

Trust Board Public Meeting

Wednesday 27 September 2023

12:30 pm- 16:15 pm

Units 7-8, Meadow Park, Meadow Lane, St Ives PE27 4LG

Members:

Mary Elford Trust Chair (Chair)

Steve Bush Director of Children and Young People's Services

Catherine Dugmore Non-Executive Director
Anna Gill Non-Executive Director
Fazilet Hadi Non-Executive Director

Rachel Hawkins Director of Corporate Affairs

Kate Howard Chief Nurse

Dr Richard Iles Non-Executive Director
Aliyyah-Begum Nasser Non-Executive Director
Anita Pisani Deputy Chief Executive

Mark Robbins Director of Finance and Resources

Gary Tubb Non-Executive Director

Dr David Vickers Medical Director

Matthew Winn Chief Executive

In Attendance:

Heather Bennett (item 1) Long Term Conditions and Disabilities Network

Harley Childs Senior Executive Assistant

Sarah Feal Trust Secretary and Freedom to Speak-Up Guardian (Minutes)

Lea Fountain Associate Director, Communications

Eva King Caring Responsibilities Network
Sharon Lapao (item 1) Caring Responsibilities Network

Ashley Sumbhoolaul (item 1) Cultural Diversity Network

Katherine Vale (item 1) LGBTQIA+ Network

Minutes

1.0	Staff Story: staff network chairs
1.1	A recording was played on behalf of the staff network chairs who also attended the session to answer any questions the Trust Board had. The importance of the staff networks was acknowledged by the members.
	ACTION: Trust Board members are encouraged to make any additional personal pledges to the staff networks they wish to support.
	ACTION: The importance of promoting the awareness of allyship as well as the importance of protected time (especially for clinicians) will be communicated.
2.0	Welcome, apologies, and Register of Interests
2.1	The Chair welcomed all to the meeting. Lucy Hampton, a leadership specialist who supports the organisation, was also welcomed to the Trust Board meeting.
2.2	There were no apologies received.
2.3	Members reviewed the register of interests and confirmed their entry was accurate and up-to-date, and there were no additional declarations of interest in relation to items on the agenda. Members also confirmed that all offers of gifts and hospitality had been appropriately declared to the Trust Secretary.
3.0	Minutes of previous meeting and matters arising
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	The minutes of the meeting held on 19 July 2023 were approved as an accurate record.
3.2	The action points from previous meetings were reviewed and the following actions confirmed as complete:
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4.0 Chair's update 4.1 The Chair updated the members on a recent visit to the Grove, Dunstable where she met the Bedfordshire Integrated Contraception and Sexual Health and children's rapid response teams. The Trust Board **noted** the update. 5.0 **Chief Executive's Report** 5.1 The report was taken as read and the communication activities were highlighted. A Health Inequalities update had been provided and confirmation was given that this will be discussed again at the Trust Board Workshop in December 2023. The Trust Board reflected on learning from the Letby case. Data is an important mechanism that provides the Trust Board with assurance as to whether the correct processes are in place. Both the Medical Director and the Chief Nurse have a focus group looking carefully at this. It is important there is a culture that allows individuals to speak-up and to be assured they have been listened to and their feedback is acted upon by the organisation. The new NHS England Fit and Proper Person Test Framework was outlined following the Kark Review and members discussed how activity in this area had increased. The National Guardian for Freedom to Speak-up has used this opportunity to focus on barriers to speaking up and the Trust Board agreed to throw light on this during speak-up month in October 2023. It was highlighted that there are currently two sites identified as being affected by Reinforced Autoclaved Aerated Concrete and both areas have been made safe. Assurance was given that Emergency, Preparedness, Resilience and Response exercises had been conducted on the sites where this had been found. A request was made to bring this to the Audit Committee for formal assurance. **ACTION:** The Director of Finance and Resources to provide assurance to the Audit Committee that Emergency, Preparedness, Resilience and Response exercises had been conducted on the two sites where Reinforced Autoclaved Aerated Concrete had been identified. The Executive team were congratulated for their timely submission of the Annual Report and Accounts 2022-23. The Trust Board **noted** the report. 6.0 **Integrated Governance Report** The Integrated Governance Report for the reporting period June and July was highlighted. 6.1

assurance level asserted.

The Clinical Operational Board's Key Issues Reports were also provided to support the

Provide Outstanding Care

Substantial assurance is proposed for Caring, and Safe but reasonable assurance for Effective. A deep dive has been undertaken into incidents and confirmation provided that 95% reported as low or no harm, and no high or severe harms occurred. There was nothing to highlight on medicines management, and a project plan is in place. The Operational Pressures Escalation Levels status are being monitored to provide a consistent approach in times of pressure.

Safeguarding is consistently challenged by staffing issues, but mitigations are in place. The multi-agency safeguarding hub is slowly starting to improve.

The patient safety framework has been utilised in line with the national timeframe.

Infection, Prevention and Control rates were highlighted. There has been an increase in Covid-19 cases, which are having an impact on patients being admitted to hospital. This is a different variant and vaccinations are being tailored to the 'spike'. Flu vaccinations are being rolled out. Norovirus is on the increase as well and has come earlier this year than expected. Prevalence may increase when universities return. Measles is also becoming problematic. A risk has been added to the risk register. Tuberculosis and Clostridium difficile case rates are steady now. Diphtheria infection surveillance data is being monitored.

The Trust Board queried why reasonable assurance had been given on the Effective Domain. It was explained that this was due to Information Governance targets being below target level and is currently being addressed.

Demographic data is low on the friends and family test. This is being improved upon by using new, innovative information technology.

The report outlined changes to the makeup of Healthy Child programme teams and assurance was sought as to how the impact of this would be monitored. Assurance was given that skill mix and capability checks are in place, for example, induction, supervision, and regular safeguarding reviews for the 0-19 service. Staff are being developed in role and are being developed from within the organisation.

An explanation was provided into how the new Patient Safety Incident Response Framework provides greater levels of assurance regarding no harm, low harm, and high-level reporting on incidents.

Excellent Employer

The assurance rating is proposed as reasonable for Safe on this occasion because of staffing levels. However, workforce data is within control limits.

The equality delivery system continues to be delivered. Violence and aggression continue to be monitored closely so additional support can be provided. Anti-racism pledges will continue to be communicated so staff can see what has been achieved and this is being promoted during Black History Month.

NHS England has published 6 high impact interventions for equality action, which are being embedded within the plan for the year. Career progression and cultural diversity is proactively being worked on.

The NHS Staff Survey is available for completion now and closes 24 November 2023.

The Be Sustainable report is illustrating that the use of 'Bank staff' has increased. It was explained that non-recurrent funding has been provided and this has increased the use of Bank staff. Agency spend is within budget.

Future reports will contain more detailed narrative to explain why this has occurred. A trajectory would be useful to provide insight on this.

The staff sickness rate was queried, and it was noted that this is a key performance indicator. Assurance was provided that not all sickness levels attributed to 'stress' is 'work related stress', and this is how it is coded on a national electronic staff system.

Be Sustainable

There are ongoing challenges meeting the organisation's efficiency target, and discussions continue with local commissioners to improve this.

The areas delivering underspend were highlighted, and it was noted from month 4 (July 2023) to date, the operating budget position is break-even. Recurrent schemes are being identified for the next financial year and capital sums have reduced the cash position due to programmes of work.

Progress with the Cost Improvement Programme was discussed. Service Directors and staff are continuing to identify further opportunities and there is a dedicated finance resource looking at efficiency plans.

Payment of invoices to suppliers were questioned and assurance was given that this is being investigated. Delays could be due to invoice validation, for example.

The volume and value figures were queried, and board members observed that there was scope to improve the presentation of the finance scorecard. Financial reporting will be looked at in a future Trust Board session and feedback was provided as to what would be helpful to members.

The contract methodology was outlined, and it was noted that 'clawback' a provision used to return money, is not really used within NHS contracts unless there is an underspend.

The Clinical Operational Boards' chairs confirmed there were currently no issues to escalate.

The Trust Board was asked to note that there is an increased expectation that the Trust meet national elective recovery targets which are incumbent upon acute trusts, but with no additional funds being available to the organisation from NHS Elective Recovery Funds. This had been discussed in detail at the executive meeting. The Trust Board supported the executive in raising concerns about this. The timeline was outlined between now and next March 2024.

The Trust Board discussed the assurance summary for each objective as outlined in the report and **agreed** the overall assurance rating of substantial.

Quality, Improvement and Safety Committee 7.0 (Including Emergency Preparedness, Resilience and Response Core Standards) 7.1 The report was introduced, and it was highlighted that key issues had already been reported earlier in the meeting. Confirmation was given that the Core Standards return needs to be approved by the Trust Board in public session. The organisation confirmed they were compliant with 52 standards and noted 8 new standards had been added during 2022-23 meaning the overall rating submitted was 'reasonable'. The work of the Emergency, Preparedness, Resilience and Response team was acknowledged by the Trust Board. Members also acknowledged the library service team. The Trust Board **noted** the report and **ratified** the Core Standards return. Cambridgeshire Community Services NHS Trust and Cambridgeshire and 8.0 Peterborough NHS Foundation Trust Joint Children's Partnership Board 8.1 The Trust Board **noted** the report. 9.0 **People Participation Committee** The effectiveness review of the Committee was outlined. A correction was made to the 9.1 report to confirm the People Participation Committee and not the Trust Board approved the 2023-24 Workforce Race Equality Standard and Workforce Disability Equality Standard action plans. The Trust Board **noted** the report. 10.0 **Infrastructure Committee** 10.1 The report was introduced, and it was highlighted that risk 3475 had been considered earlier in the meeting. It was noted that there has been a 92% satisfaction result for NHS Shared Business Service levels, which was an improved position. However, there are some service levels which require further improvement. There are now seventeen Green Plan Champions in place, and work is being undertaken to see whether they will formalise into a staff network. In response to a question about information sharing, the point was made that the Shared Care Record system is complex and there is one for each of the Integrated Care Boards. System interoperability is difficult to achieve. The Trust Board **noted** the report.

11.0 Learning from Deaths Report (Quarter 1 2023-24) 11.1 The report for Learning from Deaths was reviewed, which has already been considered in detail by the Quality, Improvement and Safety Committee. A piece of work was highlighted for preferred place of death, where ethnicity was being captured. There has been learning identified regarding the Mental Capacity Act 2005. There is now an action plan in place to remedy this, and this has been audited. Bespoke training and support are also in place and there are clinics being set up. Templates in Systm One are also being updated. There is work underway and the organisation contributed to the national framework. Members queried if there was any support being provided to parents, for example, Mental Capacity Act training to support them or whether we were signposting them to what is available. Confirmation was given that this is generally signposting at this moment in time. A national review of the transition from Children and Young People into adult health services was highlighted. They are known as 'The Inbetweeners'. The report provides a framework for the organisation to review. The Trust Board **noted** the report and **agreed** the Substantial rating. **Medical Revalidation Report** 12.0 (Including Guardian of Safe Working Hours Annual Report) 12.1 The Medical Revalidation report was outlined, and it was noted that e-appraisals are being introduced. The Trust Board **noted** the report and **approved** the statement of compliance and authorised the return to NHS England. 13.0 **Annual Claims and Litigation Report 2022-23** The Chief Nurse introduced the report and highlighted that the full unredacted report had 13.1 been seen by the Quality, Improvement and Safety Committee on 6 September 2023. Work will be undertaken with the organisation's legal team to improve the reporting format for next year, and confirmation was given that there were no untoward trends or themes identified and that the full version is available to members on request. The Trust Board **noted** the report and **agreed** the Substantial rating. 14.0 **Board Assurance Framework** 14.1 The Trust Board considered and agreed the Board Assurance Framework accurately described the main risks facing the organisation. Work is being undertaken internally to assess the Care Quality Commission standards and inspection regime, but significant change is not expected.

The Trust Board discussed children's services and the establishment of the Accountable Business Unit. It was highlighted that children and their families are most exposed to the austerity measures with funding across Government. Members discussed the 'Luton 2040 vision' that children have the best start in life.

Confirmation was given that the risks to children's services, the future trajectory and how this has been articulated in the framework is being reviewed.

The Trust Board **noted** the report and **agreed** the Substantial rating.

15.0 | Mid-year update on the Trust's Strategic Ambitions 2023-26

As part of the Strategic Framework 2023-26, the Trust Board agreed the conditions necessary to realise each ambition alongside a 'success statement'. There is a range of high-level actions underway, or planned, to meet the conditions by the end of 2025-26 and the progress in implementing these as at the end of Quarter 2, 2023-24 and forecast to the end of Quarter 4 2023-26 was reviewed.

The strategy is reviewed by the Leadership Forum in addition to the Wider Executive Team on a 6-monthly basis. There have been 4 strategic objectives identified and there are 3 aligned ambitions related to each of those.

The quality of the report was acknowledged including how the enabling strategies were provided as a forward focus. Members confirmed they would feedback any changes on the reporting style if required.

Consideration will be given as to how best to give feedback to service users on progress against the strategic objectives. The update can also be provided to Integrated Care Boards. The Trust Board acknowledged the work of Bruce Luter in drawing together a helpful stock take of the strategic ambitions and the progress that has been undertaken to date.

The Trust Board **noted** the progress to date against the strategic objectives.

16.0 | Any other Business

16.1 There were no matters raised.

17.0 Questions from members of the public

17.1 Confirmation was given that there had been no questions received from members of the public nor any request received to attend the meeting.

The meeting closed 16:25

Date of next meeting: 22nd November 2023