

Trust Board Paper S

Title:	Implementation of the Clinical Management Group Structures										
Author/Responsible Directors:	Kate Bradley, Director of Human Resources /Richard Mitchell, Chief Operating Officer										
Purpose of the Report:	To provide an update on the progress being made, and project arrangements in place in relation to the introduction and implementation of the new Clinical Management Group (CMG) structure across UHL.										
The Report is provided to the Board for:	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;">Decision</td> <td style="width: 25%;"></td> <td style="width: 25%; text-align: center;">Discussion</td> <td style="width: 25%;"></td> </tr> <tr> <td style="text-align: center;">Assurance</td> <td style="text-align: center;">√</td> <td style="text-align: center;">Ratification</td> <td></td> </tr> </table>			Decision		Discussion		Assurance	√	Ratification	
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Summary / Key Points:	<p>The purpose of this paper is to provide an update on the work that has been completed and that continues in relation to the implementation of the new CMG structure.</p> <p>The move to integrate the new structure continues to proceed well. The appointment of CMG Medical Leads, CMG Managers and CMG Lead Nurses is largely completed or recruitment to any remaining gaps is in progress. Finalisation of the structures underneath and in support of the CMG teams is on-going as part of the next phase and is being managed as part of the project arrangements.</p> <p>The risk assessment continues to be monitored and assessed.</p> <p>Appointments have taken place at the senior CMG levels and any remaining gaps are in active recruitment. A revised structure chart showing recent appointments is attached at Appendix 1.</p> <p>Next steps are concerned with the new CMGs embedding their structures; ensuring that they are on track to deliver UHL objectives at CMG and Trust level, along with completing recruitment activity and confirming appointments in the remaining gaps. In addition the Medical Education and Quality & Safety Work streams to support CMGs continue to be progressed as outlined below.</p>										
Recommendations:	The Trust Board is asked to note the contents.										
Strategic Risk Register	A comprehensive risk assessment has been produced which includes CIP risk.	Performance KPIs year to date	N/A								
Resource Implications (eg Financial, HR)	Managerial, Human Resources, Finance, Communications.										
Assurance Implications	Risk Assessment in place – monitored and assessed										
Patient and Public Involvement (PPI) Implications	Patient Representatives were invited to observe the CMG LiA Event										
Equality Impact - A due regard assessment has been completed.											
Information exempt from Disclosure	Yes										
Requirement for further review?	Updates will be provided through Executive Team.										

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

MEETING: TRUST BOARD REPORT

DATE: 28th November 2013

REPORT BY: KATE BRADLEY, DIRECTOR OF HUMAN RESOURCES/ RICHARD MITCHELL, CHIEF OPERATING OFFICER

SUBJECT: UPDATE - IMPLEMENTATION OF THE CLINICAL MANAGEMENT GROUP STRUCTURES (CMG's)

1.0 INTRODUCTION

- 1.1 The purpose of this paper is to provide an update on the work that has been completed and that continues, in relation to implementation of the new CMG structure.
- 1.2 A detailed project plan covering each of the key work-streams was created and members of the Executive Team were assigned a lead role for the relevant work-stream. The Chief Operating Officer and CMG Managers now meet fortnightly as a group with CMG HR Leads to progress the embedding of the new structure, ensure work is completed and that any subsequent decisions and actions are agreed and taken forward appropriately.

2.0 BACKGROUND

- 2.1.1 Following agreement at the August Trust Board seven CMGs have now been established as follows:
- **CHUGS** (Cancer, Haematology, Urology, Gastroenterology and Surgery)
 - **Emergency and Specialist Medicine**
 - **Musculoskeletal and Specialist Surgery**
 - **CSI** (Clinical supporting and Imaging)
 - **Renal Respiratory and Cardiac (RRC)**
 - **ITAPS** (Critical Care, Theatres, Anaesthetics, Pain and Sleep).
 - **Women's and Children's**

3.0 CURRENT POSITION

- 3.1 Attached at **Appendix 1** is the current structure including new appointments.
- 3.2 Next steps are concerned with the new CMGs embedding their structures; ensuring that they are on track to deliver UHL objectives at CMG and Trust level, along with completing recruitment activity and confirming appointments in the remaining gaps. In addition the Medical Education and Quality & Safety Work streams to support CMGs continue to be progressed as outlined below.

4. EDUCATION STRUCTURE SUPPORT

- 4.1 The review of the Nurse Education and Practice Development posts has been completed. There were no changes to roles or responsibilities as all CBU posts could be aligned to CMGs. All Nurse Education posts are now professionally accountable to the Assistant Director of Nursing Services.

- 4.2 Each CMG will have a Medical Education Lead and work is progressing to appoint these individuals. A job role has been prepared by Rob Powell, Assistant Director of Medical Education and we will be inviting colleagues to express an interest in these opportunities in the near future. The successful candidates will have dedicated time in their job plans to fulfil this important role which will include close working with the Director of Medical Education ensuring there is a systematic approach to maintaining and improving the quality and delivery of undergraduate and postgraduate medical education within the CMG. They will work closely with the CMG management team to ensure education and training issues are regularly represented and addressed by the CMG Board and that there is transparency and accountability for CMG education resources (SIFT and MADEL). The Medical Education Lead will ensure collection of data regarding education and training key performance indicators and ensure timely and thorough response to key surveys e.g. GMC trainee survey, or GMC patient safety concerns in liaison with the UHL Department of Clinical Education

5 QUALITY AND SAFETY STRUCTURE SUPPORT

- 5.1 The 8a Quality and Safety Managers now report to the Senior Patient Safety Manager. Over the last month, further meetings have been held with newly appointed senior CMG staff and the Director of Safety and Risk has attended the CMG Managers' meeting to discuss some concerns and update them of progress. The Management of Change paper has been drafted subject to a final decision in relation to the Women's and Children's CMG.
- 5.2 Reviewed and revised job descriptions have been drafted for the new structure.
- 5.3 A new job description for a Business Analyst post has also been written with the banding to be determined but expected to be a Band 6. This post will provide data and information support to the CMGs, pull and provide analysis on Datix reports, and support with data reviews, safety metrics and collation of data for commissioners.
- 5.4 A meeting has been requested with colleagues from finance to confirm final quality and safety budgets. At present there is some concern from the Divisional post-holders regarding capacity in terms of activity that is being discussed.
- 5.5 Meetings with the HR lead continue and very good HR advice and support has been provided.

6 SETTING THE DIRECTION

- 6.1 CMG Directors met on the 1 November for a Direction Setting day facilitated by Nick Dingley. The conversation focussed on the role and expectations of CMG Directors and their teams. We discussed the framework of meetings that will be in place and importantly the ways in which the CMG Directors will work together across a range of areas. We also began the conversations about what support each CMG would need to create a high performing management team.
- 6.2 The first round of monthly performance management meetings commenced on 19 November 2013 and these have focussed on the financial position and forecasts for year end 2013/14.
- 6.3 A programme of monthly performance management and development meetings is in place through 2014.

7 **KEY TIMESCALES**

7.1 The key dates and considerations between are:-

- CMGs officially came in to existence on **Monday 7 October 2013**.
- As described above work is well underway on the supporting structures for Education and Quality and Safety and how they are represented / work with the new CMGs and this is looking to complete by **early December**.
- CMG Managers are working through any gaps in their management structures and recruitment plans are in place with limited change and disruption having taken place to these leadership positions below the Deputy Managers at Service and Operational Manager levels.

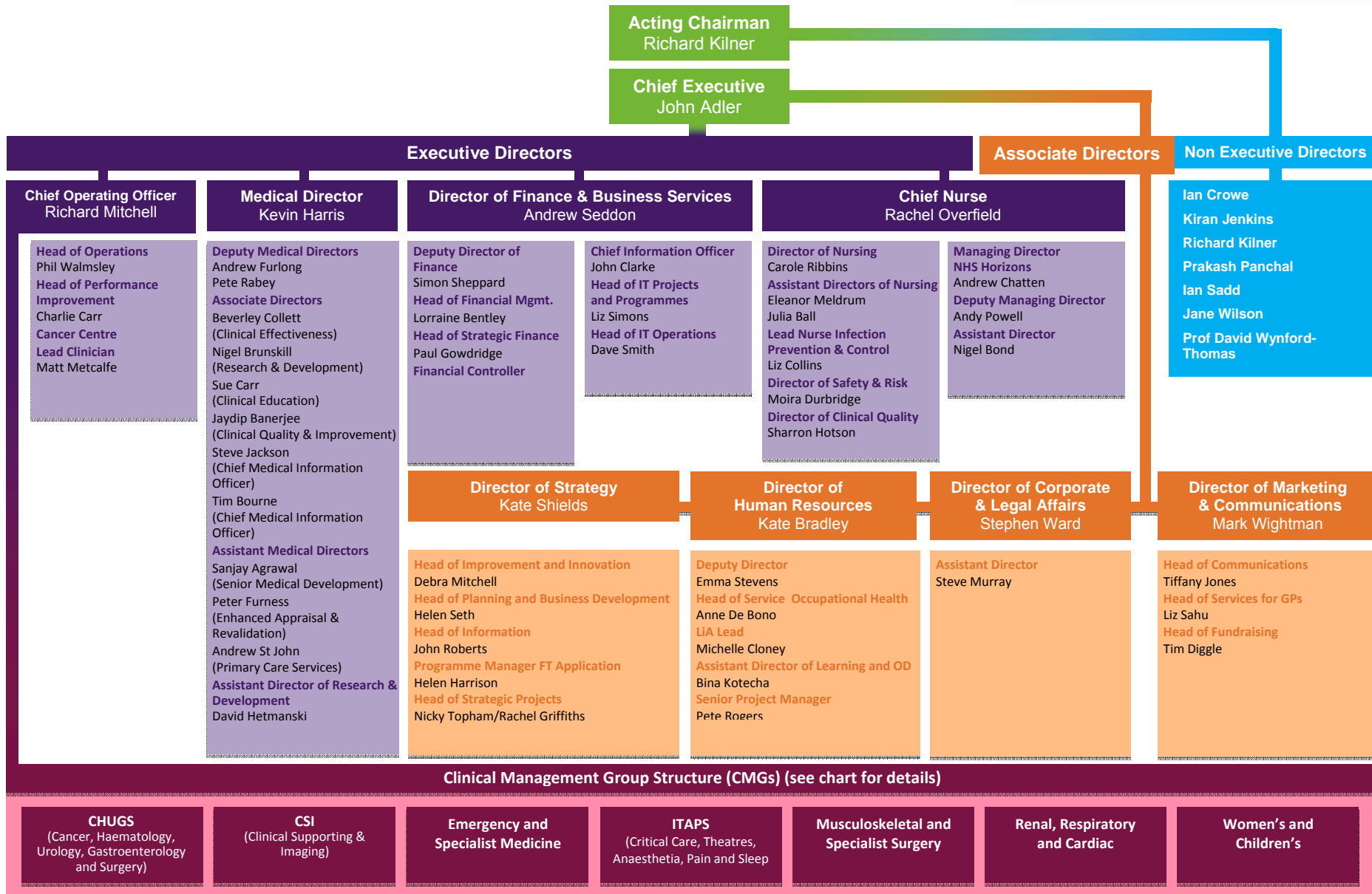
8 **CONCLUSION**

8.1 The new structure is now in place. The appointment of CMG Medical Leads, CMG Managers and CMG Lead Nurses is complete and the remaining vacant posts are being recruited to.

APPENDICES

Appendix 1 - New Structure Chart

Management Structure University Hospitals of Leicester NHS Trust



Management Structure University Hospitals of Leicester NHS Trust

