

# COVID-19 1 April 2020

## Board assurance prompt for the COVID-19 crisis

In a guest GGI briefing on 26 March, Dr Usman Khan stressed the importance of the non-executive director (NED) role in times of crisis.

Dr Khan wrote: 'Asking the right question in the right way and at the right time, the non-executive director has the potential to add game-changing value'. Today we issue a board assurance prompt designed to help NHS board NEDs and chairs identify what those questions might be.

Today's GGI board assurance prompt is aimed at chairs and non-executive directors of NHS provider boards.

This document is designed to provide a succinct summary of some of the key coronavirus-related issues for NHS chairs and NEDs.

Issues covered include some of the primary challenges facing the NHS, such as the health and wellbeing of the workforce, partnership working, evolving models of care, embracing digital ways of working and, of course, numerous governance considerations.

The board assurance prompt will also help to define the sort of questions NEDs and chairs could usefully be putting to boards as the crisis continues and help them scrutinise the assurance that is provided.

The questions cover the main areas of boards' responsibilities, from major incident procedures to plans covering service escalation, workforce and communications.

In any fast-moving crisis, board assurance prompts such as this can only hope to offer a snapshot in time of the main issues. GGI will update this document as new information arises. We will also issue further board assurance prompts as the need arises.

As we said last week, we are doing this because boards do not stop being accountable at times of national crisis and because, in our view, it is precisely at such times that boards must step up and do – and be seen to be doing – the right thing.

"This Board Assurance Prompt (BAP) offers a snapshot in time of the main issues"

Download the full GGI board assurance prompt on COVID-19 here:  
<https://www.good-governance.org.uk/services/covid-19-board-assurance-prompt/>

If you have any comments or suggestions about this board assurance prompt – or suggestions for future versions – please contact us at [advice@good-governance.org.uk](mailto:advice@good-governance.org.uk).

Question	What to look out for
<p>Has the trust deployed its major incident procedures effectively?</p>	<p>Has the trust implemented a robust command and control structure to oversee and lead on the incident response plan? Does this include:</p> <ul style="list-style-type: none"> <li>• A single point of decision making and coordination that is appropriately resourced and coordinated</li> <li>• A standard structure and approach to management that enables teams and subject matter experts to work jointly and provide mutual aid and learning where appropriate</li> <li>• A robust mechanism for risk based decision making and coordination maximising our resources and expertise</li> </ul> <p>Has the trust activated major incident procedures including 24/7 gold, silver and bronze delivery and assurance?</p>
<p>What is the governance for the development of the trust's COVID-19 response plan and has the trust's plan been aligned to the local system plan?</p>	<p>Do work-streams have executive leadership and delivery oversight that operate alongside the incident command structures?</p> <p>Have lead clinicians been involved in all stages of the development of the trust's plan? Has the plan been considered and approved by the trust's management executive?</p> <p>Are the trust's plans aligned with the local health and care system? Has a programme of daily activities to manage the incident response been devised?</p>
<p>Have service escalation plans been developed appropriately and have they been assured?</p>	<p>Have senior clinicians led the development of plans for their own services? Are these based on predictive demand modelling? Are they align with those of trusts in the local system?</p> <p>Three types of clinical plans should have been developed: surge plans, service resilience plans and clinical protocols.</p>
<p>Has a comprehensive workforce plan been developed and is it being deployed effectively? Is staff well-being being addressed appropriately including the executive team?</p>	<p>Has a workforce plan been developed for each staff group and is this aligned to service planning across the trust? Have these been developed with staff input?</p> <p>Are senior clinicians and managers should be providing mentoring, advice and support to their colleagues? Have we expanded the occupational health and staff counselling services at the trust? Are the board able to demonstrate that staff feel valued and listened to?</p> <p>What informal and formal support can the executive draw on? Have cover arrangements have been determined for each member of the team to manage two displacements for sickness? Has thought been given to the role of NED to support the executive team?</p> <p>Have trusts across the local system agreed mutual aid if key leaders are off sick and short-term interims are being identified if needed?</p>

Question	What to look out for
<p>Has a communications plan been developed and is it being deployed successfully</p>	<p>Has a communications plan been developed and is it being implemented?</p> <p>Does the plan identify each stakeholder, key messages and utilise a range of media (such as local television, radio and newspapers, social media and more traditional methods such as emails and team and leadership briefings)?</p> <p>Has particular care been taken to ensure that messages reach staff who do not routinely access NHS Mail?</p> <p>What is the trust's response if staff are leaking stories?</p> <p>Is the plan fully aligned to and complimentary to the local system communications plan?</p>
<p>Have the process for timely and effective reporting to the board been determined?</p>	<p>Does the board receive a progress report at each of its meetings?</p> <p>What steps are in place to ensure that reporting is accurate?</p>