in place to achieve the targets set for the Trust as part of the Operational Planning Guidance 2023/24 and the Trusts Commitment to reduce length of stay.

Objectives as 17 May 2023

Building Development Committee

- To review and provide assurance on business cases, project plans, funding plans, emerging designs and change requests to ensure that the planned healthcare facilities are fit-for-purpose, the ICT capabilities can deliver hospitals that are digital by design, and the new equipment supports the delivery of state of-the-art hospitals.
- To provide assurance that the Trust has been sufficiently proactive in its communications and engagement activities with DHSC, NHP and HM Treasury towards securing funding.
- To provide assurance that there has been adequate engagement and collaboration between the Leeds Hospital Charity and BtLW Programme in relation to committed fundraising target (subject to approval of the outline business case).
- To review and provide assurance on emerging designs to ensure that these align to best practice and contribute substantially to long-term improvements to IPC.
- To provide assurance that appropriate engagement, communication and consultation is undertaken with staff around workforce plans being developed for the new hospitals, and any changes to working conditions that directly impact upon them, in support of staff retention.
- To review and provide assurance to BtLW budgets, financial plans, and performance to ensure that the Programme is managed within the financial constraints permitted by the approved programme.
- To work closely with IDC to ensure that the delivery of the Hospitals of the Future and New Pathology Laboratory supports the vision for the Innovation Pop-Up and Innovation Village.

Workforce Committee

- To seek assurance on compliance of mandatory training with a focus to IPC.
- To seek assurance of the determinants of unwanted staff turnover, implementation of the right strategies to encourage our talent to remain working for LTHT.
- To seek assurance that systems and processes are embedded to ensure that our unplanned absence in managed optimally, meeting the needs of the organisation whilst taking a personalised approach to keeping staff in work.
- To seek assurance on workforce planning, focussing on
 - use of bank and agency to deliver the financial plan.
 - alignment to service delivery targets.

DIT Committee

- To support the induction of the new Committee Chair
- To assure the improvement in the Trust cyber preparedness
- To assure the investments in core infrastructure, systems and projects
- To assure the reporting, information, insight, data quality and data coding services provided to the Trust
- To assure the Information Governance processes and approach provided to the Trust
- To assure the current service delivery (including Medical Records, service desk and service management)
- To assure progress on the initial analysis and scoping of the application estate simplification.

Objectives as 17 May 2023

Innovation District Committee

- IDC will seek assurance on the disposal strategy for the Old Medical School including approving the business case(s) justifying the disposal to ensure that the proposed route is in line with the agreed investment objectives, meets the Trust's obligations under the NHS estates code, and that the building can be marketed prior to March 2024.
- To review and provide assurance on the plans associated with the future disposal of the remainder of the LDS.
- IDC will seek assurance on the business case to seek funding from the New Hospitals Programme to provide education and training facilities on the LDS site.
- IDC will review and provide assurance of LDS budgets, financial plans and performance to ensure that the Programme is managed within the financial constraints permitted by the approved programme.
- IDC will receive regular updates on the Innovation Pop Up activity to provide assurance regarding the furthering of a culture of innovation across the Trust, developing our staff and increasing innovation activity.

Research & Innovation Committee

- To provide assurance that:
 - the existing estate and infrastructure associated with research is being optimally utilised,
 - the estate and infrastructure needs associated with research are being met,
 - funding for new assets required for research are being sought through grant applications and other strategic applications and
 - there is effective working with other corporate departments and CSU's to deploy and utilise these.
- To provide assurance that staff are being given opportunities to be involved in R&I and have access to training opportunities and mentoring to support their professional development needs and that research-active staff with shorter-term contracts are supported to identify funding that enables them to be retained in research roles in the Trust.
- To provide assurance that R&I is meeting its financial target for the year, that waste reduction schemes are being met and continuing the work to get to a position where R&I is a net contributor to the Trust's budget.
- To provide assurance that CSUs are being supported to develop a culture of Research and Innovation through:
 - Development of CSU Research and Innovation strategies.
 - The development of a system that exposes, engages, educates and embeds clinical research, creating a culture where research, service and quality improvement is everyone's business and equitable clinical academic career pathways within and across the CSUs.
 - Evidence of R&I activity in every CSU
 - Evidence of impactful internal and external communications that support engagement of staff and patients with research.
 - Development of metrics to gain assurance that we are operating within risk appetite for the R&I risk statement.

Risk Management Committee

- To review Corporate Risk in line with the annual work plan and in the event of the risk profile changing or new related risks emerging in-year.
- To review risks related to healthcare associated infections with CSUs and IPC leads and the actions that are being taken to mitigate the risks to patient safety.
- To review risks related to workforce, staff health safety and wellbeing with CSUs and HR leads and the actions that are being taken to mitigate the risks to patient safety.
- To review risks related to finance and capital programme with CSUs and finance leads and the actions that are being taken.
- To review risks related to delivery of constitutional standards with CSUs and Corporate Operations leads and the actions that are being taken to mitigate the risks to patient safety.
- To review risks related to delivery of constitutional standards (clinical) with CSUs and Corporate Operations leads and the actions that are being taken to mitigate the risks to patient safety.
- To review risks related to Research & Innovation and the actions that are being taken to mitigate the risks to patient safety.