

MINUTES

TRUST BOARD PUBLIC MEETING

Wednesday 20th January 2021

10.30 – 12:30

Microsoft Teams

Members:

Mary Elford	Chair
Oliver Judges	Non-Executive Director
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
Anita Pisani	Chief Executive
Rachel Hawkins	Deputy Chief Executive/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
Lisa Wright	Patient Experience Manager (<i>Item 1</i>)
Abbe Robertson	Lead Nurse Clinical and Professional Development -Tissue Viability Service (<i>Item 1</i>)

Apologies:

Anne Foley	Director of Workforce, Business Development and Transitions
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Minutes:

1.	Patient Story - “Our story of what felt like a lack of care...” (Luton Adult Services)
1.1	Lisa Wright, Abbe Robertson and Helen joined the meeting. The Chair, on behalf of the Board extended her condolences to Helen and her family.
1.2	The Board was informed that Helen had made a formal complaint in May 2020; this was led by the CCG. The complaint included 111 services, the GP practice and CCS services.
1.3	Helen talked about her mother, Lis’ experience. The following points were noted: <ul style="list-style-type: none"> Lis was 87 years old and diagnosed with cellulitis, sore and swollen legs. Lis lived in Hertfordshire but was registered with a GP in Luton. Her postcode had an effect on the care available to her. The Luton GP could not provide the appointment Lis required. She was on a long tissue viability waiting list; which was about eighteen weeks. Since the Luton GP was not able to offer Lis the care she required, Helen brought her to St Albans and she accessed care from St Albans GP. Lis went back to Luton during the pandemic; five referrals were made without outcome and no feedback was provided. Lis spent the last part of her life in pain and distress. She died of an unrelated cause in May 2020.

1.4	<p>In discussion the Board noted the following:</p> <ul style="list-style-type: none"> • The story was an important one for the Board to hear and learn from. • The story highlighted the need for a joint approach across the areas where the Trust works. • Patients registered with GPs might sometimes stay with their relatives outside their registered area. It was the responsibility of clinicians to ensure patients understood the impact of this on service provision. • The tissue viability service had now: <ul style="list-style-type: none"> - Cleared the waiting list. - Changed the criteria and the information received from GPs. - Referral process for patients known to the service was revised and made easier. - Recognised the need to have one point of contact for patients. • Patients should be treated as individuals; boundaries should not have an impact on the care patients received. • Digital Information sharing process to be followed up at Infrastructure Committee. Action: Mark Robbins • Communication with patients about the management of waiting lists had been a theme in a couple of recent patient stories. Kate Howard to follow up with services. Action: Kate Howard • Mark Thomas (Chief Information Officer BLMK), was leading some work outside of ICS boundaries re - getting clinical systems all linked up. Action: Anita Pisani to check how this would fit with other providers outside of the Trust boundaries. • The story had demonstrated boundary issues for patients. Pete Reeve (Service Director, Luton Adults Services) to link with his counterparts in Hertfordshire and discuss how to have a systematic process and keep in contact with patients to avoid patients falling between boundaries. Action: Anita Pisani to check with Pete Reeve. • The Board asked for an update in 6 months on progress with these issues.
1.5	<p>On behalf of the Board, the Chair thanked Helen, Lisa Wright and Abbe Robertson for sharing such a valuable story. The Trust would learn from this and ensure the issues identified were addressed. Progress made on reducing the waiting list showed that improvement could be made.</p>
2.0	Chair's welcome, apologies and additional declarations
2.1	No new declarations were noted.
3.0	Extraordinary Remuneration Committee Meeting Escalation Report
3.1	<p>The Board was briefed on the Trust management changes agreed by the Remuneration Committee held on 13th January 2021. The changes were confirmed by NHS England/NHS Improvement and were as follows:</p> <ul style="list-style-type: none"> • Anita Pisani to act up as Chief Executive • Anne Foley to act up into the workforce, business development and transition role. Anne would become a non-voting member of the Board. • Rachel Hawkins to act up in Deputy Chief Executive role in addition to her current role. Rachel would become a voting member of the Board for the period. <p>The changes became live on 11th January 2021.</p>
3.2	The Board received and noted the changes
4.0	Minutes of previous meeting and matters arising
4.1	The minutes of the meeting held on 18 th November 2020 were approved as a correct record of the meeting.

4.2	The action about introducing paid peer mentors to the workforce would be picked offline by the Chair and removed from the action log.
4.3	The action relating to the Infrastructure Committee's role in relation to cyber security was being addressed. An information pack on cyber security was being pulled together and the Board would have sight of it. Action: Mark Robbins to follow this up with James Gingell.
5.0	Chief Executive Report
5.1	<p>Anita Pisani briefed the Board on progress and key issues, events and activities since the last Board meeting. The following key headlines were noted:</p> <ul style="list-style-type: none"> • The NHS moved to Level 5 status for the Covid 19 pandemic on 4th January 2021. Nationally, the NHS was at extreme pressure. • The Trust continued to respond to the COVID-19 pandemic. • Rachel Hawkins was the Trust lead for incident control; she chaired the Trust Incident Management Team twice a week. • The Board recognised the pressure across the system; the Trust continued to support staff. • Pressure across acute partners and community services in other areas could impact Trust services. The Trust was revisiting the quality and equality impact assessments previously done to ensure clarity on actions needed. • Daily sitrep reported on a number of staff who tested positive from lateral flow.
5.2	<p>Covid 19 Mass vaccination:</p> <ul style="list-style-type: none"> - The Trust had been appointed the 'Lead Provider' for Cambridgeshire & Peterborough and Norfolk & Waveney for the roll out of the mass vaccination programme. - Successfully opened first mass vaccination (Castle Quarter) centre in Norwich on 18th January 2021. - Executives would be present to support staff when new centres open. <p>There were challenges in securing the workforce as a lead provider. This included volunteers to help people (not only nurses) and operational leaders</p> <ul style="list-style-type: none"> • The Chief Nurse had been invited to the Trust BAME network meeting scheduled for 27th January 2021 to discuss vaccination issues that could be worrying staff. • Governance around vaccination would be strengthened to ensure assurance systems were in place. • 680 staff had been vaccinated to date. • All acute sites across the system were open for staff to book in.
5.3	<p>Rachel Hawkins briefed the Board on the Board Assurance Framework (BAF). The following key headlines were noted:</p> <ul style="list-style-type: none"> • Apologised that a wrong graph (risk by directorate) had been included in the report. Action: Rachel Hawkins - to re-issue the correct graph (risk by risk type) • Ongoing work to strengthen the BAF making sure it had all the risks which should be included on the BAF going forward. • Areas which were stood down to be reflected appropriately in the BAF assurance matrix. • Additional measures in relation to Covid 19 and mass vaccination had been put in place. • Definitions for green colours on the assurance matrix to be clarified. Action: Rachel Hawkins
5.4	The Board received, discussed and noted the Chief Executive report.

6.0	The Redevelopment of Princess of Wales (POW) Hospital, Ely – Strategic Outline Case
6.1	<p>The Board was briefed on the updated POW Strategic Outline Case (SOC). The following points were noted:</p> <ul style="list-style-type: none"> • POW was the highest ranked community based project on the STP's list of priority capital projects. • The SOC had received formal written support from Cambridgeshire and Peterborough CCG and Cambridge University Hospitals NHS Foundation Trust. • The development of the outline business case was underway and would come back to the Board in due course for sign-off. • The SOC would be presented to Cambridgeshire and Peterborough STP Board in February 2021. • More detailed work on the preferred options and associated benefits would be carried out.
6.2	The Board approved the SOC and supported the continuation of the preparation of an Outline Business Case.
7.0	Integrated Governance Report
7.1	Kate Howard introduced the Integrated Governance Report for the reporting period October 2020 and November 2020.
7.2	<p>The key highlights from providing outstanding care section included the following:</p> <ul style="list-style-type: none"> • An incident review for a never event which was reported in the previous report was now completed. • Infection Prevention and Control (IPAC) Board Assurance Framework (BAF) had been updated and was included in the Board pack for noting. • A further Infection Prevention Control guidance was published in November 2020 and had been reviewed internally. Actions to be monitored by the Infection Prevention Control Group. • Over 81% of staff had received the flu vaccine. • Actions from previous report had been incorporated into the report as requested by the Board. • Dr Tamsin Brown, Consultant Community Paediatrician was awarded a British Empire Medal in the New Year's Honours for the inspirational service she had delivered to children and families across Cambridgeshire. <p>Action: to extend the Board's congratulatory message to Dr Tamsin Brown</p>
7.3	<p>In discussion the Board noted that:</p> <ul style="list-style-type: none"> • Key operational risks referenced in the report had been discussed in detail during Clinical Operational Board (COBs) meetings. The COBs were assured on the actions being taken to mitigate the risks. • Staff abuse and challenges faced by staff was reported and discussed at COBs; to be picked up as part of staff survey actions for improvement. • Some issues relating to mass vaccination, for example contacting the public were beyond the Trust's remit. There was need for clarity on roles and responsibilities for the Trust as a Lead Provider and the NHSE/I. Action: Anita Pisani to follow this up with NHSE/I. • Safeguarding – the impact of the pandemic on children and families and to be discussed offline.
7.4	The Board commended all staff involved in flu vaccination.
7.5	The Board noted the Infection Prevention and Control BAF.
7.6	<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.

	<ul style="list-style-type: none"> Trust response to staff survey was 58%. National results to be reported in March 2021. Annual leave – staff were encouraged to take their annual leave. Staff could carry forward up to 10 days.
7.7	<p>Mark Robbins briefed the Board on ‘sustainable organisation’ section of the report. The following points were noted:</p> <ul style="list-style-type: none"> The risk relating to public health funding (risk 3156) was now closed. The Trust remained on track to deliver the financial plan for the year. Cash position had reduced because the Trust had improved its payables position and increased its receivables position over the period to reduce the cash balance. <p>Action: Mark Robbins to check and confirm bank spend colour coding.</p>
7.8	The Board noted the Integrated Governance Report.
7.9	<p>The Board noted the following key headlines from the Learning from Deaths Report:</p> <ul style="list-style-type: none"> Increase in collaborative work across the system during COVID-19 pandemic in particular the Luton area, to improve the way services work together. Positive learning from the Castletroy report. Learning from Child Death Report would be developed in the same style as the Adult one, enabling local and trust wide learning before the broader reviews were concluded. There was need to review the Covid deaths figures for people with learning disabilities in the system.
7.10	The Board noted the Learning from Deaths Report
	Key issues from other Board Sub-Committees
8.	Audit Committee key issues
8.1	The Board received and noted the report from the last Audit Committee meeting held on 11 th January 2021
9.	Infrastructure Committee key issues
9.1	The Board received and noted the report from the last Infrastructure Committee meeting held on 23 November 2020.
10.	Any other Business
10.1	There was no other business discussed.
11	Questions from members of the public
11.1	There were no questions received from members of the public.

Date of next Public Trust Board Meeting: 17th March 2021

Venue: Microsoft Teams