

## MINUTES

### TRUST BOARD PUBLIC MEETING

Wednesday 15<sup>th</sup> July 2020

9.30 – 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
Matthew Winn	Chief Executive
Anita Pisani	Deputy Chief Executive
Mark Robbins	Director of Finance and Resources
Dr David Vickers	Medical Director
Rachel Hawkins	Director of Governance
Julia Curtis	Chief Nurse

#### In Attendance:

Karen Mason	Head of Communications
Lisa Wright	Patient Experience Manager (Item 1)
Mikey	Service User (Item 1)
Fay Westwood	Diabetes Specialist (Item 1)
Angela Hartley	Assistant Director of Workforce (Item 8)
Mercy Kusotera	Assistant Director of Corporate Governance

#### Apologies:

Judith Glashen	Associate Non-Executive Director
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#### Minutes:

<b>1.</b>	<b>Patient Story - Luton Children &amp; Adults Community Health Services</b>
1.1	Lisa Wright, Fay Westwood and Mikey joined the meeting.
1.2	The Chair welcomed Mikey to talk about his experience of how the Desmond course helped him to develop a healthier lifestyle.
1.3	Faye Westwood informed the Board that the Desmond course provided diabetes education for self-management of ongoing and newly diagnosed diabetes patients. The course aimed at empowering patients to look after themselves.
1.4	<p>Mikey talked about the impact of the Desmond course on his life; he highlighted that:</p> <ul style="list-style-type: none"> <li>• He attended the Desmond Course in May 2019, having been diagnosed with Type 2 diabetes. He valued the individual approach of the course.</li> <li>• The course helped Mikey to be in control of his condition; gained in-depth understanding and knowledge of diabetes for example causes of high blood levels and how this could be controlled. He was no longer taking medication.</li> <li>• The course made him aware of the importance of meal times and regular exercises.</li> <li>• Mikey made changes to his diet and daily routines; he currently ran between five and ten kilometres every day. The lifestyle changes had a huge, positive</li> </ul>

	<p>impact on his health and wellbeing.</p> <ul style="list-style-type: none"> <li>• Mikey stated that he would have welcomed some support to keep up his motivation once he was discharged from the service.</li> </ul>
1.5	<p>In discussion the Board noted that:</p> <ul style="list-style-type: none"> <li>• People with lived experience; for example peer mentors and volunteers could provide personalised support for patients. The Trust had other services where volunteers were used to support other people in similar situations. Faye would check whether this would work for Mikey and others in his position.</li> <li>• Patients were encouraged to join total wellbeing services in Luton. Services also made follow up sessions on diabetes patients.</li> <li>• Patients would also benefit from local patient support groups.</li> <li>• It was suggested that Charitable Funds could be used to support volunteers; this would be explored further. <b>Action: To explore whether Charitable funds could be used to support volunteers across the Trust.</b></li> </ul>
1.6	The Board was informed that diabetes services were developed in-house and accessible to non-English speaking patients across Luton community.
1.7	On behalf of the Board, the Chair thanked Mikey for sharing his experience. She highlighted how important it was for the Board to hear and learn from people with lived experience.
<b>2.</b>	<b>Chair's welcome, apologies and additional declarations</b>
2.1	The Chair declared that she was still the vice chair for East London NHS Foundation Trust (ELFT).
2.2	Anita Pisani declared that she was a Trustee for Stars Charity in Cambridgeshire.
2.3	Dr Anne McConville declared that she also worked for Public Health England.
2.4	Apologies were received from Judith Glashen.
<b>3.0</b>	<b>Minutes of previous meeting and matters arising</b>
3.1	The minutes of the meeting held on 20 <sup>th</sup> May 2020 were <b>approved</b> as a correct record of the meeting.
3.2	The Board noted that the next set of minutes would focus on summarising key points and actions.
3.3	<p>The Board <b>received</b> and <b>noted</b> updates from previous meetings. The following additional updates were noted:</p> <ul style="list-style-type: none"> <li>• <i>Action 4.11</i>: It was confirmed that the assurance period from Quality, Improvement and Safety Committee was April to December 2019.</li> <li>• <i>Action 4.19</i>; Colour –coding had been removed from the Integrated Governance Report.</li> </ul>
<b>4.0</b>	<b>Chief Executive Report</b>
4.1	<p>Matthew Winn briefed the Board on progress and key issues, events and activities since the last formal Board meeting. The following key headlines were noted:</p> <ul style="list-style-type: none"> <li>• The Trust had been named the best NHS Trust in England for the second year running for Speaking Up Culture. The national ratings were based on speaking up indicators in the Annual Staff survey results for 2019.</li> <li>• Interviews had been scheduled to appoint a new Chief Nurse; the role would be offered on 12 months secondment. The stakeholder panel included service users and staff. The final panel included a BAME clinician.</li> <li>• Covid-19 transmission continued to be a threat; the Board was reminded to support ongoing work to provide Covid safe premises and clinical practice across the whole Trust.</li> </ul>

	<ul style="list-style-type: none"> <li>The Community network wrote a letter to the Secretary of State for Health and Social Care Secretary of State for Housing, Communities and Local Government concerning the continued tendering of community services during the Covid-19 pandemic.</li> <li>The Board was assured that risks relating to Covid-19 were being monitored; they were reviewed weekly during Incident Management Team meetings.</li> </ul>
4.2	The Board noted that the Trust was working with the local authority and Commissioners to understand how people needed to be deployed in response to a local hot-spot. A differentiated model would be used for each area.
4.3	<p>The following comments were noted during the discussion:</p> <ul style="list-style-type: none"> <li>If a staff outbreak was identified; there was a clear process to be followed.</li> <li>Questions and answer sessions were ongoing. Staff were regularly reminded that the pandemic was not over as yet. Staff should continue to observe social distancing.</li> <li>There would not be an annual event for staff awards this year; services were encouraged to hold divisional celebration events and thank staff in different ways.</li> <li>Services were carrying out quality and equality impact assessment on services which were stood down, changed or done differently due to the pandemic.</li> <li>Importance of protecting staff; this would enable staff to deliver safe care to patients.</li> <li>Communication with patients about changes to services would be handled locally rather than centrally due to the geographical spread of the Trust.</li> <li>Some services had been deprioritised due to the pandemic and mitigation was in place to deliver safe service.</li> </ul>
4.4	<p>In discussion the Board agreed:</p> <ul style="list-style-type: none"> <li>Matthew Winn would update the Board when the results are known re-Community Network letter.</li> <li>To consider how future Board reports could reflect the impact on patients who had been turned away due to Covid-19.</li> <li>To explore ways of limiting the impact if people were waiting for treatment.</li> </ul>
4.5	<p>The Board congratulated:</p> <ul style="list-style-type: none"> <li>The Trust for scoring the highest FTSU scores nationally.</li> <li>Luton Adults for being shortlisted in the Health Services Journal (HSJ) safety awards.</li> </ul>
4.6	The Board <b>received, discussed</b> and <b>noted</b> the Chief Executive report.
<b>5.0</b>	<b>Integrated Governance Report</b>
5.1	Julia Curtis introduced the Integrated Governance Report for the reporting period April 2020 and May 2020.
5.2	<p>The key highlights from providing outstanding care section included:</p> <ul style="list-style-type: none"> <li>Due to Covid-19 non-essential services were suspended in line with the national guidance.</li> <li>The Trust had an overarching risk regarding the potential negative impact to patients and service users due to re-prioritisation of services.</li> <li>FTSU index highlighted a safe culture on raising concerns; it indicated the level of confidence staff and patients had to raise concerns and how the Trust services responded to the concerns raised.</li> <li>Assurance of safe care had been adjusted to reasonable due to gaps identified in the infection prevention and control assurance self-assessments. The roll out of the quality and equality impact assessments had not been completed as yet.</li> </ul>

	<ul style="list-style-type: none"> <li>One serious incident had been declared in Bedfordshire Children services; further details to be provided in the next Integrated Governance Report</li> </ul>
5.3	<p>In discussion the Board noted the following key points from providing outstanding care section of the report:</p> <ul style="list-style-type: none"> <li>A pilot on safeguarding level three training was evaluated by staff and was being rolled out. The impact and quality of training was measured through supervision.</li> <li>Details on pressure ulcers, prevention and actions being taken to ensure harm was limited, were covered during Clinical Operational Boards.</li> <li>The impact of stepping up care (seven day service) on staff varied; some services had stepped down because pressures from the initial stage of the pandemic had stabilised. It was anticipated that some redeployed staff would stay in their new roles.</li> <li>Assurance statements on the Integrated Governance Report were an amalgamation of multiple assurance routes used to provide the Board with assurance on operational delivery of Trust services during the reporting period.</li> <li>Most Board reports outlined the actions taken to address issues but there was less detail on the impact and mitigation of the action.</li> </ul> <p><b>Action: Board reports to capture the impact, mitigation and outcome to provide assurance.</b></p>
5.4	The Board noted positive feedback from the non-executive directors' virtual back to the floor visits. Staff appreciated the support they received from the Executive leadership.
5.5	Anita Pisani briefed the Board on the level of assurance regarding the strategic objective to 'Be an excellent employer.'
5.6	The Board was informed that the Trust had held the first Black, Asian and Minority Ethnic (BAME) network meeting which was attended by about one hundred staff. The network had agreed its terms of reference and would be meeting on a monthly basis in the first instance. Anita Pisani was the non-BAME ally to sponsor the network.
5.7	The Board noted that all staff had been offered a risk assessment.
5.8	<p>In discussion the Board noted that:</p> <ul style="list-style-type: none"> <li>The Trustwide sickness rate had decreased significantly and was below the Trust target. However bank and agency use was still high because some staff were currently shielding and would not be recorded as off sick.</li> <li>The chair of the BAME network would be a member of the Workforce, Diversity and Inclusion group which fed into People Participation Committee.</li> <li>Board members were urged to have a diversity mentor to support diversity across the Trust.</li> <li>The BAME network was not a silo forum and would welcome linking with other groups.</li> </ul>
5.9	<p>Anita Pisani presented 'collaborate with others' section of the report and highlighted that:</p> <ul style="list-style-type: none"> <li>Collaborative measures which were agreed before the pandemic were paused. However there were more system connection conversations taking place during the pandemic.</li> <li>Bedfordshire Local Resilience Forum Health and Social Care was jointly chaired by Anita Pisani and the Deputy Chief Executive of ELFT.</li> <li>Anita Pisani and the Chair had attended Bedfordshire, Luton and Milton Keynes (BLMK) partnership board on 3<sup>rd</sup> July 2020 on behalf of the Trust. A new independent chair had been appointed for the partnership.</li> <li>Positive feedback was received from recent conversations on how leaders</li> </ul>

	<p>could support the Bedfordshire Care Alliance and ensure there was clarity about the vision and overarching ambition.</p> <ul style="list-style-type: none"> <li>As part of 'Provider Collaboration Review' across the country, the Care Quality Commission (CQC) had reviewed the Luton Adult services. The feedback was positive.</li> <li>Most research work was currently paused nationally.</li> </ul>
5.10	Mark Robbins presented 'sustainable organisation' section of the report and noted that the assurance summary of the section had not been updated. <b>Action: To update the assurance summary re – sustainable organisation.</b>
5.11	<p>The Board noted the following key headlines from sustainable organisation section:</p> <ul style="list-style-type: none"> <li>The financial position of the Trust was favourable.</li> <li>Cost Improvement Plans had been paused.</li> <li>Cash-flow higher than plan.</li> <li>All contract KPIs had been suspended due to Covid-19 pandemic.</li> <li>Luton Borough Council had held an emergency funding meeting on 14<sup>th</sup> July 2020.</li> </ul>
5.12	The Board <b>noted</b> the Integrated Governance Report.
<b>6.</b>	<b>Key issues from other Board Sub-Committees</b>
	<u>People Participation Committee key issues</u>
6.1	<p>Fazilet Hadi reported on the last People Participation Committee meeting held on 1<sup>st</sup> July 2020. The Board noted the following key points;</p> <ul style="list-style-type: none"> <li>The Committee had agreed to develop a more streamlined programme of reporting that tracked objectives for a number of requirements for example EDS2</li> <li>There was a plan to involve patients in working together corporate groups, for example in Trustwide Working Group.</li> <li>The Committee had received and discussed the four objectives for Equality Delivery System for 2020/21. The objectives were recommended to the Board for approval.</li> </ul>
6.2	The Board <b>approved</b> the four objectives for Equality Delivery System for 2020/21.
	<u>Quality Improvement and Safety Committee (QISCO) key issues</u>
6.3	<p>Dr Anne McConville briefed the Board on the last QISCO meeting highlighting the following:</p> <ul style="list-style-type: none"> <li>The Committee had received a number of annual reports for approval.</li> <li>A detailed discussion on Learning from Deaths Report was held.</li> <li>The Quality Account was out for commenting prior to external circulation to mandated stakeholders.</li> <li>Trustwide Ethics Group had been established during the pandemic to consider any issues that had been raised.</li> <li>Non-Executive Director Quality leads across Cambridge and Peterborough STP met virtually to share experience.</li> </ul>
	<u>Extraordinary Audit Committee key issues</u>
6.4	The Board was informed that the Trust Accounts for 2019/20 were approved at the Extraordinary Audit Committee meeting held on 19 <sup>th</sup> June 2020. On behalf of the Board, Geoff Lambert commended Mark Robbins and the team for successfully producing the reports and accounts.
6.5	<p>The Board was informed that the Trust was in the process of appointing new auditors because the previous auditors had decided not to pursue a further term with the Trust. During its meeting held on 13<sup>th</sup> July 2020, the Audit Committee:</p> <ul style="list-style-type: none"> <li>Received and discussed the revised Board Assurance Framework.</li> <li>Agreed internal audit plan for 2020/21.</li> <li>The Committee was assured that items which had been paused due to Covid-19 pandemic were being monitored.</li> </ul>

6.6	The Board <b>received</b> and <b>noted</b> Board sub-Committees reports.
<b>7.</b>	<b>Learning from Deaths Quarterly Report</b>
7.1	Dr David Vickers presented the report which had been discussed in detail by the QISCO.
7.2	The following key points were made in discussion: <ul style="list-style-type: none"> <li>• Covid-19 deaths should be taken as a separate category of deaths.</li> <li>• A review of anticipatory prescribing showed good practice in end of life planning.</li> <li>• Data in the report confirmed that patients were given the opportunity to discuss their preferred place of death.</li> <li>• The National Rapid Survey of Childhood Suicide showed indications of increased number of young people committing suicide nationally during Covid-19.</li> <li>• Early intervention and mental health support was important; ongoing work focussed on emotional and wellbeing in Cambridgeshire and Peterborough should also focus on supporting children.</li> </ul>
7.3	The Board <b>noted</b> the report and <b>agreed</b> that the next report should: <b>Provide additional assurance re – areas where the Trust was able to provide mental health support and where there could be gaps.</b>
<b>8.</b>	<b>Bi-annual Workforce Review</b>
8.1	Anita Pisani summarised the context of the report noting that the report should be presented to the Board twice a year; normally in May and November. Due to Covid-19 the timing of the report had changed.
8.2	Angela Hartley presented the bi-annual workforce review report highlighting the following key areas: <ul style="list-style-type: none"> <li>• Details on workforce KPIs including sickness levels were also discussed during the Clinical Operational Boards.</li> <li>• Workforce planning had been ongoing – conversations were held with service leads in April and May.</li> <li>• The Trust continued to commission future workforce supply through the normal education routes.</li> <li>• There was a potential challenge regarding student placements due to Covid-19 pandemic.</li> <li>• The Trust continued to support staff during the pandemic; risk assessments for staff were a key area of focus from the outset. Staff were supported to work remotely where possible.</li> <li>• The workforce team worked closely with clinical psychologists to provide psychological support to staff.</li> <li>• Mandatory training requirements were relaxed to give people time to focus on other things they were expected to do during the pandemic.</li> <li>• In the absence of face-face induction, new staff were inducted virtually.</li> </ul>
8.3	In discussion the Board noted that: <ul style="list-style-type: none"> <li>• Apprenticeship provided opportunity for people to join the workforce; however there were other opportunities which could be offered to create career pathways and offer new routes into employment</li> <li>• The Trust was exploring how the work experience programme could be enhanced to attract young people.</li> <li>• The Trust currently had volunteers with 'lived experience' supporting various services. However, other Trusts paid people to be peer mentors; this needed to be explored.</li> </ul>
8.4	The Board agreed the following: <b>To review the case for introducing paid peer mentors to the workforce. Capture any learning from comments on career progression and encourage</b>

	<b>staff to develop their career within the Trust. To provide more assurance re- apprenticeship arrangements.</b>
<b>9.</b>	<b>Diversity and Inclusion Annual Report</b>
9.1	Anita Pisani briefed the Board on the annual report highlighting the outcomes of the Trust Diversity and Inclusion performance for 2019/20 and the proposed local Equality Objectives for 2020/21. A detailed discussion on EDS2 was held during the People Participation Committee meeting held on 1 <sup>st</sup> July 2020.
9.2	The Board was informed that the EDS2 outcomes of the nine protected characteristics would be a theme for Trustwide Working Together groups. Service users would be involved in those conversations. The outcomes would be captured on a quarterly basis throughout the year.
9.3	The Board <b>received</b> and <b>noted</b> the Annual Report.
<b>10.</b>	<b>Freedom to Speak Up Annual Report</b>
10.1	Anita Pisani presented the report which provided an overview of the Freedom to Speak Up processes during 2019/20 and plans for 2020/21.
10.2	The Board was informed that the Trust Whistleblowing policy had been revised to incorporate feedback from staff.
10.3	The Board: <b>Received</b> and <b>noted</b> the annual report <b>Approved</b> the revised Whistleblowing policy
<b>11.</b>	<b>Any other Business</b>
11.1	The Board agreed the following: <b>To have a broader Board discussion on Digital Infrastructure in September 2020</b> <b>To consider the potential impact on the Trust of reductions to local authority funding in the light of Covid-19.</b>
<b>12.</b>	<b>Questions from members of the public</b>
12.1	There were no questions received from members of the public.

*Date of next Public Trust Board Meeting: 16<sup>th</sup> September 2020*  
*Venue: Microsoft Teams*