Belfast Health and Social Care Trust
caring supporting improving together

REPORTING TEMPLATE FOR FEED TO CULTURE AND GOVERNANCE OVERSIGHT GROUP (CGOG)

1. Date of CGOG Meeting where reporting template to be considered	11 September 2026

2. Reporting from: Feed name IE CSSG, People & Culture, Governance & Assurance, Medical Leadership)	Medical Leadership
3. Date of Meeting of Feed (if relevant)	n/a
4. Lead Director for "feed"	Chris Hagan

5. Recommendations within "Feed"

DCO 9

- Board knowledge of medical leadership needs to be improved, with more effective oversight by Board Committee.
- The Board should have visibility of all disciplinary processes and internal/external professional reviews against doctors and nurses, to be able to discern patterns and to form a view about improving behaviours, and to ensure that these are not used inappropriately.

Hill/McBride 10

- Ensure that there are regular face to face meetings between CDs, Chairs and the Executive team.
- Ensure that there is annual appraisal of Divisional Chairs and CDs in their leadership roles.
- Consider providing an offer of coaching to Chairs / CDs in their roles.
- Review time and resource allocation for CDs and Chairs.
- Consider how aspiring leaders can access training and development before taking on leadership roles.
- Ensure that Chair and CD roles are time limited.

6. Summary Progress to date against "Feed" recommendations and colour coding for each

Recommendation	Action	Update	RAG status
DCO 9	9.1 Board knowledge of medical leadership needs to be improved, with more effective oversight by Board Committee	- Medical People and Culture report modified to ensure better visibility of medical leadership and seeking feedback on new format.	COMPLETE
DCO 9	9.2 The Board should have visibility of all disciplinary processes and internal/external professional reviews against doctors and nurses, to be able to discern patterns and to form a view about improving behaviours, and to ensure that these are not used inappropriately.	- New report describing management of medical and dental professional issues shared with Chief Executive for review with meeting planned with Medical and HR Directors to finalise format of board report.	COMPLETE
Hill/McBride 10	10.1 Ensure that there are regular face to face meetings between CDs, Chairs and the Executive team.	- Clinical Council ToR meetings in place  2026_02_13_Clinical Council_TOR_v1.doc	COMPLETE
	10.2 Ensure that there is annual appraisal of Divisional Chairs and CDs in their leadership roles.	- Medical Manager annual review document developed based on Sheffield model. - Executive Team have agreed approach to complete annual review of those in Deputy Medical Director and Chair of Division roles in first phase with some meetings haven taken place and most scheduled.	COMPLETE

Recommendation	Action	Update	RAG status
		Medical leadership review document Ju	
	10.3 Consider providing an offer of coaching to Chairs / CDs in their roles.	- Vijaya Nath, Contemplative Spaces leading development programme with coaching offer to Senior Medical Leadership team from June 26 - CDs can avail of coaching through HR	COMPLETE
	10.4 Review time and resource allocation for CDs and Chairs.	- Spreadsheet developed with number of doctors in each patch. This demonstrates inequity in terms of scale and complexity. This, along with the NI HSC financial context, requires more consideration of time and resource allocation than originally envisaged. A new timeline will be developed for this work with aim to complete by end of financial year.	ON TRACK – POTENTIAL DELAY
	10.5 Consider how aspiring leaders can access training and development before taking on leadership roles.	- Clinical leaders development programme has completed first cohorts with further planned for Autumn and Spring (feedback attached). Feedback Cohort 2 summary_.docx	COMPLETE
	10.6 Ensure that Chair and CD roles are time limited.	- Executive team have agreed that CD roles will be 3-year fixed tenure and Chair of Division roles will be 3-year with option to continue to 5-years fixed tenure. - New guidance on process for the appointment of medical leaders being finalised with central recording of appointments, appointment letter with fixed term and notice period highlighted.	COMPLETE

7. New risks identified, including controls and mitigating actions discussed
None identified since last meeting.

8. Issues requiring escalation to CGOG (if any) and actions proposed for consideration by CGOG
None identified since last meeting.

9. CGOG consideration of the Reporting Template
CGOG noted the approach to the tenure of appointments.

10. Trust Board consideration of the Reporting Template