

**Agenda Item 12.3 (iii)**

# **Committees 2024/25 objectives**

# Objectives as 16 May 2024

## 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 that builds expertise and familiarity with the subject matter across the Committee.
- To allocate dedicated time to reviewing internal audit assurance of the Building the Leeds Way programme.
- To attend Audit Committee meetings of at least three peers to benchmark the Committee's performance
- To maintain the focus on ensuring papers provided to the Audit Committee continue to be appropriate (eg not overly lengthy and clear explaining the key issues and priorities) and timely
- To explore in the level 2 risk deep dives the activities providing assurance that the 2024/25 commitments will be achieved.
- To support all Committees in developing robust Committee objectives.
- To develop a template for Committees to assess their effectiveness consistently .

## 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 waiting list 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 escalate reports which will affect delivery of the green plan to the Strategic Sustainability Group
- To seek assurance of the delivery of the existing quality objectives; aligned to the Quality Account & [Quality Improvement Strategy](#)

## F & P Committee

- Assure on the finance mitigation and waste reduction plans to achieve a break-even financial position, whilst maintaining the balance between quality/staff/finances.
- Assure on capital spend, ensuring that there is a clear distinction between business-as-usual spend, and that within the HoTF programme; ensuring clear scope, benefits and prioritisation.
- Assure on the plans to achieve the operational planning targets and trajectories, through operational deep-dives
- Continue to build on the assurance started in 23/24 on productivity and efficiency to achieve the 2.2% national target.

# Objectives as 16 May 2023

## Building Development Committee

- Provide assurance on key activities (including business cases, project plans) associated with the BtLW Programme's delivery of new healthcare facilities to ensure these are fit-for-purpose.
- Provide assurance on designs (including change requests) and plans for the new hospitals to ensure that these support the goal of achieving more patient-centred care, closer to home.
- Provide assurance on the Trust's engagement and collaboration with the New Hospital Programme to ensure that it complies with requirements set out within any formal agreements to be agreed between the Trust and the NHP.
- Provide assurance that the Trust's Senior Leadership Team and wider committee structure are adequately engaged with, supportive of, and aligned to the delivery requirements of the HofF Project.
- Provide assurance that the Trust staff are engaged at every key stage of the development of the new healthcare facilities and have the opportunity to input ideas and offer feedback.
- Provide assurance on the BtLW Programme's corporate risks to ensure that these align with evolving corporate and Committee risk appetites and respond to external risks outside of the Trust's control impacting funding and delivery timing.
- Provide assurance on BtLW budgets, financial plans, actual expenditure and independent assurance reports to ensure that the Programme is managed effectively and within funding constraints.

## Workforce Committee

We will;

- Improve the effectiveness of providing assurance through setting a template for deep dives into the People Priorities
- Review on a regular basis the key workforce performance metrics to ensure they provide the insight required for assurance
- Evaluate the effectiveness of our new governance structure including benchmarking with peer organisations and a formal review at the end of Q2
- Ensure that papers provided to the Committee are appropriate (e.g. not overly lengthy and clearly explaining the key issues and the purpose of the discussion)
- Ensure that discussions and decisions are focussed on strategic matters
- Develop a plan to build the committee's knowledge and understanding of the People Priorities (including onboarding our newest members)

## DIT Committee

- Assure the improvement in the Trust Cyber preparedness.
- Consider the progress made on the 24/25 commitment on the use of digital assets
- Assure the approach to mitigating the challenges of the move to PBR from the perspective of the clinical coding service.
- To assure the management and governance of Federated IT services and during 2024/25 seek assurance of their work in line with the trust commitment of using our existing systems to their full potential

# Objectives as 16 May 2024

## Research & Innovation Committee

- We will improve study setup times by 10% to reduce the timescales in which patients can access potentially beneficial research
- We will support the development & delivery of research and innovation projects that aim to reduce the levels of healthcare acquired infections as evidenced by the work of our Biomedical Research Centre
- We will utilise our existing R&I digital systems to provide better data insights relating to demographics of research participants
- We will contribute to the development of LTHT's R&I Strategy for the next 5 years
- We will develop and institute regular Data Protection audits within the year for LTHT sponsored studies
- We will improve our recruitment to time and target metrics by 5%
- We will grow innovation pop-up membership by 10% and contribute to the development of a branding and marketing strategy for what we now refer to as the Pop-up, Innovation Village and Innovation Arc
- We will create 2 new partnerships with industry
- We will deliver on the R&I financial plan which includes a £2m Waste Reduction Programme commitment.
- We will support the development of a commercial strategy that allows income delivery from sources not associated with commercially-sponsored clinical trials
- We will seek to establish an appropriate legal entity to allow us to better exploit and leverage income from our Intellectual Property assets
- We will enter into a contract to sell the Old Medical School to a developer to create a Healthtech Innovation Centre
- We will execute a commercial licensing agreement for an LTHT-led innovation
- We will support 12 members of LTHT staff to submit high quality personal fellowship applications to grant funding bodies to support their research career ambitions.
- We will deliver 50 research and innovation training sessions to LTHT staff

## Risk Management Committee

- We will:
- Provide oversight of significant risks working in conjunction with CSUs and corporate leads, and engage with Board Sub-Committees, including Quality Assurance Committee, Finance and Performance Committee, Workforce Committee, Research and Innovation Committee and DIT
- Review and advise on risk controls and mitigating actions related to sustained operational pressures across the system, leading to congested emergency departments and patient flow pressures, impacting on achieving access targets, with a specific focus on patient safety, outcomes and experience
- Review and advise on risk controls and mitigating actions related to workforce
- Review and revise on risk controls and mitigating actions related to harm to patients, including healthcare associated infections, falls and hospital acquired pressure ulcers
- Review and revise on risk controls and mitigating actions related to hospital infrastructure and prioritisation of capital allocations
- Utilising the Leeds Improvement Method to mitigate risks and reduce harm to patients
- Embedding the revised risk management framework, focusing on the risk categories and risk appetite statements, using this framework to provide assurance through the Board Committee structure