

MINUTES

TRUST BOARD PUBLIC MEETING

Wednesday 24th November 2021

12.15 – 15.25

Microsoft Teams

Members:

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

In Attendance:

Karen Mason	Head of Communications
Mercy Kusotera	Assistant Director of Corporate Governance
Angela Hartley	Deputy Director of Workforce
Lisa Wright	Patient Experience Manager (<i>Item 1</i>)
Susie Robertson	Cambridgeshire Speech and Language Therapist (<i>item 1</i>)
Laura Park	Head of Children's Commissioning, Central Bedfordshire Children's Services (<i>shadowing Anita Pisani</i>)

Apologies:

Oliver Judges	Non-Executive Director
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Minutes:

1.	Patient Story - "Our battle to get help and support for Oscar" Bedfordshire and Luton Children's Services.
1.1	Lisa Wright, Susie Robertson and Zac joined the meeting.
1.2	The following points were noted: <ul style="list-style-type: none"> • Zac aged 11 had a stammer which made it difficult for him, for example to order food in restaurants or to put up a hand in class. • Zac's class teacher referred him to the Trust Speech and Language therapists for support. He was now able to talk in assemblies. • Susie Robertson, Speech and Language Therapist offered Zac therapy based virtual sessions to support his communication. • The sessions built up Zac's confidence and was now able to talk in assemblies and was elected a House Captain. • Zac thanked Susie Robertson for the support.
1.3	In discussion the Board noted the following points: <ul style="list-style-type: none"> • There was no delay between referral time by class teacher to getting support from the therapists.

	<ul style="list-style-type: none"> As a result of Susie Robertson's support, Zac's expectations were exceeded, his confidence grew above what he expected. Zac was given the opportunity to role model other people who could be in a similar situation. The story illustrated the significant impact that speech therapy could have.
1.4	The Board thanked Zac for sharing such an inspirational story. A recording of the story and Board discussion would be shared with Zac's parents. Action: Mercy Kusotera to send the recording of the story to Zac's parents.
2.0	Chair's welcome, apologies and additional declarations
2.1	Laura Park, a fellow on Leading Beyond Boundaries systems leadership programme in BLMK was shadowing Anita Pisani.
2.2	There were no new confirmed declaration of interests since the previous Board meeting held on 15 th September 2021.
3.0	Minutes of previous meeting and matters arising
3.1	The minutes of the meeting held on 15 th September 2021 were approved as a correct record of the meeting.
3.2	The Board noted updates on the actions from previous Board meetings. The following updates were noted: <ul style="list-style-type: none"> Following the Patient Story shared during the Public Board meeting on 15th September 2021, Anna Gill had a conversation with Lisa Wright and the patient's mother. Due to the pandemic; many of the services within the wider system which would have been available to the patient could not be accessed.
4.0	Chief Executive Report
4.1	Matthew Winn briefed the Board on progress and key issues, events and activities since the last Board meeting.
4.2	The following key headlines were noted: <ul style="list-style-type: none"> The Board Assurance Framework was an accurate reflection of the strategic risks currently facing the Trust and how the Trust managed the risks. The risks were reviewed and discussed in detail during Clinical Operation Boards (COBs) and were included in the Integrated Governance Report. The Trust had two strategic risks scored 16 related to workforce challenges and staff morale (risks 3163 and 3164). New NHS System Oversight Framework (SOF) 2021/22 introduced a new approach to provide assistance to organisations. NHS England and NHS Improvement regional group agreed that the Trust should be placed in SOF segment 1. FTSU six monthly update of the Trust's speaking up issues raised during April – September 2021 and key headlines from the national FTSU annual report for 2020/21. Communications update including: <ul style="list-style-type: none"> Deliverables to support large scale vaccination; on 23rd November 2021, celebrated delivering over 1 million Covid 19 vaccination doses across Cambridgeshire, Peterborough, Norfolk and Waveney A number of Trust nurses had been awarded Queens' Nursing badge. It was agreed to invite one of the nurses to a future Board meeting to share how the award supported their practice.
4.3	In discussion the following points were noted from the Chief Executive report: <ul style="list-style-type: none"> Some FTSU concerns were raised informally for example during question and answer sessions or via FTSU Guardian / Champions. This demonstrated that staff felt confident to speak up using various channels.

	<ul style="list-style-type: none"> • Covid 19 issues including lateral flow tests to be discussed as part of the Integrated Governance Report (item 5). • NHS staff vaccination mandating by April 2022 – to be discussed as part of the workforce discussion. • The Board would reflect on the assessment of the two highest scoring risks at the end of the discussion on the Integrated Governance Report. discussion. Action: to assess at the end of the IGR conversation whether the two highest scoring risks were accurately scored and whether there were controls and mitigation in place to effectively manage the risks.
4.5	The Board received, discussed and noted the Chief Executive’s report.
5.0	Integrated Governance Report (IGR)
5.1	<p>The IGR for the reporting period August and September 2021 had been revised to incorporate comments from the previous Board discussion in relation to Clinical Operational Boards (COBs) escalation and improve the assurance process. The following changes were noted:</p> <ul style="list-style-type: none"> • Exceptions were reported against each of the four strategic objectives within the body of the report. • Assessment of assurance was summarised as part of the Executive summary. • A summary of assessment of key matters, risks and areas of outstanding practice from each COB.
5.2	<p>The key highlights from providing outstanding care section included the following:</p> <ul style="list-style-type: none"> • Overall assurance rating remained the same as in previous reporting. • Mass vaccination sites continued to offer Covid 19 vaccines and boosters to relevant cohorts. • The Trust was compliant with the national mandate that requires (from the 11th of November 2021) all staff visiting CQC registered care homes to have received both 1st and 2nd vaccine doses. • The Patient Safety team had reviewed the process for reviewing serious incidents and investigations to strengthen the governance around the process. • Non-medical prescribing three yearly training was rolled out. • Safeguarding remained challenging both locally and nationally. Partnership work continued. • Multi-Agency Safeguarding Hub (MASH) activity continued to be variable; volume of referrals to MASH indicated a slight increase on pre-pandemic levels. • An internal review of all actions from Serious Incidents, safeguarding reviews and domestic homicide reviews had been completed. • Safeguarding Team were reviewing information relating to the newly published Liberty Protection Safeguarding process which would be due for implementation in April 2022. • The Trust reported one outbreak at the end of September in the Adult Rapid Response team in Luton. The incident was reported via the national system and has subsequently been closed. Lessons learnt were disseminated. • New Infection Prevention and Control (IPAC) guidance would be reviewed. • Flu vaccination continued; the six-week plan was now extended for a further two weeks. Drop-in clinics were being undertaken. Quality team developed a QR code for staff who received the vaccination from GPs or other forums. Uptake rate was lower when compared to same period last year but comparable to other Trusts across the patch. • There was an increase in reported workload for complaints; a skill mix

	<p>evaluation was currently underway.</p> <ul style="list-style-type: none"> • Dental backlog of patients waiting for treatment under general anaesthetics in Cambridgeshire was cleared. • There were pressures in Bedfordshire and Luton Community Paediatrics Services. Mitigation was in place. • Areas of outstanding practice were outlined in the report for noting.
5.3	<p>In discussion the following points were noted:</p> <ul style="list-style-type: none"> • The Board welcomed the revised format of the IGR; it provided clarity and insight on how issues discussed during COBs were fed into the Board. • Assurance on key risks were clearly articulated. • Active participation in the Long Covid Pathway; system video for Long Covid patients was now finalised. • COBS received assurance on the number of patients/service users who gave feedback on the care they received (metric 1b). Action: to explore other metrics to complement the core metric. • Lateral flow reminders continued to be sent to staff via emails and texts. • Quality of referrals into and from Trust services was important; some referrals were rejected due to insufficient information. The Trust was working with partners on what makes a good referral. • The Trust continued to work with partners to strengthen safeguarding and escalation processes. In Luton, thresholds for safeguarding were co-produced; practitioners were aware of the thresholds. There was a safeguarding hub focusing on three key safeguarding areas: domestic violence, drug and alcohol and mental health issues.
5.4	<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"> • Reasonable assurance for safe and effective; substantial assurance for well led domains as previously reported. • Detailed information on workforce pressures and challenges were covered in the bi-annual workforce review which would be discussed later on the agenda (item 10) • Continued focus on staff health and well-being; staff were encouraged to take their annual leave and to be kind to each other. • The Trust continued to explore ways of supporting staff; scheduled December Leadership forum discussion on what more could be done to support staff. • Some roles were challenging to recruit into both locally and national, for example, Healthy Child Programme; a proactive plan was in place. • Challenges and issues for workforce were discussed weekly during Incident Management Team (IMT) meeting. Service Directors had regular sitrep calls. • Staff survey rate was currently slightly lower than last year's (58%) currently 53%. Generally, the response rates across other Trusts were lower this year. Feedback expected in February/March 2022. • An increase on agency and bank; this was due to mass vaccination delivery. The agency ceiling had not been adjusted for the expected mass vaccination service spend.
5.5	<p>In discussion the following points were noted:</p> <ul style="list-style-type: none"> • There was continued focus on IT and telephony across services. The Trust had a stable platform for telephony provided by BT. • IT had improved; roll-out commenced in October 2021 and most staff now had new IT kits. However, there were some pockets of IT operational difficulties to be addressed; this was due to national supply chain pressures;

	<p>the Trust was keeping up with the demand.</p> <ul style="list-style-type: none"> The Trust had two innovation ambassadors; they were holding conversations with clinicians on how IT could be more useful for clinicians.
5.6	<p>Anita Pisani briefed the Board on 'collaborate with others' section.</p> <p>The report outlined a list of collaboration activities to ensure the Board was sighted of the Trust's involvement at system level. The following points were noted:</p> <ul style="list-style-type: none"> The section was now in line with the revised Trust measures as discussed during previous meetings. Substantial assurance for well-led levels and restricted (due to the pandemic) for effective. The Princess of Wales Hospital (POW) site development plan milestones were achieved. Update on the Trust contribution to Cambridgeshire and Peterborough NHS Foundation Trust (CPFT), East London NHS Foundation Trust (ELFT) and across the provider landscape in Luton. The Trust fully participated in ICS activities within the system (BLMK and Cambridgeshire and Peterborough) and had good working relationship with local authorities. Detailed research activities in August and September 2021. The 'Most Capable Provider' framework would be used to assess whether the preferred lead provider in the ICS had the capability to undertake the Lead Provider work. The Trust was leading Children and Maternity collaborative and would pay close attention to the implications of the process especially in terms of governance, organisational development and risk.
5.7	<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"> Levels of assurance remained unchanged for the reporting period. External Auditor's opinion and its Value for money conclusion and funding arrangements continued to provide assurance of the Trust's sustainability. Month six, the Trust delivered the required balance position. Trade receivables had increased, and trade payables had decreased over the reporting period to impact on the cash position. The Trust had received £9m in November 2021 in relation to the large-scale vaccination service for the period up to September 2021. No material changes to the financial position.
5.8	<p>In discussion the following points were noted:</p> <ul style="list-style-type: none"> Carbon footprint and sustainability were covered in the Green Plan. The plan needed to be finalised by end of the financial year 2021/22. <p>Action: Mark Robbins to bring the Green Plan to December Board Development session for discussion.</p> <ul style="list-style-type: none"> The national planning guide for next year was due in December 2021. <p>Action: Rachel Hawkins to bring an update to the Board on the Princess of Wales (POW) development.</p>
5.9	<p>The Board welcomed the revised Integrated Governance Report and thanked the Executive Team for pulling together such a comprehensive Report.</p>
5.10	<p>Regarding the high risks (3163 and 3164), the Board were satisfied with the risk scoring and were assured that there was mitigation in place to address the risks.</p>
5.10	<p>The Board approved the CQC Statement of Purpose which had been updated to include changes in large scale vaccination sites.</p>
6.	Committee Escalation Reports
6.1	<p>Audit Committee</p> <p>The following key points were noted from the report:</p>

	<ul style="list-style-type: none"> External Audit confirmed that the Trust 2020/21 reports and accounts had been signed and published with no qualifications or concerns recorded. Internal audit reported that they were content with the Trust's internal controls. All audit recommendations for 2020/21 were implemented within agreed timescales. The Committee noted reasonable assurance from internal audit in relation to the Trust Key Financial Controls. Local Counter Fraud Services would conduct an email phishing awareness exercise with Trust staff. Alerts and other national fraud issues would continue to be shared with the Comms team to share with staff.
6.2	<p>Charitable Funds Committee</p> <p>The following points were noted from the report:</p> <ul style="list-style-type: none"> There were no points of escalation to the Board. Committee received reports and updates of charitable activities. The pandemic continued to impact fundraising activities and the ability of staff to support charitable fund initiatives.
6.3	<p>Infrastructure Committee</p> <p>The following points were noted from the report:</p> <ul style="list-style-type: none"> The Committee received assurance on key Estate and ICT programmes and performance. Update on IT infrastructure migration and activities. The Committee approved the Annual Premises Assurance report.
6.4	<p>CCS and CPFT Joint Partnership Board</p> <p>The following points were noted from the report:</p> <ul style="list-style-type: none"> Good examples of joint working were received. Patient experience story outlining the impact of support received. Outstanding practice including Best Start in Life; pilot commenced in June 2021. Successful recruitment to increase skill mix of staffing. Discussion on co-production; a presentation shared during Children's COB. Team to present to January Joint Partnership Board.
6.5	The Board noted the escalation points from Committees
7.	Assurance and Compliance Reports
7.1	<p>Bi-Annual Workforce Review</p> <p>The following points were noted:</p> <ul style="list-style-type: none"> NHS East of England issued a document 'If Your Face Fits' which provided suggested improvements/changes to remove bias from recruitment process. The Trust reviewed and changed the Trust recruitment and selection process to incorporate suggested changes. Continued focus on supporting staff to stay in the organisation. The Trust continued to work closely with staff side; regular Joint Consultation and Negotiating Partnership meetings continued to take place.
7.2	<p>The following points were noted in discussion:</p> <ul style="list-style-type: none"> A number of indicators were used to show the impact of the Trust's ongoing workforce activities, for example, staff survey feedback and Workforce, Race Equality Standards (WRES). The Trust continued to promote diverse interview panels and the positive role of the BAME panel members through feedback and work with the Cultural Diversity network. Improvement action plans were put in place to address areas which needed

	<p>to be improved.</p> <p>Action: Anita Pisani and Angela Hartley to hold an offline meeting with Fazilet Hadi and discuss equality and diversity issues.</p> <ul style="list-style-type: none"> • The Trust had an annual process to identify staff training and education needs and provided support to staff to undertake and gain continuing professional development. • The digital Transformation Strategy would include details on what the Trust could do to improve the experience of staff working with IT systems. Action: Rachel Hawkins to confirm reporting arrangements for the Digital Transformation Strategy. • The Trust was involved in system level workforce planning modelling including leadership programme. Best practice shared across the system. • The NHS human resources and organisational development vision for 2030 was published on 22nd November 2021. <p>Action: Anita Pisani and Angela Hartley would work on how to embed the vision into the Trust workforce strategy.</p>
7.3	The Board noted the report and thanked Anita Pisani and Angela Hartley for providing such a comprehensive report.
8	Winter Surge Assurance Plan 2021/22
8.1	<p>The following points were noted from the report:</p> <ul style="list-style-type: none"> • The plan was presented to the Board to provide assurance on the Trust's operational resilience for the winter season for 2021/22. • The plan had been shared with the Emergency Preparedness, Resilience and Response (EPRR) Operational Group and the Wider Executive Team. • Risk ID 3426 relating to winter surge had been added to the Trust BAF. • The plan was also shared with the system. The Board was requested to note and endorse the plan.
8.2	<p>The following comments were noted in discussion:</p> <ul style="list-style-type: none"> • The Trust would work closely with the local authority and Commissioners if there was a localised issue. In case of a national emergency, the Trust would follow national guidance. • The Trust continued to hold regular IMT discussions. • Decision to stand down services would be taken if the NHS moved to the Level 4 which was the highest level. • The Trust would review its processes to mirror the new IPAC guidance which was published on 24th November 2021.
8.3	The Board noted and endorsed the Winter Surge Assurance Plan for 2021/22.
9	The Trust Critical and Major Incident Plan and the Business Continuity Plan
9.1	The Board endorsed the plans.
10.	Claims and Litigation Annual Report
10.1	The Board received an update on Claims and Litigation involving the Trust in the period between 1 April 2020 to 31 March 2021.
10.2	The Board noted the Claims and litigation annual report for 2020/21.
11.	Any other Business
11.1	There was no other business discussed.
12.	Questions from members of the public
12.1	<p>A member of the public Rob Hallam joined the meeting. The following questions were received:</p> <ul style="list-style-type: none"> • What delegated responsibility does CCS have for 'workforce' planning and provision to support the effective running of NHS approved vaccination centres in the region? • How is the current funding investment for 'workforce' support spread

	<p>between CCS sites and other regional sites?</p> <ul style="list-style-type: none"> Does CCS knowingly fund volunteers at any of its vaccination centres? If so, how does it share funding equitably to enable other vaccination centres to do the same, enabling them to continue to support their communities?
12.2	On behalf of the Board, the Chair thanked Rob Hallam for his contribution as a volunteer at one of the large-scale vaccination site.
12.3	<p>Matthew Winn provided a brief overview of the questions. The following points were noted:</p> <ul style="list-style-type: none"> East of England had three large scale vaccination providers; the three providers were responsible for organising the workforce for mass vaccination centres for the areas they covered. There was some uniformity on how the vaccination programme was run, however providers had the ability to alter how to support staff and volunteers according to the local need. Depending on the availability of different staff and volunteers: <ul style="list-style-type: none"> Like for like volunteers were working across sites – these were not paid there were paid staff across vaccination sites.
12.4	<p>Rob Hallam thanked the Board and explained that his concern was about disparities between sites in the same geographical area. Some centres were struggling to get volunteers, whereas for CCS centres funding was available to drive the volunteer base.</p> <p>Action: Anita Pisani to link Rob Hallam with Karen Fell and Lucy Dennis to have a detailed conversation about the questions.</p>

Date of next Public Trust Board Meeting: 26th January 2022

Venue: Microsoft Teams