

Trust Board

Title:	Chief Executive report
Action:	FOR APPROVAL
Meeting:	26th January 2022

Purpose:

The report gives a brief updated on the challenges facing the organisation and the changes that have been made since to last Board meeting, mostly connected the NHS moving into a level 4 critical incident.

The impact of staff absences due to sickness, isolation requirements and the demand on the services that the Trust offers, has put a huge strain on the whole organisation.

Due to the request by the Prime Minister that as many eligible adults receive their COVID booster jabs before the end of 2021, much of the normal business transactions of the organisation were paused or de-prioritised.

Our entire staff group has undergone huge change over the past two months and I would like to publicly thank and applaud them for their adaptability and sheer dedication to providing care for our local residents. Every member of staff has had to manage work with less colleagues around them or stop their normal job and do something entirely different. This has meant (for example) corporate staff and MSK physios training to undertake vaccinations; staff being re-deployed to support hospital discharge services and other staff remaining in their jobs but undertaking the work of three other people to provide essential cover of functions.

Without the dedication of our wonderful staff, our services would have completely ground to halt during the last few months. However, we must remember that this has had a huge toll on them personally and collectively. As the NHS starts to focus on recovering from the current COVID pressures, it is vital that the national, regional and local planning must take into consideration that our staff need time to recover and that they cannot (for example) be expected to catch up on the waiting lists that have accrued, without time and resources to support them. In the absence of such an approach, I fear that we will see increasing numbers of resignations and the care we will be able to provide will be far short of the standards we set ourselves and that the public expects from us.

Finally, in the report there is an update on the communications activities and events that have been taking place in the past 2 months.

Recommendation:

The Board is asked to:

- (i) Note the content of the report.
- (ii) Accept and agree to the Board Assurance Framework as an accurate reflection of the strategic risks facing the organisation.

Appendices:

Appendix A - Board Assurance Framework Assurance Matrix

	Name	Title
Author & Executive sponsor	Matthew Winn	Chief Executive
	Rachel Hawkins	Director of Governance and Service Redesign
	Mercy Kusotera	Trust Secretary and FTSU Guardian
	Karen Mason	Head of Communications

Trust Objectives

Objective	How the report supports achievement of the Trust objectives:
Provide outstanding care	The report highlights how changes have had to be made to services and staff during the current level 4 COVID incident.
Collaborate with others	
Be an excellent employer	Supporting our staff during the pandemic is a high priority
Be a sustainable organisation	Not covered in this report

Equality and Diversity implications:

Objective	How the report supports achievement of objectives:							
To support the development of a Trust wide Anti-Racism Strategy and Organisational Development Plan.	Implicit in our approach to support BAME members of staff during the COVID19 pandemic.							
To finalise the roll out of reverse mentoring as part of all in house development programmes.	Not covered in this report							
We will measure the impact of our virtual clinical platforms, ensuring that they are fully accessible to the diverse communities we serve.	Not covered in this report							
We will ensure that the recruitment of our volunteers are from the diverse communities they serve.	Will be clear in the recruitment of volunteers to help the COVID vaccine roll out.							
Are any of the following protected characteristics impacted by items covered in the paper No								
Age	Disability	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

1 RESPONSE TO COVID19 PANDEMIC

- 1.1 In December the Trust responded to the move to a Level 4 National Incident due to a surge in the Omicron variant. The widespread nature of the Omicron variant has impacted on staffing levels across all services and of course an increased demand for the vaccination booster programme. Non-essential services were reviewed and where appropriate stepped down and governance arrangements streamlined to release capacity to support the continuation of our services; the vaccination booster programme and redeployment under mutual aid approaches to other local NHS organisations.
- 1.2 The Trust continues to respond to the COVID-19 pandemic maintaining the incident centre arrangements, 7 days a week oversight of the incident and fulfilling our duties in reporting to NHS England. The incident management team meetings have been increased as a result of the move to Level 4 incident and increase in COVID-19 pressures.
- 1.3 The Trust is maintaining services in line with the recent guidance and in conjunction with local health and social care partners.
- 1.4 Trust staff continue to undertake lateral flow tests and Personal Protective Equipment (PPE) continues to be available for all staff that need it and any support to partner organisations and families supporting children with complex needs, are given, as they are needed. There is also no change currently to the need for service users/visitors to wear face coverings
- 1.5 The use of facemasks in our premises for staff and patients continue as it is important that we continue to protect our patients, staff and their families by providing a safe working and clinical environment that minimizes the possibility of spreading of the virus.
- 1.6 Following the Prime Minister's challenge to offer the opportunity to everyone for a booster by end of last year, the Trust almost doubled the weekly capacity for vaccinations from just over 40,000 at the beginning of December 2021 to 78,000 at the beginning of 2022. These increases were achieved through increasing capacity in our current sites and through changing our model of delivery. The Trust redeployed staff internally, from the CCGs, through assistance from the military and increased recruitment. The Trust also introduced the Srafield Model which increased productivity by a third. This model allows one healthcare professional to oversee three vaccinators at each work station. The previous Srahan model allowed one healthcare professional to oversee two vaccinators at each work station.
- 1.7 The City Hall site in Norwich successfully opened on 10th January 2022 and replaces the Castle Quarter site.
- 1.8 In late November, we celebrated delivering our one millionth dose, including the launch of a short film with thank you messages for our staff from people who had been vaccinated at our centres. Celebrations also included thank you letters from the Chair/CEO; a recorded thank you message from our CEO, a press release and cake/balloons delivered to all sites.

2 BOARD ASSURANCE FRAMEWORK

2.1 The Trust's Board Assurance Framework (BAF) incorporates a live register of the principal risks faced by the Trust in meeting its strategic objectives. It provides the Trust with a clear and comprehensive method of:

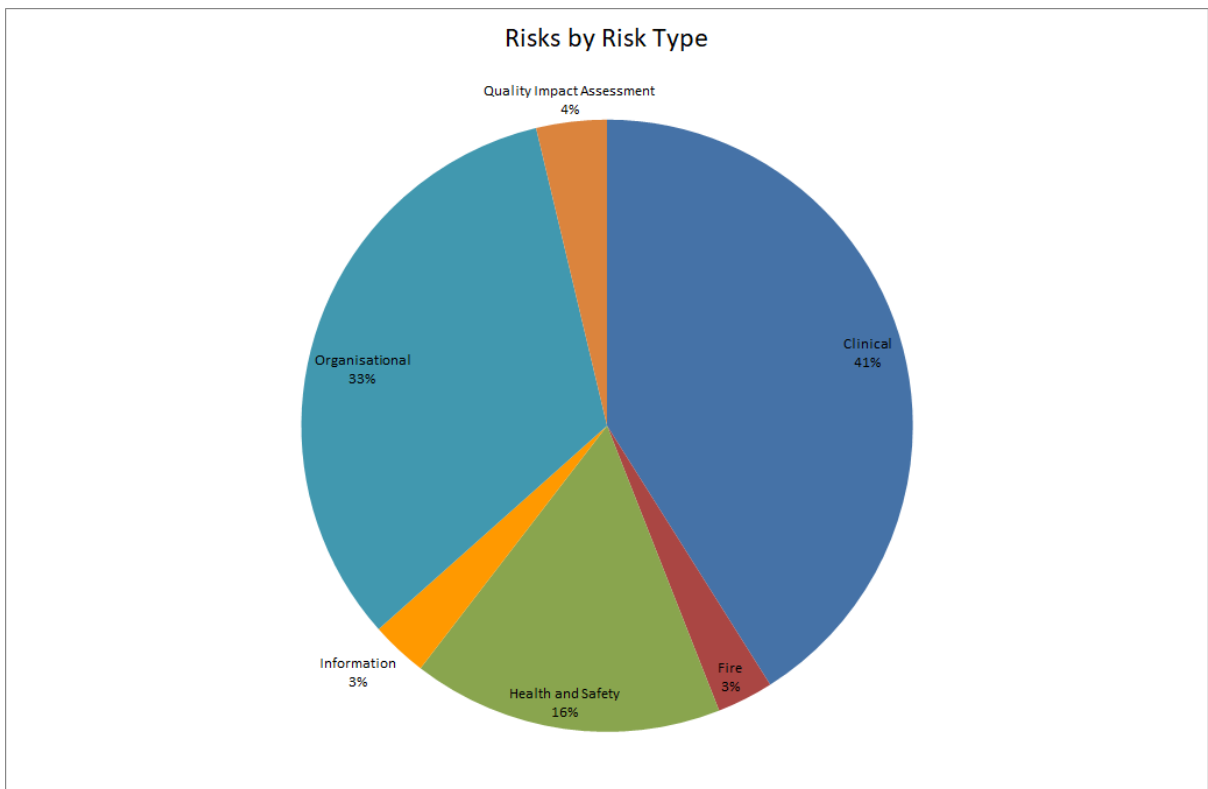
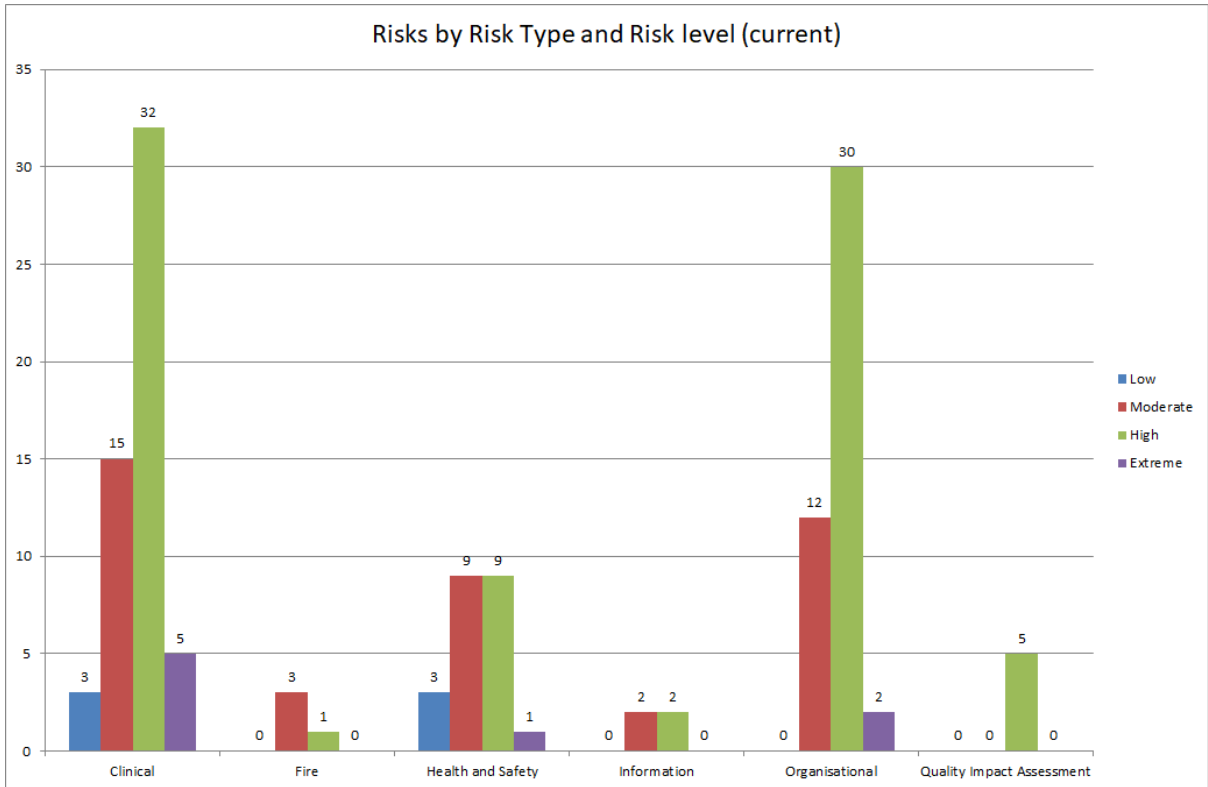
- ❖ describing the main risks to achieving the organisation's strategic objectives,
- ❖ describing the controls, assurance and oversight of these risks and
- ❖ identifying any gaps in controls and assurance

2.2 At 11th January 2022 there were 9 strategic risks on the Board Assurance Framework, 2 of which scores 20 (3163 and 3164) and the remaining 7 score 12 or below. Since previous reporting in November 2021, the following changes to the Trust Strategic risks were made:

- The following two new risks have been identified and each scored at 12:
 - Risk ID 3426 relating to a surge in service demands during winter period.
 - Risk ID 3436 relating to mandating Covid 19 staff vaccination.
- Risk scores for risks 3163 and 3164 increased from 16 to 20 due to ongoing workforce challenges.

Detailed information on strategic risks and operational risks scoring 15 and above is provided in Appendix 3 of the Integrated Governance Report (agenda item 4).

2.3 There are a total of 133 risks on the risk register, 31 of which score above 12. Of these 31 risks, five score above 15, four of which are related to the COVID-19 pandemic, one is non-Covid related and remaining one is related to Large Scale Vaccination Programme.



2.4 All operational risks scoring 12 and above are reviewed and discussed at sub-committees of the Trust Board and issues with the mitigation, controls and actions are escalated as appropriate to the Board. Sub-committees also undertake a bi-annual review of all risks assigned to the relevant sub-committee ensuring scrutiny of all risks on a regular basis.

- 2.5 All new risks are reviewed by senior leaders monthly at the Wider Executive Team together with high scoring and high impact risks. The monthly meetings also take a thematic review of all risks within a particular division. This has led to greater scrutiny of risks and greater consistency in articulation of risks throughout the Trust.
- 2.6 The assurance on how risks are identified, managed and impact mitigated is integral to the Trust Board's approach to performance through the Integrated Governance Report.
- 2.7 The risks relating to COVID-19 are reviewed weekly at the Incident Management Team meeting and at the Clinical Operational Boards that took place on 11th, 12th and 13th January 2022.
- 2.8 The Trust's Board Assurance framework is regularly reviewed and updated as a key part of the Well Led Improvement priorities.

3 INTEGRATED CARE SYSTEMS UPDATES

- 3.1 Work on integrated care systems have progressed during the last period, but have been de-prioritized by all partners due to the current COVID pressures.
- 3.2 Cambridgeshire and Peterborough ICS has held numerous joint events to plan how the future Integrated Care Partnership and the Councils Health and Well-being Boards will operate in tandem, or indeed jointly. Proposals will be available for all parties to consider and decide upon.
- 3.3 The provider collaborative in Bedfordshire and Luton continue with its joint service planning and the detailed successful joint work on hospital discharge pre and post new year, is a good example of the strong relationships in place that can rapidly change the way services are delivered
- 3.4 Detailed steps showing how the provider collaborative will work, firstly with the ICS when it is created in the summer and then secondly, in taking up a capitated budget in April 2023, will be available for partners to scrutinize in March.

4 COMMUNICATIONS UPDATE

- 4.1 Deliverables to support our large scale vaccination centres included the following.

Social media – our #CCSVaccs campaign

- During November, we celebrated delivering our one millionth dose, including the launch of a [short film](#) with thank you messages for our staff from people who had been vaccinated at our centres. The reach for this film across our social media channels was over 3600 people, with approx. 330 people sharing or commenting on the film. Celebrations also included thank you letters from the Chair/CEO; a recorded thank you message from our CEO, a press release and cake/balloons delivered to all sites.
- Case studies of volunteers who have gone on to secure paid roles within the NHS have been shared on our social media platforms (and with NHS England for promotional purposes), alongside recruitment publicity for volunteer and paid roles within our vacs centres

- Prime Minister Boris Johnson visited our Queensgate Vaccination Centre Peterborough recently to thank staff and volunteers for the fantastic work they are doing
- Most popular #CCSVaccs social media messages:
 - Twitter [highest reach post](#) was a message from a young person having their second dose and encouraging others to do so which reached 11,525 people
 - Twitter post with the highest number of engagements was a [recruitment message](#) for paid workers in our vaccination centres, which was shared/commented on/liked by 438 people
 - Facebook highest reach post was a [recruitment message](#) for paid workers, which reached 8390 people
 - Facebook post with the highest number of engagements was a [promotional graphic](#) of venues and opening times for vaccination centres which was shared/commented on/liked by 608 people

4.2 Media connected with vaccination programme:

- We continued to proactively engage with the media to promote key messages as the vaccination programme expanded through the various cohorts, as well as to promote recruitment of volunteers / paid workers.

During October – December 2021:

- Look East and ITV Anglia filmed at various sites on 14 separate occasions.
- Eight interviews were broadcast on local radio (BBC Radio Norfolk and BBC Radio Cambridgeshire).
- 18 media releases were issued by CCS
- The move of the Norwich Castle Quarter centre to City Hall Norwich was promoted via the media and social media platforms.

4.3 Staff campaigns connected with COVID:

Internal campaigns have focussed on:

- Service prioritisation/redeployment of staff to focus on booster vaccinations
- Reassurance and information about mandatory Covid-19 vaccinations for NHS staff
- Promoting opportunities for the Covid booster and 'flu vaccinations to protect staff and services during the winter period
- Maintaining infection prevention and control through social distancing, mask wearing, air flow, hand washing etc
- Continued use of lateral flow and PCR testing

4.4 Examples of other communications projects:

- Our Trust-wide project to improve our digital offer continues with a range of staff engagement sessions held and co-production sessions planned; the outcome of which will inform our future digital offer

- Two Shine a Light Awards have been presented recently: Sally Birch and Nicky Kimberley (Cambridgeshire School Nurses) won an Award for some fantastic work via ChatHealth to support a vulnerable young person; and Mohammad Bari, Bedfordshire Business Analyst won the award for the excellent support provided throughout the QI Project
- Digital resources across all services continued to be promoted via all social media channels to ensure service users knew how to continue to access our services (either by phone, video or face to face) and signposting to a wide range of digital support and information.
- Promotional materials were generated/disseminated via social media channels for:
 - the ongoing ICON – all babies cry campaign across the Trust’s localities
 - recruitment and opportunities across our services
 - keeping well over winter system-wide messages
 - promotion of positive feedback from service users

Risk ID	Current Risk Rating	Strategic Objective	Increasing Assurance																	Assurance Level			
			First Line of Assurance:							Second Line of Assurance:					Third Line of Assurance:								
			SMT Meetings	Clinical Audit	Compliance with policies, procedures and processes	Operational Plans	Management Reports	Working Groups for Implementation of change	Annual self assessments, Peer Reviews and Mock CQC Visits	Back to the Floors, patient and staff stories	Other Board Subcommittee	Board Reports, Review and Approval, and development sessions	Staff and Patients Surveys and Feedback	Internal Trust-wide Reports	NHS-led Review (e.g. CQC/NHS)	Audit Committee	National Staff Survey	Local Counter Fraud Service	Internal Audit	External Audit	External Reporting	Other Independent External Review/Interaction	
3300	8	SO1/SO3	✓		✓	✓	✓			✓		✓	✓	✓	-	-			-	-	✓	-	Reasonable
3163	20	SO1/SO2	✓	-	✓	✓	✓		×	-	✓	✓	✓	✓	-				-	-	✓	✓	Reasonable
3164	20	SO1/SO2 /SO3	✓	-	✓	✓	✓		×	-	✓	✓	✓	✓	-		✓		-	-	✓	✓	Reasonable
3165	8	SO1/SO3	✓	-	✓	✓	✓		×	-	✓	✓	✓	✓	-		✓		-	-	✓		Reasonable
3166	8	SO1/SO2	✓	-	✓	✓	✓		×	-	✓	✓	✓	✓	-		✓		-	-	✓	✓	Reasonable
3167	8	SO3/SO4	✓		✓	✓	✓		×		✓	✓		✓	-	-		✓	-	-	✓		Reasonable
3323	12	SO1/SO3	✓	-	✓		✓		×	-	✓	✓	✓		-	-			-	-		-	Reasonable
3436	12	SO1/SO2	✓		✓	✓	✓			-	✓	✓	✓		-	-			-	-		-	Reasonable
3426	12	SO1/SO2 /SO3/SO4	✓		✓	✓	✓			-	✓	✓	✓	✓	-				-	-	✓		Reasonable

Assurance Level Key:

Inadequate Assurance	
Partial Assurance	
Reasonable Assurance	
✓	
-	
×	