

**Trust Board Meeting in Public**

**Wednesday 22 May 2024**

**13:00 – 16:05**

**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
Fazilet Hadi	Non-Executive Director
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
Anna Gill	Non-Executive Director
Rachel Hawkins	Director of Corporate Affairs

**In Attendance:**

Michelle Robinson	Assistant Trust Secretary (Minutes)
Lea Fountain	Associate Director of Communications
Lynda Thomas CBE	Chair, Norfolk Community Health and Care NHS Trust
John Peberdy	Service Director, Cambridge and Peterborough Children and Young People's Services (item 1)
Nina Morley	Infant Feeding Lead, Cambridgeshire & Peterborough Healthy Child Programme (item 1)
Charlie Thulborn	Infant Feeding Adviser, Cambridgeshire & Peterborough Health Child Programme (item1)
Lisa Wright	Patient Experience and Participation Manager (item 1)
Sarah Kilby	Patient Experience Adviser (item 1)
Angela Hartley	Deputy Director of Workforce (item 5)

## Apologies:

Sarah Feal

Trust Secretary and Freedom to Speak-up Guardian

## Minutes

<b>1.0</b>	<b>Patient Story: Emma's Story</b>
1.1	The board heard from Emma and the challenges she had faced, as a new mum, feeding her baby. She outlined the positive impact of the support she had received from the Infant Feeding Team as she tried to balance the pressures to breastfeed with her own mental wellbeing. Members had a discussion on the challenges faced by new mums and how valuable the support from children's services had been for the wellbeing of both mum and baby. It was acknowledged that further work was needed to improve existing referral pathways, around strengthening communications and clinical training and linking in all available support services (such as mental health) at the appropriate time.
<b>2.0</b>	<b>Welcome, apologies, and Register of Interests</b>
2.1	The Chair welcomed all to the meeting, including Lynda Thomas CBE, Chair of Norfolk Community Health and Care NHS Trust (NCHC). Apologies were noted from Sarah Feal, Trust Secretary and Freedom to Speak-up Guardian.
2.2	Members confirmed they had no additional declarations of interest in relation to items on the agenda, and their register entries for the register of interests and gifts and hospitality were accurate and up to date.
<b>3.0</b>	<b>Minutes of previous meeting and matters arising</b>
3.1	The minutes of the meeting held 24 January 2024 were <b>approved</b> as an accurate record.
3.2	<p>The action points from previous meetings were reviewed and the following confirmed as complete:</p> <p><b>March 2024</b></p> <ul style="list-style-type: none"><li>• 5.1 (a) and 5.1 (b) – Trust Ambitions (2023-26)</li><li>• 6.1 – National NHS Staff Survey Results 2023</li><li>• 7.1 – Chief Executive's Report</li><li>• 8.0 – Annual Budget 2024-25</li><li>• 9.1 (a) and 9.1 (b) – Integrated Governance Report</li><li>• 9.1 (c) - Integrated Governance Report – benchmarking data had been collected from other community trusts and a group of community trust workforce Directors were due to meet on 24<sup>th</sup> May to share ideas of best practice.</li></ul> <p>The Trust Board <b>noted</b> the update.</p>
<b>4.0</b>	<b>Chair's update</b>
4.1	<p>The Chair provided a verbal update to the Board:</p> <ul style="list-style-type: none"><li>• Attended the celebratory farewell event for Suffolk iCaSH teams. It was evident that a tremendous amount of effort had gone into supporting staff through this</li></ul>

	<p>period of transition and staff spoke very positively about the approach the Trust had taken.</p> <ul style="list-style-type: none"> <li>• A visit to Suffolk Dentistry in Bury St Edmunds had provided an opportunity to meet with a newly recruited dentist and 'Green' champion; both had triggered inspiring discussions.</li> <li>• Visited both the iCaSH and MSK services in Peterborough with the Chair of the Cambridgeshire and Peterborough Integrated Care Board (C&amp;P ICB), John O'Brien, and had had the opportunity to 'sit in' on some clinics being delivered and to learn more about the provision of these services. The culture of 'growing our own' was clearly demonstrated, with both services having staff who had qualified through non-traditional routes such as apprenticeships. The range of backgrounds provided an extra richness to the workforce.</li> <li>• Attended a QI (Quality Improvement) Showcase Event which included a powerful short video that had been produced by a group of young people to encourage their peers to complete a questionnaire.</li> </ul>
<p><b>5.0</b></p>	<p><b>Bi-annual People Strategy Update</b></p>
<p>5.1</p>	<p>The report was taken as read. Highlights were presented:</p> <ul style="list-style-type: none"> <li>• Following the latest results of the Staff Opinion survey, action plans had been developed at both Trust-wide and Service Levels. Following a review by the Task and Finish Group, key areas of focus included: <ul style="list-style-type: none"> <li>a) quality of appraisal discussions and how the appraisal and objective setting processes could be better aligned.</li> <li>b) staff who were working additional hours on a regular basis.</li> <li>c) age differences and how the Trust could support these different groups. A recent article on generational differences (there were now five generations within our workforce) which had been presented to a local workforce forum would be shared with the board.</li> </ul> <p><b>ACTION: Director of Workforce to share an article on generational differences with board members, within the document library on Convene.</b></p> </li> <li>• The four Staff Networks in place were thriving, with regular attendance and quoracy.</li> <li>• Retention exemplar work continued, with feedback and learning being drawn from experiences at both appointment and exit stages.</li> <li>• In July 2023 the Trust had signed up to the NHS sexual abuse charter and committed to supporting staff affected by both sexual and/or domestic violence. This was being taken a step further with a new legal requirement coming into effect from October 2024 whereby the employer has a legal obligation to make all reasonable steps to protect its staff from sexual violence. The staff element of this work was being led by Deputy Director of Workforce and patient element by the Chief Nurse.</li> </ul>
<p>5.2</p>	<p>In discussion, the board noted that:</p>

	<p>I. It was difficult to gauge the effect of any interventions put in place so far to address incidents of violence and aggression in the workplace. Whilst the HR team had not received notification of any recent incidents, the staff survey results clearly indicated that incidents were still occurring across the Trust. Work was underway to strengthen current policies to address this, including a particular focus on domestic and sexual violence.</p> <p>II. The Deputy CEO and Director of Workforce and Chief Nurse were copied into every incident of abuse to ensure that appropriate interventions were put in place to protect individuals. The process was carried out outside of services, which had proven to be effective.</p> <p>III. The Trust's Violence and Aggression Policy had been updated, following a recent review of all incidents over the previous two years, and provided staff with a more comprehensive framework to follow. Work was underway to try and make the Datix system more responsive for staff when recording incidents of abuse.</p> <p>IV. It was apparent that a strong relationship between appraisees and appraisers provided a more effective appraisal and so the review of the Trust's appraisal process would have a focus on ensuring that appraisers had no more than 12 members of staff reporting into them (currently some managers had up to 20 or 30 people to appraise, which was unsustainable).</p> <p>V. To build on the success of the number of apprenticeships across the Trust, both resources and infrastructure for this would need to be monitored to ensure that any future progression could be fully supported.</p> <p>VI. Pillar 2 of the Trust's Digital Strategy focusses on supporting the workforce to progress through digital development. Updates on this area of work would be included in future reports. <b>ACTION: Deputy Director of Workforce to include an update on developments with Pillar 2 of the Digital Strategy in future People Strategy Update reports.</b></p> <p>VII. It would be helpful if an update on the Veterans Aware work being carried out across the Trust could be included in future reports. <b>ACTION: Deputy Director of Workforce to include an update on the Veteran Aware work in future People Strategy Update reports.</b></p> <p>VIII. Future priorities for both the WDES (Workforce Disability Equality Standard) and WRES (Workforce Racial Equality Standard) would be clearer once the latest workforce data had been fully analysed (available end of May 2024). This would be reported and discussed at the next People Participation and Equalities Committee in August, followed by an update in the next Bi-Annual People Strategy Update for the board in November 2024.</p>
5.3	The Trust Board <b>noted</b> the report.
<b>6.0</b>	<b>Chief Executive's Report</b>
6.1	<p>The report was taken as read. Key highlights presented included:</p> <ul style="list-style-type: none"> <li>• The NHS Community Health Services Data Plan 2024/25 to 2026/27 had been published, calling for an improvement in the use of data in community health services.</li> <li>• A new NHS Leadership competency framework for board members had been issued and would be rolled out as part of one-to-one discussions and appraisal</li> </ul>

	<p>processes during 2024/25.</p> <ul style="list-style-type: none"> <li>• The CQC (Care Quality Commission) had published new well-led guidance for NHS Trusts, developed jointly with NHS England. Work was underway to incorporate the latest guidance into the Trust's Well-Led plans.</li> <li>• NHS Providers had published a practical guide to support NHS Trust board members to address health inequalities as part of their core business. Progress on this would be included in future reports.</li> <li>• The Chair had reviewed the extensive list of Champion roles for non-executive directors and recommended a new more focussed approach to ensure that the board remained sighted on important issues.</li> <li>• The Annual Slavery and Human Trafficking Statement had been updated.</li> <li>• The report provided a summary of all communications events which had occurred since the last meeting, including feedback from recent service visits.</li> </ul>
6.2	<p>In discussion, the board noted that:</p> <ol style="list-style-type: none"> <li>I. Members were encouraged to view the video (link provided in paragraph 8.2) which had recently been launched in partnership with Norwich City Football Club to promote messaging around protecting babies.</li> <li>II. The success of the recent launch of the Digital Platform Project within Cambridgeshire and Peterborough and the positive impact this was already having for children and their families.</li> </ol>
6.3	<p>The Trust Board:</p> <ol style="list-style-type: none"> <li>I. <b>Approved</b> the revisions to the non-executive director champion roles.</li> <li>II. <b>Approved</b> the Slavery and Human Trafficking Statement for 2024/25.</li> <li>III. <b>Noted</b> that NHS England had removed the governance self-certification reporting requirements from the final modified NHS Provider licence.</li> <li>IV. <b>Noted and discussed</b> other elements contained within the report.</li> </ol>
<b>7.0</b>	<b>Freedom to Speak Up Guardian Report</b>
7.1	<p>The report was taken as read. The following key points were noted:</p> <ul style="list-style-type: none"> <li>• The Trust scored very well under 'we have a voice that counts' within the latest staff survey results and for 2023-24 was the best performing Community Trust nationally in this area.</li> <li>• Discussions were taking place with the Trust's staff networks to address those sub-areas where scores had slightly decreased compared to the previous year's scores and to try to help to remove any barriers to speaking up.</li> <li>• There had been 39 concerns raised during 2023-24, which was an increase from 2022-23 where 18 concerns were raised. Cases were calculated by the number of individuals involved; one particular case during the year had involved 23 members of staff.</li> <li>• The Trust had achieved high compliance rates for the Freedom to Speak Up (FTSU) mandatory training which had remained consistent throughout the year.</li> <li>• Preparations were underway to deliver a Level 3 Freedom to Speak-up training session to the Leadership Forum.</li> <li>• The Trust had a healthy number of FTSU Champions with all services represented. Work continued to encourage more to be involved.</li> <li>• Both the FTSU Guardian and Deputy Chief Executive regularly meet with the Audit</li> </ul>

	Chair to keep them informed of developments.
7.2	<p>In discussion, the board noted that:</p> <ol style="list-style-type: none"> <li>I. The Trust Board reviewed the themes of concerns raised, and the most prevalent themes related to service changes, and attitudes and behaviours. Confirmation was given that the high number of cases related to a single service change.</li> <li>II. Having the Deputy Director of Workforce as the Lead Board Member for FTSU worked very well as many of the cases raised were either HR (Human Resources) or workforce related.</li> <li>III. Taking a 'learning approach' to any reviews and having conversations at both operational and executive level were key to helping to resolve any issues raised and provide appropriate solutions.</li> <li>IV. The FTSU Guardian actively followed up with individuals to ensure that issues are fully resolved.</li> <li>V. No grievances had been raised to date, as a result of speaking up.</li> <li>VI. Given recent high-profile cases, it was important to ensure that the Trust retained its healthy culture for speaking up.</li> <li>VII. This was Sarah Feal's first FTSU Guardian role, which she had settled into extremely well and was providing exemplary support to our staff. The Chair would write a letter of thanks for a comprehensive report.</li> </ol> <p><b>ACTION: The Trust Chair would write a letter of thanks to Sarah Feal, Trust Secretary and Freedom to Speak Up Guardian</b></p>
7.3	The Trust Board <b>noted the report.</b>
	14:30 Aliyyah-Begum Nasser left the meeting.
<b>8.0</b>	<b>Integrated Governance Report (IGR)</b>
8.1	<p>The Trust Board received the report and reviewed the assurance summary for each objective as outlined in the report. The report included the Clinical Operational Boards' (Adults and Children &amp; Young People) Key Matters and Escalations Reports. The Children &amp; Young People's report provided 'substantial' assurance and the Adults and Ambulatory reports provided 'substantial' assurance for Luton &amp; Bedfordshire Adult services and Dynamic Health and 'reasonable' assurance for iCaSH (integrated Contraception and Sexual Health) and Dentistry.</p> <p>The reporting period covered the quality, performance, workforce and finance information for February and March 2024 and included the key risks and issues, to provide the Trust Board with assurance of delivery against the agreed strategic objectives and indicators. An overall rating of '<b>substantial</b>' assurance was recommended and the rationale for this was provided in each chapter. The following points were highlighted:</p> <p><b>Outstanding Care</b></p> <ul style="list-style-type: none"> <li>• The overall assurance ratings were 'substantial' for Safe and Responsive and 'reasonable' for Caring and Effective.</li> <li>• There were no patient safety incident investigations during the reporting period.</li> <li>• Information had been added in relation to pressure ulcers and moisture lesions. To ensure that everything possible was in place to support patients within Adults</li> </ul>

Services, a Task and Finish Group had been set up to review wound care incidents and clinical practice. Significant progress had been achieved over the last five years because of introducing a number of interventions. Updates would also be provided within future Clinical Operational Board (COB) reports.

- The MHRA (Medicines and Healthcare Products Regulatory Authority) had issued an alert in January 2024 stating that Fluoroquinolones should only be prescribed when other more commonly recommended antibiotics were inappropriate, owing to concerns over long-term, and potentially irreversible, side effects. Work was underway to limit the use of this drug across the Trust.
- Pressures around medicines supply continued.
- The number of safeguarding cases remained high and complex across all of the Trust's geographies. Within Cambridgeshire and Peterborough, work was underway to review data for IHAs (Initial Health Assessments) to both ensure accuracy of reporting and to gauge service capacity. Work was ongoing with the Child Protection Medical model. Transformation plans were currently looking how best to utilise Paediatricians' time against the recovery of waiting times.
- Following recent national alerts, the Trust was actively implementing the latest guidance to help to protect staff and service users against both Whooping Cough and Measles.
- The Trust had an Antimicrobial Resistance Plan in place which was regularly audited and would continue to be monitored by the newly appointed Chief Pharmacist.
- The majority of EDS (Equality and Diversity Standards) objectives had been completed for 2023/24. Just one remained (in relation to collecting demographic data) and would be carried forward in 2024/25.
- Following a recent information request from the CQC about Audiology Services, detailed assurance audits had been carried out in both the Cambridgeshire and Bedfordshire and Luton Services. The Trust was able to report that the Cambridgeshire service was accredited to its professional standard; further work was underway to look at the benefits and risks of progressing accreditation with the Bedfordshire and Luton service. A recommendation would be reported to the Trust Board in July 2024.

#### **Be an Excellent Employer**

- The overall assurance rating was 'reasonable' for Safe, 'substantial' for Effective and 'substantial' for Well Led. The rating for Effective had increased since the last reporting period as the Trust's appraisal rates were now above target at 92.41%.
- The two strategic risks, linked to the 'Excellent Employer' objective, previously reported - relating to workforce challenges and leadership capacity (IDs: 3533 and 3540) – had been closed. Two new strategic risks had been added to the register which related to workforce challenges and unplanned sickness absences.
- The trajectory for both agency and bank spend was moving in the expected direction, with agency spend reducing and bank spend increasing.

#### **Be Sustainable**

- The overall assurance rating was Well Led was 'reasonable'.

	<ul style="list-style-type: none"> <li>• Risk ID: 3529 (failure to deliver the financial plan for 2023/24) had been closed and a new risk opened which related to delivering the financial plan for 2024/25.</li> <li>• The Year End position for 2023/24 had delivered a marginal surplus of £17k (subject to final audit sign-off).</li> <li>• Performance of both divisional and support services during the reporting period had been similar, with activity challenges and vacancy management being the most prominent issues.</li> <li>• There was a peak in cash flow during March 2024 which was a result of additional payments from commissioners, following several months of negotiations.</li> <li>• There was a decline for Public Sector Prompt Payments (PSPP) during March for NHS invoices which was owing to payment of a large invoice which had been under query for a few weeks.</li> </ul>
8.2	<ol style="list-style-type: none"> <li>I. In discussion, the board noted that:</li> <li>II. A review of the last Children and Young People’s COB report would be carried out as the one case of ‘moderate harm’ for audiology services reported within the IGR had not been included in the earlier COB report. <b>ACTION: The Chief Nurse would review the discrepancy between the reporting of incidents for audiology services for the period February-March 2024 across both the COB and Trust Board meetings.</b></li> <li>III. The detailed information provided within the report around the work on pressure ulcers was welcomed and progress commended. <b>ACTION: The Trust Chair would write to the Service Director and Deputy Director for Luton Adult Community Services to commend the efforts and achievements of the preventative work being carried out for pressure ulcers.</b></li> <li>IV. No specific areas had been identified to date around plans to utilise robotic process automation identified within the Trust’s CIP (Cost Improvement Programme), although some projects were underway in utilising AI (Artificial Intelligence) and included a collaborative piece of work with Birmingham and Central London Community Trusts around pressure ulcers.</li> <li>V. Overall, traction was being made in dealing with waiting lists for Children and Young People’s Services. A similar model of interventions was being used across all of the Trust’s systems which was helpful, although those challenges being faced by each individual system were quite different. The system-based work currently underway on what could be achieved from within schools could potentially make a significant difference, although lack of resources may constrain this area of work.</li> <li>VI. There would be an increased focus on agency spend going into financial year 2024/25. Communications would be sent to Operational Leads to reinforce the message that spending levels must remain within the national framework set by NHS England.</li> <li>VII. The overall rating assigned to strategic objective ‘Sustainable Organisation’ had not been rated ‘substantial’ owing to overall delivery against the efficiency target being at just over 50%. It was not anticipated that the challenges faced during 2023/24, with inflationary costs and pay uplifts, would be repeated for 2024/25. Early engagement with services in setting efficiency targets and looking at targeted areas of transition would be the focus for future years to improve overall</li> </ol>



	delivery against this target.
8.3	The Trust Board <b>agreed</b> the overall assurance rating of 'substantial'.
	15:30 Fazilet Hadi left the meeting.
8.4	<p><u>Learning from Deaths</u></p> <p>The report was taken as read. Key points highlighted:</p> <ul style="list-style-type: none"> <li>• The piece of work being undertaken within the Luton Adults Services around the 'preferred place of death' was ongoing, owing to challenges with collecting the correct information from SystmOne.</li> </ul>
8.5	<p>In discussion, board members noted that:</p> <ol style="list-style-type: none"> <li>I. It would be beneficial to carry out a piece of collaborative work on Learning from Deaths with colleagues in NCHC.</li> <li>II. One of the recently agreed priorities for the Bedfordshire Care Alliance incorporates the End-of-Life pathway with a focus on 'preferred place of death'.</li> <li>III. The Trust would take a proactive approach in focussing its communications to younger populations about the effects of smoking when pregnant. <b>ACTION: The Associate Director of Communications would work to develop a suite of communications, aimed at younger populations, on the effects of smoking during pregnancy.</b></li> <li>IV. It would be beneficial for the Trust to review the work being undertaken to support children and young people with learning disabilities, including how this aligned with developments around the LeDeR review across Norfolk and Waveney, Cambridgeshire and Peterborough and Bedfordshire, Luton and Milton Keynes systems. <b>ACTION: The Chief Nurse would lead a review of the support currently being offered by the Trust to children and young people with learning disabilities in relation to the outcomes of the LeDeR review.</b></li> </ol>
8.6	The Trust Board <b>noted</b> and <b>discussed</b> the report.
<b>9.0</b>	<b>Audit Committee</b>
9.1	<p>The Committee Chair confirmed that there were no matters that required escalation to the Trust Board.</p> <p>The Trust Board <b>noted</b> the report.</p>
<b>10.0</b>	<b>Quality Improvement and Safety Committee</b>
10.1	<p>The Committee Chair confirmed that there were no matters that required escalation to the Trust Board.</p> <p>The report received from the Resilience Steering Group had provided 'reasonable' assurance.</p> <p>An action plan was being developed following the publication of the Chester Hospitals Action Plan. Any learning and outcomes would be reported through the committee and shared with the Trust Board through the usual reporting arrangements.</p>

	The Trust Board <b>noted</b> the report.
<b>11.0</b>	<b>Joint Children’s Partnership Board</b>
11.1	The Committee Chair confirmed there were no matters that required escalation to the Trust Board.  The Trust Board <b>noted</b> the report.
<b>12.0</b>	<b>People Participation and Equalities Committee</b>
12.1	A verbal update was provided. Points to note included: <ul style="list-style-type: none"> <li>• Comprehensive progress reports against the people participation strand of the Quality Strategy and the diversity and inclusion strand of the People Plan had been received.</li> <li>• The Deputy Chief Executive and Director of Workforce had helped committee members to understand how the Inclusion Plan would be implemented.</li> <li>• Year 2 of the Anti-Racism Plan was signed off.</li> <li>• Received an update from the Learning Disability Group and the work being carried out to implement the Accessible Information Standard.</li> <li>• Eight new patient involvement partners had recently been recruited.</li> <li>• The Committee Chair confirmed there were no matters that required escalation to the Trust Board.</li> </ul> <p>The Trust Board <b>noted</b> the update.</p>
<b>13.0</b>	<b>Board Assurance Framework</b>
13.1	The Trust Board reviewed the Board Assurance Framework (BAF). It was noted that following a review, there were now nine strategic risks on the risk register.  It was noted that risk ID: 3467 - in relation to the development of children’s services across the Cambridgeshire and Peterborough – was under close observation given the recent challenges in this area.  Having reviewed and considered the Trust Board and Committee papers they had received, members confirmed that the BAF accurately reflected the main risks currently facing the organisation.  The Trust Board <b>agreed</b> the assurance rating of ‘substantial’.  The Trust Board <b>noted</b> the report.
<b>14.0</b>	<b>Any Other Business</b>
14.1	Date of next meeting in public: 17 <sup>th</sup> July 2024

<b>15.0</b>	<b>Questions from members of the public</b>
15.1	No questions were raised.
The meeting closed at 15:50	

DRAFT