

DRAFT MINUTES

TRUST BOARD PUBLIC MEETING

Wednesday 22nd March 2023

13:00 – 16:35

Microsoft Teams

Members:

Mary Elford	Chair
Gary Tubb	Non-Executive Director
Dr Richard Iles	Non-Executive Director
Fazilet Hadi	Non-Executive Director
Anna Gill	Non-Executive Director
Catherine Dugmore	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 Corporate Affairs
Steve Bush	Director of Children and Young people's Services
Jots Sehmbi	Associate Non-Executive Director

In Attendance:

Lea Fountain	Associate Director of Communications
Mercy Kusotera	Trust Secretary and Freedom to Speak Up Guardian

Apologies:

Oliver Judges	Non-Executive Director
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Minutes:

1.0	Staff Story: Cultural Diversity Network Chair and the Network Secretary (Austin Chinakidzwa and Veronica Hilbert)
1.1	Anita Pisani introduced and shared with the Board a short video featuring the Cultural Diversity network Chair Austin Chinakidzwa, and the network Secretary Veronica (Ronnie) Hilbert. Both Austin and Ronnie were not able to attend the meeting due to competing priorities.
1.2	<p>The following key messages were noted from the video:</p> <ul style="list-style-type: none"> • The network was established in July 2020 to create a safe platform for staff to talk about issues around inequalities and fairness as well as share stories and their own personal experiences of working within the Trust. • The Trust was fully supportive of the network. Anita Pisani was the network ally and was supported by Angela Hartley; both regularly attended network meetings. • Finding the time to carry out the network role was one of the challenges faced by Austin and Ronnie. There was need for the Trust to consider how time constraints could be addressed. • The key aims of the network included: <ul style="list-style-type: none"> ○ Working with the Trust to promote equality of opportunity.

	<ul style="list-style-type: none"> ○ Providing a support function to colleagues through the development of virtual networks and meetings where issues could be openly discussed. ○ Celebrating the diversity of the Trust workforce by participating in national and local events such as community events and Black History Month (October). • Both Austin and Ronnie had enjoyed setting up and taking leading roles in the network. • The key roles and skills of the network Chair and Secretary included: <ul style="list-style-type: none"> ○ Organising network meetings and engaging with network members. ○ Understanding systemic issues and communicating them to the network. ○ Organisational and listening skills were important for the roles. • The network had progressed well over the past three years and continued to provide a safe space for staff to share their lived experience. • The network had influenced Trust policies and actions; examples included the work of the Cultural Ambassadors and ensuring recruitment panels were inclusive. • Career progression was one of the areas requiring improvement. The most recent staff survey results showed that a lower proportion of staff from ethnic minorities felt that there were less equal opportunities for career progression and promotion compared to white staff. • Both Austin and Ronnie thanked the Board for supporting the network and setting the tone for an anti-racist culture. The Board signed off the Trust anti-racism pledge in May 2022 and individual Board members made their pledges last year. • The Board was encouraged to reflect on the staff survey results and consider how the Trust could create pipelines that would promote an inclusive culture in terms of career, training, development and promotion.
1.3	<p>The following points were noted in discussion:</p> <ul style="list-style-type: none"> • The point relating to staff survey results and career progression would be picked up as part of the staff survey results discussion (item 9). • Both Austin and Ronnie had decided to step down in their formal network roles, but they would continue to be actively involved in the network going forward. • Ashley Sumbhoolaul, a physiotherapist in the Trust's Dynamic Health team had volunteered to be the network's new Chair. • To enable Ashley to undertake the network Chair role, conversations were held with Ashley's line-manager to ensure he had on average between a day and half a month dedicated to the role. The Trust would continue to provide central support for the network. • The Board would send a formal letter of thanks to both Austin and Ronnie. Action: on behalf of the Board, the Chair would send formal letters of thanks to Austin Chinakidzwa and Veronica Hilbert for their valuable contribution in setting up and leading the Cultural Diversity network. • The Board commended Anita Pisani and team for supporting the network. • The network created an opportunity for staff to open up, being brave and instilled confidence in sharing their stories and enabled staff to tackle some of the systemic issues referenced by Austin in the video. • 10th May 2023 was national staff network day. A video was being developed by the Communications team and would be launched on staff network day. • All the Trust networks had their own newsletters. Some Board members had shared what they were doing around their anti-racism pledges and had been included in the newsletters. Action: Board members were asked to share with the Communications Team how they were taking forward their anti-racism pledges. • The Cultural Diversity network and LGBTQIA+ networks continued to be well-engaged and attended; the Long-term conditions and disability network attendance

	<p>was low. The Trust held regular menopause cafes and health and wellbeing offers linked to disability.</p> <ul style="list-style-type: none"> • Managers were regularly reminded to allow staff to attend network meetings. • The Trust was exploring the possibility of setting up pregnancy, maternity, and careers' network. • The Cultural Diversity network had locality champions across Trust services. The champions met with Austin and Ronnie once a month. • Half day – one day protected time felt right for the role but would be kept under review. Action: Anita Pisani to pick up the point mentioned in the video about time for (i) staff to attend networks (ii) Network Chairs and Secretaries to undertake their network roles. • A discussion on whether ambition 6 relating to embracing diversity needed to be reviewed; it was clarified that the ambition covered all areas of discrimination and was broader than race. It was agreed to keep the wording as it was. • About two thirds of the Non-Executive Directors (NEDs) had diversity mentors. • It was anticipated that by the end of next month every NED would have a diversity mentor.
1.4	<p>The Board:</p> <ul style="list-style-type: none"> • thanked Austin and Ronnie for their leadership and commitment to the Cultural Diversity network. • commended Anita Pisani and the team for their ongoing support for staff networks.
2.0	Chair's welcome, apologies and additional declarations
2.1	The Chair welcomed all to the meeting.
1.2	There were no apologies for absence.
1.3	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 25 th January 2023 were approved as a correct record of the meeting.
3.2	The Board reviewed and noted updates to the action log.
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 a school in Cambridge following on from the Patient Story shared at the November 2022 Board meeting: <ul style="list-style-type: none"> ○ The patient (Olivia) had complex needs. The story looked at the impact of bringing more hospital appointments into special needs schools. ○ Delivery of many of the appointments in the school setting enabled more holistic care and better decision making. ○ The visit provided an opportunity to see how health and education were working together to support children with complex needs. However, there was still more to be done to ensure services delivered by multiple partners were better co-ordinated. ○ The head of the school felt that there was a mismatch between the level of funding for health in special schools and the rate of growth of those special schools. • Visit to one of the emotional and wellbeing teams in one of the primary schools in Cambridge. • Both school visits were positive. • There were plans to increase the number of NEDs visits during the year.
4.2	The following points were noted in discussion:

	<ul style="list-style-type: none"> Some of the Trust services for example mental health support teams were based in schools. Action: Steve Bush to reflect on whether more could be done to support children with specific needs in those schools who were not referred to the Trust. There were system conversations on special needs improvement plans. Different systems had different approaches. Integrated Care Boards had obligations to report into NHS England on children's services. There were issues for children with profound and multiple disabilities getting access to special care dentistry. The Trust was exploring whether there was anything more to be done to improve access for that group.
4.3	The Chair was asked by NHS Providers to provide evidence to the Senior Salary Review Board on behalf of NHS Trusts. The Chair thanked Anita Pisani for her support in preparing for the event
4.4	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"> Recommendations to the Board to: <ul style="list-style-type: none"> agree to the creation of the Children and Young People's System Collaborative (in Norfolk) and for the organisation to play its part as a full member. approve updated Board Terms of reference and cycle of business for 2023-24. delegate approval of the Annual Report to the Trust's Chair and Chief Executive in line with the timetable outlined in the report. consider if the Board assurance framework accurately describes the main risks facing the organisation. Strategic risks and the Board Assurance Framework (BAF) would be updated. New risks facing the organisation for financial year 2023/24 would be added to the risk register by the end of March 2023 and the Board would receive a refreshed BAF at the first public Board meeting of the financial year in May 2023. Communications update including social media campaign.
5.3	<p>In discussion, the following points were noted from the Chief Executive's report:</p> <ul style="list-style-type: none"> The Terms of Reference for the Digital Transformation Board were not included in the pack because the group was not a sub-committee to the Board; it reported to the Infrastructure Committee. It was important to ensure that the Infrastructure Committee Terms of Reference fully captured assurance for digital transformation. Action: Rachel Hawkins to confirm whether Digital Transformation Terms of Reference had been approved by the Infrastructure Committee and share with Gary Tubb. The Director of Children's Services for Norfolk and Waveney would be chairing the Children and Young People's System Collaborative in Norfolk. The ICB was a core member of the group and the relevant executive from the ICB would be the vice-chair to the group. There were a number of changes to the BAF. Ratings for five of the eleven strategic risks had improved. At the end of the Integrated Governance Report (IGR) Board discussion, the Board would confirm whether the Board Assurance Framework (BAF) was an accurate reflection of the strategic risks facing the Trust.
5.4	<p>The Board:</p> <ul style="list-style-type: none"> Noted the content of the report.

	<ul style="list-style-type: none"> • Agreed to the creation of the Children and Young People’s System Collaborative (in Norfolk) and for the organisation to play its part as a full member. • Delegated approval of the Annual Report to the Trust’s Chair and Chief Executive in line with the timetable outlined in section 3.3. • Approved both the Board Terms of Reference and Annual Business Cycle for 2023/24.
6.0	Integrated Governance Report (IGR)
6.1	<p>Kate Howard briefed the Board on the outstanding care section. The following key points were noted:</p> <ul style="list-style-type: none"> • Overall assurance ratings were: <ul style="list-style-type: none"> - Substantial for safe and effective - Reasonable for caring and responsive. <p>This was an improvement on the previous board paper which highlighted safe as being reasonable.</p> <ul style="list-style-type: none"> • No serious incident was reported or declared during the reporting period. • One serious incident was submitted for closure during the period. • There were currently no actions linked to serious incidents which were overdue. All the actions were on track. • Sixteen moderate harm incidents reported, which was an increase of five on the previous two-month period. Fifteen of these incidents related to pressure ulcers. There was a typo about the reference to Tissue Viability section; the section with the update should be 16 and not section 11. • Two national patient alerts were issued; both were not directly applicable to the Trust but were shared with relevant services for information. • Introduction of statistical process control (SPC) charts to report medicines incidents. • Quality improvement work around safeguarding continued. Key areas of focus included: <ul style="list-style-type: none"> ○ audit and training for Mental Capacity Act (MCA) assessment to support readiness for implementation of the Liberty Protection Safeguards (LPS) in 2024. ○ Section 42 (Care Act 2014) processes, especially in the Luton area. ○ staffing proposal for Bedfordshire and Luton Multi-Agency Safeguarding Hub (MASH). • Patient Experience Team continued to explore ways to support services to improve feedback. This included producing Quick Response (QR) codes for staff to share with service users during visits. • Improvement on complaints response times from the last report. The report included a list of reasons why complaints might not be completed within the timeline. • Waiting times were fully discussed during Clinical Operational Boards (COBs). Some of the key highlights included in the report were: <ul style="list-style-type: none"> ○ An improvement to the current Long-Acting Reversible Contraception (LARC) waiting list. ○ Parts of the action plan which Dynamic Health had agreed with commissioners in terms of their waiting lists. ○ Information about non-recurrent funds being utilised in Bedfordshire and Luton Community paediatrics. • Agreed changes to mandatory training; this was in line with new national requirements. New training relating to Learning Disability and Autism (Oliver McGowan) was added to the matrix. The Trust would roll out the Patient Safety Framework mandatory training. The changes would commence on 1st April 2023. • All clinical services had completed their CQC self-assessments in January 2023. The outcome was shared with the COBs. A paper would also be presented to the Quality Improvement and Safety Committee (QISCOM) on 30th March 2023 for noting.

	<ul style="list-style-type: none"> The CQC statement of purpose was updated following changes to the Large-Scale Vaccination arrangements. The Board was asked to approve the updated statement.
6.2	<p>In discussion, the following points were noted:</p> <ul style="list-style-type: none"> The new mandatory training requirements for Board members were: <ul style="list-style-type: none"> Tier 1 Oliver McGowan Level 1 Patient safety <p>The training would be accessed via the Electronic Staff Record (ESR) from 1st April 2023.</p> Discussion within adult social care about cost-of-living pressures and the impact this might have on delivery of care. The Board was informed that the issue had not been identified in any of the Trust incident reporting yet. Importance of proactive work to gather feedback. from service users. The Patient Experience team continued to explore initiatives to improve levels of feedback. Recap on a joint complaint discussed during Adults COB; the Trust staff had handled the complaint well, but due to the nature of the complaint, the patient needed to complain to multiple agencies which was challenging and difficult. This was not what the patient wanted; the patient wanted to complain to one place. The Board was informed that if a complaint affected more than one organisation, a joint response would be provided. The process was outlined in the Trust Policy but would be strengthened when reviewing the policy. Action: Kate Howard to ensure the process for handling joint complaints was strengthened in the new Complaints Policy. Discussion on whether Integrated Care Boards (ICBs) could use the complaints pathway to drive system improvement. The following comments were noted: <ul style="list-style-type: none"> Ongoing work in Cambridgeshire and Peterborough on whether complaints response and matrix could be looked at in a different way to provide thematic response across the system. Conversations in Bedfordshire, Luton and Milton Keynes (BLMK) about sharing patient stories as part of service redesign and service improvement transformation. The stories could have arisen through a complaint. The system was also exploring how to link up with co-production leads across the ICB. ICBs were grappling with how they could get the data into a format where it was thematic and not identifiable to individual patients. In Cambridgeshire and Peterborough various providers of emotional well-being and mental health services were working together on how to improve data gathering. Non-recurrent funding enabled the team to reduce the risk relating to assessment and treatment delays in Bedfordshire Community Paediatric services. However, it would take a long time to mitigate the risk.
6.3	<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 ratings were reasonable for safe and effective domains and substantial for well led. The report had been updated to include staff survey results for 2022. Updated 2022-23 measures for achieving 'Be an excellent employer' objective to reflect the following: <ul style="list-style-type: none"> The Trust had maintained and improved measures for 3a - 'staff recommend the Trust as a good place to work' and 3b – 'achieve a good staff engagement'. The measure for diversity metrics relating to 'increase the percentage of staff with long -lasting health conditions or illness saying that the Trust has made adjustments to enable them to carry out their work' was met. <p>Achieving these measures provided assurance and evidence to the Board that</p>

	<p>focusing on a few metrics for improvement was important.</p> <ul style="list-style-type: none"> • Two areas in the metrics requiring improvement were: <ul style="list-style-type: none"> ○ Staff having an appraisal in the last 12 months; the target was 94% and above. ○ Monthly sickness absence was below 4.5% – the figures had come down slightly but still required improvement. The area remained a focus for health and well-being leads and HR business Partners. Fortnightly HR Business partners were checking in with line managers on people who were absent due to sickness to find out what more could be done to enable people to get back to work. • Risk scores for 3163 relating to staff morale and 3164 relating to workforce challenges had been recently reduced from 16 to 12. In the report, both risks were still scoring 16 because that was the position during the reporting period (December 2022 and January 2023). Following COBs discussion, the scores for both risks were reduced due to the following: <ul style="list-style-type: none"> ○ The operational risk driving the workforce challenges relating to Luton Adults services (risk 3337) previously scoring 20 had been reduced to 12. This was due to success in international recruitment. Ten international nurses now had their registration with Nursing and Midwifery Council (NMC). Another five or six international nurses were expected to join the Trust by end of March 2023. ○ All services reported their CQC self-assessments to the COBs; the majority of the indicators were either good or outstanding. The assessment showed that workforce challenges were not impacting on the Trust’s ability to provide high quality care. ○ Positive staff survey results – the item to be covered in detail (item 9). • The Board were reminded that the Trust had agreed to support the Queens’ Nurses to establish a network. The first inaugural Queens’ Nurses Network meeting was held on 27th February 2023. Kate Howard and Anita Pisani attended the event. Some of the actions the network agreed were included in the report for information. • Update on agency and bank spend. The Large-Scale Vaccination (LSV) services would be closing at the end of March 2023. It was anticipated that there would be a decline in both agency and bank reporting from April 2023.
6.4	<p>In discussion, the following points were noted:</p> <ul style="list-style-type: none"> • Sickness benchmarking data included in the report related to the autumn (September); when benchmarked against other community Trusts’ sickness rates, the Trust was normally on par. • Not all staff were on e-rostering, therefore other types of leave (for example bereavement) were currently not fully captured. This could be inflating the Trust’s sickness rate. It was anticipated that the roll-out of Allocate and e-rostering would help to distinguish sickness from other types of leave. • There could be potential impact on sickness rates due to the LSV staff leaving the Trust. However, the majority of the LSV staff were bank and were not included in the sickness rates. Only a small number of the staff had fixed term contracts. • Sickness rates had been high in Luton Adults services due to high vacancy rates, however with improved capacity in the service, the rates were slightly reducing. The rates in Children’s services had also been going up and down.
6.5	<p>Anita Pisani briefed the Board on ‘collaborate with others’ section. The following key points were noted:</p> <ul style="list-style-type: none"> • Substantial assurance for both well led and effective domains. • Earlier update in relation to Trust collaboration in Norfolk system. • Update on work relating to the Princess of Wales Hospital (POW) development plan. • Update on areas of focus for Children’s and Young People’s and Maternity

	<p>Collaborative.</p> <ul style="list-style-type: none"> Confirmed the workplan and areas of focus for Bedfordshire Care Alliance. Research section had been revised. The Trust was currently developing an Equality and Diversity template, which would be rolled out across the Trust, in collaboration with the Trust Equality Diversity and Inclusion Lead. The finance team continued to work closely with the teams and services to ensure all invoices were processed promptly.
6.6	<p>In discussion, it was noted that:</p> <ul style="list-style-type: none"> The Trust had held a valuable partnership day with colleagues from East London Foundation Trust (ELFT) at the beginning of March 2023. Kate Howard and Dr David Vickers attended the event. Key areas of focus included building one urgent community response team and joint work on virtual wards to support pathways across Bedfordshire hospitals. Positive conversation around physical and mental health children's services and how to get the connections better and embed them. Agreement to meet twice a year as a whole partnership to sustain the connections. There were digital solutions that were planned to come in at ICB level; Trusts would be encouraged to take part in these. The Trust's new Three- Year Strategy (2023-26) was predicated on what our ICS expected the Trust to achieve. Importance of tying together digital and transformation work. Amy Edwards and Mark Crannage worked closely with colleagues in the systems. Mark Crannage, the Trust Associate Director of Business Information and Digital Systems was the Chief Information Officer for Cambridgeshire and Peterborough ICB. The Executive Team would review the BAF to ensure it was aligned to the new Trust Strategy capturing the top strategic risks faced by the Trust. The revised BAF would be discussed at the Board Development session on 19th April 2023. Action: Rachel Hawkins to schedule Board Assurance Framework for April Board Development session. The Transformation Board would ensure that digital was an enabler for transformation. To clarify the wording relating to Just One Number service (Norfolk Integrated Care System); the long-term vision was to improve access to mental health and well-being support as opposed to improve access to CAMHS. Action: to revise the wording.
6.7	<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'. An overview of month 10 position and a forward view for the financial end of year. Two risks 3167 scoring 8 and 3488 scoring 12 linked to 'sustainable organisation' would be closed at the end of March 2023. New risks relating to 2023/24 linked to the operating budget would be identified. Month 10 performance was on target. Cumulative underspend for Ambulatory had reduced; this was due to financial challenges within iCaSH which were reported and discussed in detail at the Adults COB. The challenges were also broadly discussed with the commissioners across the various localities. LSV service costs up to month 10 were £11.2m and this was fully funded with all expenditure offset by additional income received from NHSE. List of debtors (section 3.3), the majority had been cleared. Cost efficiency plans were on target. Recurrent schemes had been delivered and would be developed for further delivery during 2023-24.

	<ul style="list-style-type: none"> The forward forecast to the end of 2022-23 financial year; no indication that the Trust would not meet its financial plan for the end of the year to deliver a balanced financial position. It was explained that overspend on agency related to LSV costs. The trajectory was to move below the target for next year.
6.8	<p>The Board thanked the authors of the IGR and:</p> <ul style="list-style-type: none"> Confirmed that the information contained in the Report supported the summary and the overall assurance rating of REASONABLE assurance. Approved the updated CQC Statement of Purpose
6.8	<p>The Board reflected on the IGR and:</p> <ul style="list-style-type: none"> Confirmed that the Board Assurance Framework (BAF) was an accurate reflection of the strategic risks facing the Trust.
7.	2023/24 Draft Revenue Budget
7.1	<p>The following points were noted:</p> <ul style="list-style-type: none"> The purpose of the report was to provide the Board with a final revenue budget and overall efficiency target for 2023-24. The budget was informed by an agreed approach to the allocations of resources in the Cambridge and Peterborough (C&P) system and agreement of contract values with out of system commissioners. This plan would be aggregated further for a wider C&P system consolidated plan to be submitted at the end of March 2023. The planning assumptions were issued by NHSE and had been established prior to recent conversations and proposals for a revised pay award. The pay assumption within the plan was: <ul style="list-style-type: none"> Pay uplift of 2.1% Non-pay uplift of 5.5%. These initial planning assumption were set during early part of 2022 before the cost price inflation pressures had begun to materialise. Initially the Trust planning assumption was a deficit plan because the local authority uplift grants were not known. The plan had now moved to a balanced position making the assumption of 3% local authority uplift received for 2023-24 allocations. A summary of the total net cost base for 2023-24 (section 3) across a total revenue income budget was just below £160 million. Efficiency target for 2023-24 was £5 million or 3.2% of total spend expenditure. Performance against the efficiency target would be reported by services at the COBs and Trust wide within the IGR. The schemes would go through the Trust established approval process and would be signed off by Dr David Vickers, Kate Howard and Mark Robbins. Main risks to delivering the plan were: <ul style="list-style-type: none"> Agreeing with Local Authority Commissioners an appropriate inflationary and service pressure funding uplift to service contracts to fund the Agenda for Change pay awards and increasing demands on service activity. Delivery of efficiency plans and receiving additional funding for services that have acknowledged cost and capacity pressures. Unknown future inflationary and supply issues. A recommendation to the Board to approve the draft plan and to delegate the final approval to the Executive Team. The outcome of the discussions about funding in Bedfordshire and Luton would be fed into the final plan.
7.2	<p>The following points were noted in discussion:</p> <ul style="list-style-type: none"> The budget was based on full establishment. Sickness improvement could be used as part of productivity gain and would address the ability to deal with extra growth coming from the service.

	<ul style="list-style-type: none"> Public Health funding had not been confirmed yet.
7.3	<p>The Board:</p> <ul style="list-style-type: none"> Approved the Revenue budget plan for 2023-24 Noted the target and the required cost improvement, Delegated approval for changes to the final budget to the Trust Executive Directors
8.	Strategy Implementation Progress Report to March 2023
8.1	The Board noted the Strategy Implementation Progress report to March 2023.
9.	Outcomes of National Staff Survey 2022 and Next Steps
9.1	<p>The following key points were noted:</p> <ul style="list-style-type: none"> The staff survey was aligned to 7 aspects of the NHS People Promise as well as staff engagement and morale. The Trust achieved a 47% response rate; 1320 staff completed the survey. The Trust was the best community Trust nationally in five areas: <ul style="list-style-type: none"> We are compassionate and inclusive. We each have a voice that counts. We are safe and healthy. We are always learning. We work flexibly. In the other 4 themes the Trust was 0.1 mark below the top scoring community Trust. In all 9 themes the Trust was either the best or joint best performing NHS Trust in East of England. When compared to 2021 results, the Trust had improved in 8 of the 9 areas. One area, 'We are recognised and rewarded' had slightly gone down. Considering the national challenges within the NHS, the reduction was not surprising. A breakdown of the nine areas of the People Promise was included in the pack for information. The Trust was average in two areas: <ul style="list-style-type: none"> Motivation involvement The Trust had improved in three of the four indicators relating to Workforce Equality Standards (WRES). There were three areas where responses indicated that the Trust could improve: <ul style="list-style-type: none"> Percentage of staff reporting they have experienced discrimination due to their sexual orientation or disability has increased in the past 12 months. Percentage of our people from minority ethnic groups who believe we provide equal opportunities for career progression or promotion has decreased over the past 12 months. Percentage of staff experiencing physical violence at work from patients/service users, their relatives or other members of the public has slightly increased, and people experiencing this were less likely to report it. <p>Action: Anita Pisani to engage with the Cultural Diversity Network, Long Term Conditions and Disability, and LGBTQIA+ Pride Networks and all services to discuss staff survey results and identify actions to be taken to ensure improvements</p> Detailed discussions relating to Roger Klein work were held at the People Participation Committee, this included actions relating to 'No more tick boxes.'
9.2	<p>The following points were noted in discussion:</p> <ul style="list-style-type: none"> The Board acknowledged the amount of work relating to staff engagement (especially around valuing staff) that was going on across the Trust. It would be helpful to consider bringing out the impact that staff engagement had on improvement of services, colleagues or service users experience. Action: Lea Fountain to consider how the impact that staff engagement had on services,

	<p>colleagues and service users could be communicated to staff.</p> <ul style="list-style-type: none"> It was clarified that the Trust used BAME terminology when talking about Workforce Race Equality Standards (WRES) because BAME was the national terminology. The Cultural Diversity network include all people from ethnic minority groups. The Board was pleased with the Staff Survey Results and congratulated the Trust leadership for the results. Action: Anita Pisani to feedback to Austin Chinakidzwa and the Cultural Diversity Network that the Board fully supported the need to ensure concerns raised in the staff survey relating to equal opportunities for career progression career were addressed. Staff survey results were shared with directorates, and they would be holding services and teams' conversations.
9.3	<p>The Board noted the following:</p> <ul style="list-style-type: none"> The Trust would develop, in partnership with people, staff networks and local staff side representatives, a focused plan, both Trust-wide and locally. Service specific improvement plan would be reported and reviewed at Clinical Operational Boards Trust wide updates would be directly to the Board via bi-annual people strategy update in May and November.
10.	Diversity and Inclusion Annual Report and 2023-24 Equality Delivery System (EDS) Objectives
10.1	<p>The following points were noted:</p> <ul style="list-style-type: none"> The report was discussed in detail at the People Participation Committee held on 28th February 2023. The Board previously received EDS annual report in July but had requested that the report should be presented in March to align approval of Equality Objectives to approval of Trust Strategic Objectives. Commended Carol McIndoe, Angela Hartley, Sam Carr, Heather Bennett and Mercy Kusotera for pulling the report together in a timely manner. EDS reporting had changed following a national review of the EDS2. The new reporting – EDS 2022 included three domains: <ul style="list-style-type: none"> Domain 1: Commissioned or provided services. Domain 2: Workforce health and well-being. Domain 3: Inclusive leadership. The Gender Pay Gap report had not been presented to the PPC.
10.2	<p>The Board:</p> <ul style="list-style-type: none"> Noted the Trust's performance against the Equality, Diversity and Inclusion Outcomes for 2022/23. Approved proposed local Equality Delivery System Objectives for 2023/23. Noted actions towards meeting our WDES/WRES and to receive our Gender Pay Gap Report 2020-2021 with our actions for 2022/23.
11.	Committee Escalation Reports
11.1	<p>The Trust Board noted the report from:</p> <p>Audit Committee held on 16th January 2023</p> <p>The following key points were noted from the report update:</p> <ul style="list-style-type: none"> Resignation letter from BDO together with the Trust's response to that letter for noting by the Committee. Ratification of decision to appoint new auditors (Bishop Fleming) that was taken by the Committee through email. The Audit Committee Chair updated the Board on Bishop Fleming's interim work including: <ul style="list-style-type: none"> Transition workshops with the finance team. Onsite meeting with the finance team and senior leadership.

	<ul style="list-style-type: none"> ○ Planning interim work; this would be shared at the Extraordinary Audit Committee meeting scheduled for 28th March 2023. Action: The Audit Committee to receive and discuss the new External Auditor’s plan for year ending 31st March 2023 at the Extraordinary Audit Committee meeting scheduled for 28th March 2023. • There were no issues to escalate to the Board. <p>People Participation Committee held on 28th February 2023</p> <p>The following key headlines were noted:</p> <ul style="list-style-type: none"> • Substantial assurance could be taken from the information presented to the Committee. • Two patient involvement partners had joined the Committee meeting. • Detailed discussion on EDS report and the three domains. • Update on priorities for the People Participation Plan. <p>CCS and CPFT Joint Children’s Partnership Board held on 17th January 2023</p> <p>The following key points were noted from the report update:</p> <ul style="list-style-type: none"> • Conversation regarding mandated reviews and activity to address performance. It was clarified that a Trustwide approach which included clinical colleagues to review mandated contacts was being undertaken. • It was clarified that issues relating to racial discrimination raised by two students were not linked to the two Trusts. • Two main emerging risks related to: <ul style="list-style-type: none"> ○ Staffing challenges and vacant posts ○ Uncertainty about the future of the contract going forward. • The Board was assured that the Trust was undertaking dedicated work to mitigate the risk relating to staffing challenges. <p>Infrastructure Committee held on 6th February 2023</p> <p>The following key headlines were noted:</p> <ul style="list-style-type: none"> • Reasonable assurance was taken from the core reports presented to the Committee. • A cyber incident had occurred in November which was linked to NHSMail. Appropriate mitigations had been put in place to reduce any future risks. • A new cyber risk (Risk ID:3514) had been added to the Datix risk register following February Board Development session discussion. • Progress against the Green Plan. • Comprehensive update outlining the latest position with the Princess of Wales (PoW) business case in the context of the CDC (Community Diagnostics Centre project). <p>Charitable Funds Committee held on</p> <p>The following key headlines were noted:</p> <ul style="list-style-type: none"> • Discussion on how to use Charitable Funds. The Trust continued to support staff development and wellbeing in a range of areas including supporting staff with social and celebration events across services funded by charitable funds, including retirements and team building activities. • Positive staff story shared at the Adults COB; two member of staff shared the work they had been involved in Luton Adults. They had utilised Charitable Funds to carry do the work. • A discussion was held at the Wider Executive Team to raise the profile for using Charitable Funds.
11.2	The Board noted the escalation points from Committees.
12.0	Any other Business

12.1	There was no further business discussed.
13.0	Questions from members of the public
13.1	There were no questions received from members of the public.

Date of next Public Trust Board Meeting: 17th May 2023
Venue: Microsoft Teams