

Questions for boards

Questions	Response
Strategic aims and objectives	
1. How clear are we about what the trust is trying to achieve?	
2. What strategic aims and objectives have we set out for the trust?	
3. Are strategic aims and objectives clearly defined?	
4. How do we provide leadership to the staff delivering the objectives that we have set?	
5. What process do we have in place for translating the objectives into the contribution expected from divisions, care groups and frontline staff and how will their performance will be monitored?	
Sources of evidence	
Governance structures	
6. Are the governance structures clear and straightforward with minimal overlap?	
7. How well do we understand our governance structures and how do we think current governance arrangements could be improved?	
Sources of evidence	

Questions	Response
Achieving objectives	
8. How do we oversee the strategy for achieving our objectives?	
9. How do we ensure that the systems of internal control are operating robustly?	
Sources of evidence	
Board meetings	
10. Is our board agenda dynamic and focused on the right things: the strategy and its implementation?	
11. How much time do we spend on strategic issues at board meetings?	
12. To what extent do we have the right information prepared for board meetings to allow us to monitor this?	
13. Have we considered and acted on <i>The Intelligent Board</i> report?	
14. Are board meetings managed effectively?	
15. What improvements could be made to ensure that we operate as a team?	
16. Do we have trust and respect between executive and non-executive directors?	
Sources of evidence	

Questions	Response
Board operation and skills	
17. What skills do we need as a board?	
18. To what extent do we have the right skills as a board?	
19. How clear are we about what the role of the chair and non-executive directors should be?	
20. Do we delegate responsibilities effectively and appropriately?	
Sources of evidence	
Strategic risks	
21. How can we be sure that we have identified all of our strategic risks?	
22. Are we monitoring strategic risks properly and what level of independent scrutiny or constructive challenge from within the organisation is there?	
23. How timely and relevant is the performance information that we use to monitor risks?	
24. What reports do we receive that provide evidence of the effectiveness of risk management and progress in achieving strategic objectives?	
Sources of evidence	

Questions	Response
Management and monitoring of risk	
25. How do we provide leadership on risk management?	
26. Do we monitor the trust's main operational risks?	
27. How can we be sure that the risk management processes in place will avoid operational risks becoming strategic risks?	
Sources of evidence	
Risk measurement	
28. How clear are we about our risk appetite?	
29. Do we quantify risk appropriately?	
30. Do we have an accountability framework for the trust that sets out the level of risk that is expected to be managed at each level of the trust?	
31. Have we devolved risk management sufficiently and how can we be sure that it is embedded within operational processes and that there is ownership of risk?	
Sources of evidence	

Questions	Response
Risk culture	
32. Do we understand what risk culture we are trying to embed?	
33. Do we know what a good risk culture looks and feels like?	
34. How and when do we communicate our risk culture?	
Sources of evidence	
Use of internal audit	
35. How are we using the internal audit function to obtain assurance on internal controls?	
36. Is the scope and level of investment in internal audit appropriate?	
37. How are we maximising the assurances we can gain from internal audit and do internal audit staff have the right skills and experience?	
38. Are we making best use of other independent sources of assurance?	
Sources of evidence	
Compliance	
39. Do we need to establish or increase investment in a separate compliance function to ensure operations comply with laws, rules, regulatory requirements and our policies?	

Questions	Response
Sources of evidence	
Use of clinical audit	
40. To what extent do we use the clinical audit function appropriately?	
41. Is the clinical audit function systematic and focused on our own risks as well as on nationally identified issues?	
42. Are the results of clinical audit work regularly reported to the board through the assurance framework?	
43. Does clinical audit give us a comprehensive view of the quality of clinical services across the trust's portfolio?	
Sources of evidence	
Sources of assurance	
44. What are our potential sources of assurance?	
45. Do we use assurances appropriately, balancing them across the risk profile of the trust?	
46. How have we satisfied ourselves that assurances are not skewed towards big and topical projects and that we keep our eye on the ball more widely?	
47. How do we systematically test and evaluate the sources of assurance?	

Questions	Response
Sources of evidence	
Board sub committees	
48. Where have we set out the roles and responsibilities of sub-committees to the board and do we receive full and appropriate reports from them?	
49. Specifically, how will the audit committee programme enable it to meet the board's expectations?	
50. Do all non-executive directors have the opportunity to communicate with those on the sub-committees?	
Sources of evidence	
Self declarations	
51. How do we ensure that the statement on internal control is robust and consistent with other declarations and self certifications?	
52. Would our self declarations stand up to rigorous external scrutiny?	
Sources of evidence	

Questions	Response
Data quality – culture and responsibilities	
53. Is there a corporate framework in place for the management and accountability of data quality?	
54. Is there a commitment to secure a culture of data quality throughout the organisation?	
55. How have we made clear the responsibility for data quality governance and accountability at all levels of the organisation?	
56. Do our clinicians understand the purpose and use of the data collected?	
Sources of evidence	
Data quality – policies and training	
57. What policies or procedures are in place to secure the quality of the data used for reporting?	
58. What policies and guidance on data quality do we have? Are they appropriate?	
59. What policies or procedures are in place to secure the quality of the data used as part of the normal business activity of the organisation?	
60. How has the trust ensured that staff have the knowledge, competencies and capacity in relation to data quality?	
61. What kind of training is made	

Questions	Response
available on data quality issues?	
Sources of evidence	
Use of data	
62. What arrangements are there to ensure that data supporting reported information are actively used in the decision-making process?	
63. Are data subject to a system of internal control and validation?	
Sources of evidence	
Data quality assurance	
64. What arrangements are there to ensure that data supporting reported information are actively used in the decision-making process?	
65. Are data subject to a system of internal control and validation?	
66. What controls do we have to ensure that the quality of data used for decision making is good enough?	
67. Is the quantity and timeliness of information we receive for board meetings adequate?	
68. How do our board reports explain the assurance process for the data contained in them?	



Questions	Response
69. Do our board reports clearly highlight any issues with data quality?	
Sources of evidence	