

Restructuring of Board Sub Committees

1. Introduction

- 1.1 This paper sets out proposals to restructure the current arrangements for dealing with Trust business through formal sub committees. It sets out the rationale for the changes and proposes memberships for the sub committees of the Board.

2. Background

- 2.1 NHS organisations are being required to develop strong organisational governance arrangements, modelled on the best examples from the private sector. Following advice Bentley Jennison Consulting and discussions held between the Chairman, Non Executive Directors and the Chief Executive, a revised structure for Board sub committees is proposed. Current best practice suggests that the Trust Board should establish as few sub committees as possible in addition to those required by statute and that where established, consideration should be given as to whether they should be time limited.
- 2.2 West Hertfordshire Hospitals NHS Trust has been reviewing all of its current eight sub committees, ensuring that their Terms of Reference are compliant with the requirements of the NHS Litigation Authority. Revised Terms of Reference for the current Finance and Performance Committee, Risk Management and Clinical Governance Committees have been reviewed and where appropriate amended. The Risk Management Committee's revised Terms of Reference were approved by the Board in August 2006. It had been intended to ask the Board to approve revised Terms of Reference for the Finance and Performance and Clinical Governance Committees at the Board meeting in October.

3. Proposed Changes and Rationale

- 3.1 The current structure of Trust Board sub committees is set out in table 1 below. Advice from Bentley Jennison Consulting suggested that a number of the current sub committees should either be Executive groups or short life groups clearly focused on short term agendas with a time limited existence. This advice coincided with a view from the Chairman and Non Executive Directors that the current structure of Board Sub Committees did not give sufficient distinction between the roles and responsibilities of Executive Directors and those of the Non Executive Directors. Consequently a revised sub-committee structure is proposed in table 2 below.

Table 1: Current Trust Board Sub Committees

Trust Board Sub Committees
Audit
Remuneration
Finance and Performance
Clinical Governance
Risk Management
Human Resources
Information Governance
Investing In Your Health Programme Board
Charitable Affairs

Table 2: Proposed Sub Committees

Proposed Trust Board Sub Committees
Audit
Remuneration
Finance and Performance
Assurance
Charitable Affairs

- 3.2** The rationale for the proposed changes is that the establishment of a single Assurance Committee into which Executive groups for Clinical Governance, Risk, Information Governance, Human Resources and Investing In Your Health will report provides a clearer distinction in between the Non Executive and Executive Director functions and responsibilities. The agendas and papers of the previous sub committees focused heavily on issues that were operational in nature and therefore more appropriate for an Executive level group to consider. It is proposed that each of the Executive groups will report on an exception basis to the Assurance Committee in relation to risk management issues, Standards for Better Health and other key performance and target based requirements.

4. Membership

- 4.1** No changes are proposed to the current membership of Audit, Remuneration, Finance and Performance and Charitable Affairs Committees. Proposed membership of the Assurance Committee is set out below:

Chairman – Robin Douglas

Non Executive Directors – Colin Gordon and Katherine Charter

Medical Director

Chief Nurse/Director of Patient Services, Quality and Risk

Director of HR

Director of Planning

Director of Operations.

4.2 It is proposed that the Assurance Committee meets bi-monthly and that the first meeting would take place in December. Terms of Reference for the Committee would be considered at the initial meeting and ratified by the Board at its meeting in January.

5. Action Required

5.1 The Board is asked to approve the revised structure of sub committees and the proposed membership of the new Assurance Committee.

Mark Jarvis
Trust Secretary
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