

## THE ROLE OF THE TRUSTEE

### 1. The position under the Memorandum and Articles

The Trustees of NCEPOD are empowered to manage the business of the company and to oversee and approve the strategy of the Enquiry. They also have a duty to scrutinise the financial affairs of the organisation and to act as its Directors (see Articles paragraphs 29(1), 29(2) and Article 1). In addition they are responsible for appointing the members of the company (that is the members of the Steering Group and the Chief Executive and Lead Clinical Co-ordinator).

The objects of the company that they have to manage are broadly defined in paragraphs 3 and 4 of the Memorandum as being to improve standards of medical and surgical care for the benefit of the public by:-

- reviewing the management of patients;
- undertaking confidential surveys and research;
- publishing and making available the results of such activities. Clause 4 of the Memorandum empowers us to hold lectures, classes, seminars, courses, meetings and exhibitions and to cause to be written material for journals, periodicals, magazines, books, leaflets etc.

### 2. What does this mean?

In practice these roles can be broken down as follows:-

#### 2.1 Quality

NCEPOD depends crucially on the quality of its output. A vital role of the Trustees is to find time and energy to scrutinise what is proposed. This arises when study projects are being put forward: we are only able to write two or three reports a year and it is vital that we choose areas where we can make a useful contribution. It also arises when reports are being written: one characteristic of our method is that we look at areas where things have gone wrong and study a small number of cases in great detail. It is vital that those who are involved in the writing of the report are able to come back to others who will read their draft reports and proposals and put them into a broader context.

#### 2.2 Effectiveness

Having produced its reports and proposals NCEPOD has a vital responsibility to propagate the lessons – the third bullet point above. Doing this is a shared effort in which all the Trustees and members of the organisation need to participate. It is important for our Trustees to be effective public (and private) communicators on behalf of the organisation. However, over and above that the Trustees have a specific responsibility for making sure that the organisation as a whole communicates effectively, making suggestions and chivvyng others as well as doing things ourselves.

#### 2.3 Advocates

The Trustees have a vital role to advocate for NCEPOD. When things are going well it is for the advocates to put forward ways in which the role of NCEPOD can usefully be expanded. When things are going badly, either because NCEPOD has said something that is necessarily unpopular or because the state of the public finances forces our primary funders to seek economies, it is for the Trustees to make sure

that the organisation does not suffer. At all times it is necessary for the Trustees to manage the relationship between the organisation and its political links. Always it is necessary to be tactful; sometimes it is necessary to be firm and to insist upon our right and obligation to say things that may be unwelcome.

Such advocacy calls for the Trustees to have close professional contacts with people of influence in our world. Many of these people will be at the Department of Health and our sponsoring body the NPSA but also at the Care Quality Commission, the General Medical Council and to a lesser extent, the bastions of the profession from which we spring, the Medical Royal Colleges. We also need to have good contacts with the media.

#### 2.4 HR

The Trustees have a vital role in managing the human resources of the Enquiry.

This is multifaceted but it includes:-

- (i) Choosing other Trustees;
- (ii) Assessing nominations for membership of the Steering Group or proposals to join the Clinical Co-ordinators. Between us the Trustees need to have an extensive and practical knowledge of the profession and of the ability to acquire such knowledge so as to ensure that we choose the right sort of people. Only if the Steering Group membership is well-informed and articulate will the debate described in 2.1 be productive.
- (iii) Appointing the Chief Executive
- (iv) Assisting the Chief Executive with HR issues. Generally speaking the office runs itself because it is small and has an effective Chief Executive. But the one area in which problems within an office this size can well up is in HR and the Chief Executive does need to be able to discuss these matters with the Trustees.

#### 2.5 Managing the Money

As the Trustees of a Charity with a turnover of over £1 million per annum, the Trustees need to be capable of reading a Balance Sheet and running a business. However in practice this is straightforward: we have modest overheads and use few raw materials. We know the budget at the beginning of the year and with the guidance of the Chief Executive we can calculate the cost of each forthcoming enquiry. As long as we “cut out our coat according to our cloth” we are able to balance our books and we have modest contingency. The Trustees need common sense and good housekeeping instincts rather than accountancy skills.

However, we are constantly aware that we are dependent upon one primary source of funding – the Department of Health which channels its funding to us via the NPSA. We are uneasily aware that this dependence is unhealthy and that we might have to develop alternative funding models.

### **3 Time commitment**

NCEPOD expects its Trustees to devote the equivalent of around 10 working days a year to the organisation. These days are short for London based Trustees – mostly 10.30-4.00 for the full day commitments and 2.00-5.00 for the Trustee meetings. They are made up as follows:-

- (i) Meetings of the Trustees on Friday afternoons. These are not optional: we try to fix dates to meet each others' convenience and we do realise that emergencies may render attendance impossible, but attending our meetings is a high priority for us all. 4 x 0.5 days = 2 days, but obviously much more onerous for those outside London;
- (ii) Steering Group meetings – 2 of these take place a year – usually on Thursdays – each last a full day. Again attendance is not optional. 2 days;
- (iii) Report launches – there are 2-3 of these a year and whilst attendance is optional, the Trustees should try to attend. This is partly because they are an excellent occasion for catching feedback and seeing what is going on. Small amounts of intelligence can be as useful as the larger summarised position: some of our reports are of primary concern to relatively narrow constituencies, such as the specialists in specific diseases. These have been occasions when there has been incoming fire from the specialty under scrutiny and the presence of Trustees can be valuable. 2-3 days;
- (iv) In addition, there are specific ad hoc jobs delegated to the Trustees that are mostly done in the evenings. These include responding to email queries, reading draft reports and commenting on them, preparing for meetings and undertaking other one-off tasks. Allow 2-3 days.