Supervision Strategy

Board of the Stichting Katholieke Universiteit

1. Supervision Strategy
The objective of the Stichting Katholieke Universiteit is to protect the continuity of Radboud University Nijmegen and Radboud University Medical Centre. One of the tasks of the board is to provide the supervision for Radboud University Nijmegen and the Radboud University Medical Centre.

The Supervision Strategy addresses elements that are vital to good governance, such as those which are embedded in various publications on Good Governance, in particular national governance codes subscribed to by the SKU, as well as other deemed relevant by the Board.

2. Composition of the Board of the Stichting Katholieke Universiteit
When filling SKU Board vacancies, consideration is given to the quality and diversity of the SKU Board; members are not reappointed as a matter of course. The profile description for the SKU Board is evaluated and revised where necessary. An individual section is then added that focusses on the desired expertise for the specific situation. The SKU Board regards a diversity of expertise among its members to be essential. The profile description is publicly accessible and published on the websites of Radboud University and the Radboud University Medical Centre.

Below is a list of key words that help define the necessary competencies:
- Independence
- Abstract thinking capacity
- Resolve
- Self-criticism
- Courage
- Dependable
- Transparency
- Social and managerial sensitivity
- Capacity for managerial intuition
- Capacity for authenticity

The appointment of SKU Board members falls under the authority of the Bishops’ Conference of the Netherlands, although the SKU Board is entitled to nominate candidates. Regulations have been drawn up for the appointment and selection of the SKU Board members. The list of nominees is drawn up in as transparent a fashion as possible, by placing an advertisement and often with the assistance of an external agency. The governing bodies of Radboud University and the Radboud University Medical Centre, together with their advisory councils, are given the opportunity to make suggestions for potential candidates. Before a candidate is nominated for appointment by the Bishops’ Conference, the SKU Board meets to discuss the nomination with the Executive Board of the Radboud University and the Executive Committee of the Radboudumc.

3. Supervisory Roles
Duties of the SKU Board are divided into the following roles:

a. The role of supervisor: Assessing the performance of an organisation’s board with regard to mission and objectives; compliance with laws and regulations
b. The role of advisor/sounding board: providing advice on the basis of knowledge and expertise, and information from elsewhere
c. The role of employer: Determining the scope and composition of the governing bodies, carefully selecting suitable board members, drawing up contracts and determining remuneration policy, annual appraisal of the performance and suitability of the board

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1 From ‘De Raad van Toezicht: van Raad naar Toezicht?’, E. Venderbosch, 2010
member for the developing organisation, dismissal, and appraisal of the collective performance of the governing bodies.

d. Approval of the annual accounts, strategic plan, board regulations and other statutory subjects and subjects laid down in the respective governance codes.

e. Making sure the organisation becomes firmly anchored in society: safeguarding its social function and position; monitoring the social accountability of the board.

4. Information
As laid down in the respective governance codes, the Executive Board and the Executive Committee must promptly supply the SKU Board with all the information it requires to fulfil its tasks. To this end, the SKU Board makes specific agreements with the Executive Board and the Executive Committee in an information protocol regarding the quantitative and qualitative information to be supplied, and taking into account the requirement that the supervisory body is aware of what is ongoing in the organisation among supervisors, professionals and patients. To reduce, as far as possible, any risk of the SKU Board being based on biased information, a concept known as the 'information paradox', the SKU Board actively seeks information from both internal and external stakeholders.

By regularly attending various existing types of meeting between board members and the University Council, the Works Council, the Advisory Nursing Board, the Stafconvent and the Patient Advisory Council respectively, the SKU Board keeps up to date with any problems relating to these bodies.

Furthermore, the SKU Board gains information by openly attending events such as the Opening of the Academic Year and New Year gatherings, but also informal gatherings organised for this purpose by the Executive Committee and the Executive Board.

Lastly, the SKU Board receives information from the external accountant by way of the annual accounts report and annual audit report meetings with both organisations.

5. Evaluation
The SKU Board evaluates its own performance annually. This takes place periodically under the guidance of an external facilitator. The internal evaluation is prepared by the Chair and the Secretary. If an external facilitator is involved, he or she discusses this in preparation with all the board members individually and always with the Chair of the Executive Board and the Executive Committee. Once the evaluation has taken place, the findings are shared with the Executive Board and Executive Committee in the subsequent meeting. Mutual performance is evaluated by the SKU Board and the Executive Committee/Executive Board individually.

6. Accountability
The SKU Board reports every year in the Radboud University and the Radboud University Medical Centre annual reports, on its activities and those of the organisation’s committees, the frequency of meetings and committee meetings, its composition and the relevant positions and related activities carried out by its members. It also reports on its own supervisory performance and the performance of the governing bodies, any potential points for improvement, and the evaluation of the policy and quality of health care and/or education and research.

7. Stakeholders
A distinction is made between internal and external stakeholders. Who exactly those stakeholders for the Radboud University and the Radboud University Medical Centre are, is initially determined by the respective governing bodies. The SKU Board has the ultimate right of approval as is formally laid down in the code of governance. In practice, the governing bodies and the SKU Board determine, in mutual consultation, who the stakeholders are.
8. **Duties and Responsibilities**

With respect to key topics, separate committees have been established to prepare for the debate and decision-making process in the plenary meetings of the SKU Board. These committees are the Audit Committees, the Quality & Safety Committee, the Education & Research Committee, and the Remuneration Committees. The committees established by the SKU Board report content in a way that facilitates useful knowledge dissemination and discussion in the SKU Board’s plenary meeting. The standing committees are the following:

a. Two Audit Committees for Finance (& Business Operations) pertaining to Radboud University and Radboud University Medical Centre respectively. The preparation for discussions and the decision-making process regarding matters such as budget, annual financial statements and the treasury plan. The Audit Committee also discusses quarterly figures, financial developments and financial trends. Risk management is also a recurring topic of discussion. The Audit Committees consist of two members of the SKU Board.

b. **Quality & Safety of Health Care**

The SKU Board has a responsibility for Quality & Safety and may be held accountable in this respect, although the accountability is limited to the level of procedures, results and outcomes. Quality issues are dealt with at process level. The Quality & Safety Committee was set up in order to deal adequately with this problem area. The committee consists of two members with sector-specific expertise. It is only possible to maintain and improve ‘quality monitoring’ if the independence of the supervisory body (in practice the Quality & Safety Committee) and the administrative body is mutually recognised and if there is a theoretical willingness to pursue openness and to intervene where necessary. In this way, the SKU Board gains at least some insight into the risks involved in patient care, and into complaints, incidents and calamities, and is informed as to what is ongoing in the organisation among supervisors, professionals and patients. The informal meetings with the Advisory Board Nursing, the Staakconvent and the Patient Advisory Council also play a role in this respect. Quality & Safety is a permanent agenda point for plenary meetings of the SKU Board.

c. **Quality of Education & Research**

This can be divided into Quality of Education, Quality of the Educational Process, Quality of results/outcomes and Quality of Research. Assessments made by the NVAO [Accreditation Organisation of the Netherlands and Flanders] and, if relevant, inspection reports, are regularly presented by the Executive Board, with serious consideration being given to the grade of the assessment. Research is also a regular subject of visitations within research schools or institutes. The results for the SKU Board are published by the Executive Board. The Executive Board publishes an annual research report summarising the successes achieved. The Education & Research Committee further examines all the stated subjects and provides opportunity to expand upon these. Scientific Integrity is also a regular agenda point for discussion. The committee consists of two SKU Board members with sector-specific expertise. Quality & Safety is an item on the agenda for every plenary meeting of the SKU Board.

d. **The Remuneration Committee**, which consists of the Chair and a member of the SKU Board, advises the SKU Board on the remuneration policy with regard to members of the Executive

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2 Sturen op kwaliteit en veiligheid (IGZ, 2008)
3 Toezicht binnen onderwijsinstellingen, Blokdijk/Goodijk, (Nationaal Register) 2012
Board and the Executive Committee respectively, and performs annual appraisals with the persons concerned.

9. **Boardroom Dynamics**

Boardroom Dynamics is related to the psychosocial aspect of governance. If supervisors know each other well, and perhaps also the directors, there is a risk of the focus of the debate becoming less sharp and that people will then mutually confirm each other’s good performance.

Although the SKU Board attaches importance to good teamwork among members, it considers the team’s ability to function in a business-like manner and to remain sufficiently critical equally important, both with regard to themselves, each other and both governing bodies. Boardroom Dynamics forms part of the annual internal evaluation of the SKU Board (see point 5).

10. **Dealing with an Existing or Imminent Crisis**

In a crisis situation, the SKU Board will discuss the situation internally and at the shortest possible notice; close contact between the Chair of the SKU Board and the Chair of the Executive Committee or the Executive Board is essential.

In the event of a serious problem, the SKU Board may decide to intervene (fully or partially). This involves (in ascending order): tighter agreements, further investigation, tightening of goals, coaching and (as a last resort) dismissal of the director(s).

In the event of a serious calamity, a crisis team is formed from three members of the SKU Board, and a communication consultant is appointed.

11. **Supervision Plan**

In December, a supervision plan is drawn up for the following year for Radboud University and for Radboud University Medical Centre. The plan is based on the Executive Board’s administrative agenda and the Executive Committee’s one-paper strategy.

This Supervision Strategy will be evaluated after three years, or earlier if deemed necessary.

Drawn up by the Board of the *Stichting Katholieke Universiteit* on 14 December 2012 as amended on 11 September 2015.