

DRAFT MINUTES

TRUST BOARD PUBLIC MEETING

Wednesday 18th May 2022

11:00am – 14:45pm

Microsoft Teams

Members:

Mary Elford	Chair
Gary Tubb	Non-Executive Director
Dr Anne McConville	Non-Executive Director
Oliver Judges	Non-Executive Director
Fazilet Hadi	Non-Executive Director
Anna Gill	Non-Executive Director
Matthew Winn	Chief Executive
Anita Pisani	Deputy Chief Executive
Mark Robbins	Director of Finance and Resources
Dr David Vickers	Medical Director
Kate Howard	Chief Nurse
Rachel Hawkins	Director of Governance and Service Redesign

In Attendance:

Karen Mason	Head of Communications
Mercy Kusotera	Trust Secretary and Freedom to Speak up Guardian

Apologies:

Catherine Dugmore	Non-Executive Director
Geoff Lambert	Non-Executive Board Adviser

Minutes:

1.0	Patient Story – A patient from the Bedfordshire Acquired Brain Injury service will share his experience with our services.
1.1	The Board noted that the patient story had been rescheduled to July 2022 Public Board meeting due to technical IT issues.
2.0	Chair’s welcome, apologies and additional declarations
2.1	The Chair welcomed all to the meeting. Apologies for absence were noted as above.
2.2	There were no new declarations of interest in the current agenda. Any previously made declarations did not conflict with the meeting agenda.
3.0	Minutes of previous meeting and matters arising
3.1	The minutes of the meeting held on 16 th March 2022 were approved as a correct record of the meeting.
3.2	The Board noted updates to the action log as follows: <ul style="list-style-type: none"> <u>Action 8.1 (September 2021)</u> – the action should read, ‘medical appraisal rate for the period April 2021 to January 2022 was 85%.’ Revalidation process was now back in place; an update showing the end of year position

	<p>to be shared with the Board. Action: Dr David Vickers to update the Board on the overall 2021-22 medical appraisal rate.</p> <ul style="list-style-type: none"> • <u>Action 7.1</u> – the final version of the Green Plan would be submitted to the Board in July 2022. Action: Mark Robbins to share the Green Plan with Geoff Lambert, Oliver Judges and the Chair before it comes to the Board in July 2022.
4.0	Chair's update
4.1	<p>The Chair provided a verbal update to the Board from the following recent visits:</p> <ul style="list-style-type: none"> • Visit to Bedfordshire children's team - the team valued flexible working and the support they were getting from their immediate managers and the Trust. • The health visitor's caseload was complex; this added pressures to her role. • District nurse in Luton - the visit showed the variety of work of the district nurse and the impact she had on her patients. Positive feedback was received from the patients on how the district nurse supported them. • Norfolk Cringleford – staff were excited about the possibility of opening services more. Disparity between what the public expected and what the Trust could deliver was one of the biggest challenges. This put pressure on the team and practitioners. Waiting list for speech and language therapy was reduced. However, there was a legal challenge to the local authority about the contract. Just One Norfolk website won a national award and was looking at developing integrated one front door. Accessibility was one of the areas of focus for the website.
4.2	The Board were informed that Trust service visits would be re-introduced in July 2022. A summary of the visits would be shared with the Comms team and kept centrally. At the moment, one visit or unit per day would be maintained to contain any potential spread of infection.
4.3	The Board noted the Chair's verbal update.
5.0	Chief Executive Report
5.1	The Chief Executive briefed the Board on progress and key issues, events and activities since the last Board meeting.
5.2	<p>The following key headlines were noted:</p> <ul style="list-style-type: none"> • The Board was asked to endorse the Trust Slavery and Human Trafficking Annual Statement. • There were changes to the Financial Plan for 2022/23. The assumptions relating to inflation pressure had changed since the NHS planning was published in December 2021. In line with other partners, the Trust Financial Plan needed to be revised to a £1.7m deficit plan. The Board had a chance to discuss the item during Private Board meeting held earlier. The Director of Finance and Resource was working with the region re- mitigating financial inflation pressure. • Establishment of the Integrated Care System was now scheduled for 1st July 2022. Integrated Care Boards (ICBs) were finalising their composition. Full update on leadership to be shared with the Board. Action: Matthew Winn to update the Board on ICB leadership in the areas where the Trust was a member. • At the end of the Integrated Governance Report Board discussion, the Board would confirm whether the Board Assurance Framework (BAF) was an accurate reflection of the strategic risks facing the Trust and whether there were any risks which needed to be added to the risk register.
5.3	<p>In discussion, the following points were noted from the Chief Executive's report:</p> <ul style="list-style-type: none"> • The BAF would include a risk relating to managing ongoing inflationary pressures.

	<ul style="list-style-type: none"> The chart and bar graphs on the BAF summarised the risk profile of all risks across the Trust. The Trust was currently revising the BAF. A revised proposal to be brought to the Board Development Session in June 2022. The revised version would be presented to the Audit Committee prior to July Board. Action: Rachel Hawkins to present BAF proposal to June Board Development session. The revised version to be shared with the Audit Committee and July Board meetings. The Ethics Committee was set up in response to the pandemic and would continue if required. The Infrastructure Committee would be briefed on the impact of inflation on capital projects. Action: Mark Robbins to brief the Infrastructure Committee on the impact of inflation on capital projects.
5.4	<p>The Board reviewed and:</p> <ul style="list-style-type: none"> Approved the Annual Slavery and Human Trafficking Statement for 2021/22. Authorised the Chair to sign the Annual self-certification on behalf of the Board after the External Audit Report was issued. Noted the changes to the Operational and Financial Plan for 2022/23.
6.0	Integrated Governance Report (IGR)
6.1	Kate Howard introduced the Integrated Governance Report for the reporting period February 2022 and March 2022.
6.2	<p>Key highlights from the outstanding care section included the following:</p> <ul style="list-style-type: none"> Overall assurance ratings were: <ul style="list-style-type: none"> - Substantial for caring - Reasonable for safety, effective and responsive Two serious incidents (SIs) were declared in March 2022, both were currently being investigated. No national patient alerts were received. There were no issues to highlight in relation to Medicines Management. Safeguarding risks were being reviewed regularly. Both risks remained at 16. Revised supervision policy was relaunched on the intranet. Peer Review Standard Operating Procedure was developed to provide quality assurance mechanisms. The Liberty Protection Safeguard document had been published for a 16-week consultation process. The Trust would be contributing to the consultation. Cambridgeshire and Peterborough MASH model had been identified as a 'gold standard' site. Staff from the Trust and Cambridgeshire & Peterborough Foundation Trust would be presenting to NHSE/I. Relevant Infection Prevention and Control (IPaC) guidance had been implemented. The Trust was currently working on Monkeypox guidance. The Trust reported 24 incidents relating to IPaC during this period. There was a decline in needle or stick injuries. 6 teams outbreaks related to Covid 19 during the period, all were being managed in line with national expectations. IPaC Board Assurance was reviewed and included in the meeting pack. An update on the Equality Diversity and Inclusion (EDS) priorities had been added to the Patient Experience section. The priorities were outlined in detail in the EDI report to be discussed later on the agenda. Referral to treatment was discussed in detail during Clinical Operational Board meetings. A proposal was made to the Board to consider closing the Trust's CQC 'Must Do' action relating to Healthy Child Programme.

	<ul style="list-style-type: none"> The final draft of the Quality Account was circulated to the Board for further comments. Action: Board members to share comments with Kate Howard by 25th May 2022.
6.3	<p>In discussion, the following points were noted:</p> <ul style="list-style-type: none"> The Board commended the Health and Safety team for eliminating ventilation problems across sites. Quality account would be presented to the Quality Improvement and Safety Committee (QISCOM) in June 2022. Action: Kate Howard to incorporate into the Quality Account comments which were raised via Convene. Weekly meetings were being held in Bedfordshire to review and manage pressures on waiting lists for paediatric services across Cambridgeshire. Prior to the pandemic, a summit was held in Bedfordshire, Luton and Milton Keynes; there was an agreement to unlock support for children and young people in schools without diagnosis. Action: Anita Pisani to reopen the conversation with BLMK system. The impact of skill mix changes in all team to be picked up during COBs. Action: COBs to discuss the impact of skill mix changes in all teams. The Board did not support the proposal to close the CQC 'Must Do' action relating to Healthy Child Programme. More work would be needed to ensure the 'Must Do' had addressed. Action: Kate Howard to get an external view on the CQC 'Must Do' action next steps and report to the COB; a recommendation would come from the COB to the Board. The wording relating to 2 incidents reported in Ambulatory Care (Adults COB) to be clarified. Waiting lists were discussed in detail during COBs. Suffolk dental services were commended for reducing the waiting lists. The Chair had written to the teams congratulating them on what they had achieved. Action: Dr David Vickers and Mark Robbins to hold an offline conversation with Tracey Cooper on how people with complex needs were identified on waiting lists. People waiting for general dental anaesthesia were not only those with disabilities, but the list included anybody who needed a higher tariff of dental intervention. Action: to ensure that data relating to dental anaesthesia was clarified to the COB.
6.4	<p>Anita Pisani briefed the Board on the level of assurance regarding the strategic objective to 'Be an excellent employer.' The following points were noted:</p> <ul style="list-style-type: none"> Overall assurance rating remained the same as the previous reporting period. Further assurance from staff survey results, Diversity and Inclusion report and Freedom to Speak Up annual reports which were also on the agenda. Trust turnover was gradually increasing. A three-year picture of why people were leaving was pulled together. Human Resources were working with services. The number of people who chose to retire was increasing. The Trust was flexible to allow people to come back after retiring. Longevity of the pandemic had an impact on staff hence the two strategic workforce risks relating to morale (3163 and 3164) remained scored at 20. The Trust was recruiting to a Strategic Workforce Planning Lead. Interviews were scheduled for 24th May 2022. Currently the Trust had about a thousand people on bank temporary staffing. A permanent manager for temporary staff would be appointed. The Trust held a virtual Apprenticeship Celebration for people who completed an apprenticeship in the last two years. The event would be held annually. 7 young people joined the Trust through the Government's 'Kickstart' scheme. Agency bank spend was the same as in 2020/21.

6.5	<p>In discussion, the following points were noted:</p> <ul style="list-style-type: none"> • Ongoing work relating to anti-racism and reducing unconscious bias was commendable. • The Trust bank included stewards, administrators, and vaccinators. The retention team helped bank staff to secure permanent roles where possible. • Bank staff received regular communication and were encouraged to stay. • The Trust had a website, 'Stay with us' to encourage people to stay with the NHS and the wider system.
6.6	<p>Anita Pisani briefed the Board on 'collaborate with others' section. The following key points were noted:</p> <ul style="list-style-type: none"> • Achieved the areas linked to the indicators for collaborating with others which were agreed last year. • Substantial assurance for collaborating with others. • The Trust was embedded with the local systems. • Freedom of information request case study about a national study of autism and genetics; the response was submitted on time. • Finance team continued to work closely with services to ensure all invoices were processed promptly.
6.7	<p>In discussion, it was noted that:</p> <ul style="list-style-type: none"> • The next report would provide detail relating to 2022/23 indicators. • Bedfordshire Health and Social Care oversight board met fortnightly; discharge was one of the areas of focus. • There were challenges in translation services for palliative care, the issue was being picked up as part of learning from deaths group discussion.
6.8	<p>Mark Robbins briefed the Board on the 'sustainable organisation' section of the report. The following key points were noted:</p> <ul style="list-style-type: none"> • The level of overall assurance was 'Substantial' for the reporting period. • A number of variances were reported for service performance (section 1.3), there were no material changes to clinical service budget position. • Cash position improved mainly due to Large Scale Vaccination funding which was received in arrears and a decrease in trade receivables.
6.9	<p>In discussion, the following points were noted:</p> <ul style="list-style-type: none"> • The Trust was now in three months IT mobilisation stage and transitioning fully to the new contract by 1st July 2022. Ongoing work to improve the Digital Desk, which is the main point of contact for staff. • Telephony issues were being addressed; pilot stages were arranged for the next few months. Norfolk Healthy Child Programme would be the first stage then other services would be rolled out into the new system.
6.10	<p>Following the Integrated Governance report discussion, the Board were satisfied that the Board Assurance Framework was an accurate reflection of the strategic risks currently facing the Trust and was assured that there were mitigations in place to address the risks.</p>
7.	Learning from Deaths Report (Quarters 3 and 4)
7.1	<p>The following points were noted from the Learning from Deaths Report:</p> <ul style="list-style-type: none"> • The Trust was embedded in local Maternity Matters groups. Following the Ockenden Review publication, Milton Keynes Maternity Matters presented to BLMK Board, and the Trust was involved in the conversation. • It would be helpful to consider equality and diversity when reviewing the Learning from deaths report. <p>Actions:</p> <ul style="list-style-type: none"> • Dr David Vickers to include equality and diversity and learning from deaths on the next agenda meeting for the Learning from Deaths Group.

	<ul style="list-style-type: none"> • Kate Howard to include in the IGR information relating to some of the issues raised in the Ockenden report. • Rachel Hawkins and the Chair to hold an offline conversation and reflect on reporting arrangements for Ockenden report.
7.2	The Board noted the Learning from Deaths report
8.	Committee Escalation Reports
8.1	<p>Audit Committee The Trust Board noted the report from the Audit Committee meeting in April 2022. There were no points of escalation. The following key points were noted from the report:</p> <ul style="list-style-type: none"> • Internal Audit Plan for 2022/23 was discussed and agreed by the Committee. • The Audit Committee Chair, on behalf of the Board would be signing off the counter fraud national standard evidence. • Board Assurance Framework would be reviewed following June 2022 Board Development session. • Audit for 2021/22 Annual Report and Account was on track. <p>CCS/CPFT Joint Children's Partnership Board Key points were:</p> <ul style="list-style-type: none"> • There were no points for escalation to the Board. • A number of recruitment initiatives had been employed to support recruitment challenges. • The Joint Board worked well together and it was important for the collaborative to build on what had been achieved by the Partnership Board. • The MASH model had been identified as a 'gold standard' site. <p>Quality Improvement and Safety Committee The following key headlines were noted:</p> <ul style="list-style-type: none"> • Substantial assurance received from thematic reviews. • Reasonable assurance received from safeguarding; the team were commended for working extremely hard to ensure appropriate measures and practices were in place and embedded across the Trust. • Risk 3227 (scored at 16) was on the strategic risk register. • Clinical audits had been maintained throughout the pandemic period. <p>People Participation Committee The following key points were noted from the verbal report:</p> <ul style="list-style-type: none"> • Work was now underway to involve service on interview panels as part of the Trust overall approach to co-production. • Equality Diversity objectives for 2022/23 approved. • The Trust was investing in Equality Diversity Lead role for service users. • Update on WRES, WDES and Gender pay gap. • The Trust had appointed two patient safety partners; both were patients.. • Introduction to payment to co-production partners; a policy was in place outlining the process for patients coming to work within the Trust. <p>Infrastructure Committee The following key points were noted from the verbal update:</p> <ul style="list-style-type: none"> • Estates substantial assurance received: some projects were delayed due to the pandemic. • Key projects were under review, including the Ely project. • Some projects were being upgraded. • The support for capital schemes was key

	<ul style="list-style-type: none"> • Health and Safety reporting. • Digital update on key projects • Assurance relating to Cyber Security and contracts • The future of Digital and how it impacts on estates. • Commended the Estates team for being shortlisted for Health Estate and Facilities Management Association project of the year award for their work on vaccination.
8.2	The Board noted the escalation points from Committees.
9.0	Bi-annual Workforce Review
9.1	<p>The following key points were noted:</p> <ul style="list-style-type: none"> • Work was underway to implement actions arising from the review of the NHS wide 'If Your Face Fits' review of discrimination in recruitment practices. No major gaps were identified • Job Descriptions and Person Specification were being reviewed to ensure removal of potential discriminatory language. • A minimum of two people was recommended for shortlisting candidates. • Introduction of BAME staff on interview panels. • The Trust was working with Capital Nurse to support international recruitment. • Currently testing the recruitment of candidates from overseas who apply via NHS Jobs/TRAC and how to support visa applications. • Retention was a key part of the role of the Trust workforce planning activities. • The Trust continued to support staff to maximise their health and wellbeing. • See me first campaign part of the diversity and inclusion work was launched. All staff were invited to make a pledge to become a see me first champion. The Board was invited to become champions and make a pledge and get a lanyard. Action: Angela Hartley to send the 'See me first' link to Board members.
9.2	<p>The following points were noted in discussion:</p> <ul style="list-style-type: none"> • Trust job adverts on NHS jobs website had local postcodes for roles. Social media promoted local recruitment across services. • The Trust had a flexible approach to retirement. There was a support programme for re-validation. • It was important to have a matrix to track overseas staff retention. There was a project board looking at the issues relating to overseas recruitment. Some overseas staff might not be staying with the Trust, but they stayed within the health system. • The need to report on NHS Wellbeing framework diagnostics and the nine principles of the NHS wellbeing guardian. <p>Action: Angela Hartley to hold an offline conversation with Dr Anne McConville on how the annual self-assessment relating to Wellbeing guardian would be reported to the Board.</p>
9.3	The Board noted the bi-annual Workforce report.
10.0	Staff Survey Results 2021
10.1	<p>The following key headlines were noted:</p> <ul style="list-style-type: none"> • The national staff survey was aligned to 7 themes of the People Promise plus staff engagement and morale. • The Trust response rate was 53% • When benchmarked against 16 community Trusts nationally, the Trust was the highest rated Community Trust for 'We have a Voice that Counts' and 'We work flexibly.' • The Trust had the highest scores in East of England in 8 out of the 9 themes.

	<ul style="list-style-type: none"> • Staff survey data was used to develop Trust wide improvement action plan. Action leads were identified. • Diversity and Inclusion action plan for 2022/23 was agreed. • The results showed improvement in some areas for example, the percentage of staff believing that the organisation provided equal opportunities for career progression or promotion. • The Trust networks provided a forum for staff to share their experience.
10.2	<p>The following were noted in discussion:</p> <ul style="list-style-type: none"> • ‘We are always learning, and appraisal’ themes would be covered as part of Quality Improvement (QI). • Last year’s events, for example vaccination mandation made some staff feeling being bullied by the system, not necessarily by the Trust. • Having a voice that counts implied being valued and engaged. • Staff who declared having a disability had increased from 3% before the pandemic to 6%. <p>Action: Anita Pisani to hold an offline discussion with Matthew Winn and Rachel Hawkins on how workforce information would be reported.</p>
10.3	The Board commended the team and noted the Staff Survey Results for 2021.
11.0	Freedom to Speak Up Annual Report
11.1	<p>The following points were noted from the report:</p> <ul style="list-style-type: none"> • 25 concerns were raised formally during 2021/22. However, the Trust had other avenues for raising concerns where staff could receive direct feedback. • The Trust currently had 19 Freedom to Speak up Champions; all had received FTSU Champion training. • Speaking up processes were promoted and embedded into Large Scale vaccination. • Staff who had spoken up felt they had a positive experience. • The Board was asked to agree a proposal to change the RAG rating relating to speaking up culture from amber to green. <p>Action: Mercy Kusotera and Anita Pisani to extend a formal thank you to the 19 FTSU Champions for their contribution to promoting speaking up culture.</p>
11.2	<p>The Board:</p> <ul style="list-style-type: none"> • Noted FTSU annual report for 2021/2 and the improvement plan. • Agreed the recommendation to change RAG rating against the evidence relating to speaking up culture from amber to green.
12.0	Diversity and Inclusion Annual Report including:
	<ul style="list-style-type: none"> • Anti-Racism Pledge
12.1	<p>The following key points were noted from the annual report:</p> <ul style="list-style-type: none"> • 2021/22 Equality Delivery and Inclusion outcomes and proposed objectives for 2022/23 were presented to the People Participation Committee meeting on 11th May 2022. • Proposed 2022/23 EDI objectives were outlined.
12.2	<p>The Trust Board:</p> <ul style="list-style-type: none"> • Approved the following Anti-Racism Pledge: <p><i>“We will have a persistent focus on diversity and inclusion which ensures that all people who use our services and our staff feel safe, supported and valued. We will be an organisation that champions anti-racism in all that we do.”</i></p> <ul style="list-style-type: none"> • Noted the Trust’s performance against Equality Diversity and Inclusion outcomes for 2021/22. • Approved proposed Equality Diversity and Inclusion objectives for 2022/23

13.0	Any other Business
13.1	There were no other business items discussed.
14.0	Questions from members of the public
14.1	No questions were received from the public. The Communications lead for Norfolk Healthwatch joined the Board meeting and advised that accessibility was one of the themes for Healthwatch area of focus for 2022/23.

Date of next Public Trust Board Meeting: 20th July 2022
Venue: Microsoft Teams