

Trust Board Meeting in Public

Date: Wednesday, 20 May 2026

Time: 10:30 to 11:00 and 13:00 to 15:20

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

Members:

Lynda Thomas	Trust Chair [Chair]
Charlotte Black	Non-Executive Director
Sarah Buchan	Chief Information Officer
Laura Clear	Director of Strategy and Transformation
David Crawford	Non-Executive Director
Anna Gill	Non-Executive Director
Rachel Hawkins	Director of Corporate Affairs
Kate Howard	Chief Nursing and Allied Health Professional Officer
Dr Caroline Kavanagh	Chief Medical Officer
John Kennedy	Non-Executive Director
Angela Moodie	Chief Finance and Resources Officer
Anita Pisani	Chief People Officer and Deputy Chief Executive
Jayne Sharma	Associate Non-Executive Director
Matthew Winn	Chief Executive Officer

In Attendance:

Sarah Feal	Company Secretary and Freedom to Speak Up Guardian
------------	--

Apologies:

Mani Sharma	Non-Executive Director
Njoki Yaxley	Non-Executive Director

Minutes

-	Patient Story
	Mallory's experience with autism diagnosis and speech and language therapy was shared, detailing delays, barriers, and the positive impact of school-based support. The current speech and language therapy model in Cambridgeshire was explained, highlighting the shift to school-based support, flexible intervention, and collaborative planning with schools, parents, and therapists. Every primary school in Cambridgeshire is assigned a named speech and language therapist, aiming for consistency and strong relationships. Therapists work in localities, and a county coordinator oversees school allocations and caseloads. The model includes termly planning meetings between therapists and schools to discuss new referrals, existing caseloads, and areas where school training can support needs. These meetings help tailor support and ensure children receive appropriate interventions. Support is provided based on individual needs rather than Education, Health and Care Plan provision, with therapists offering weekly or less frequent sessions as required. The approach is not time-limited, and therapists are autonomous in their work. The importance of collaboration, with parents, therapists, and schools working together to identify needs and implement strategies was highlighted, and regular communication with parents after appointments to adapt interventions based on progress. The national Special Educational Needs and Disabilities reform and 'experts at hand' funding will enhance the current model, aiming for sustainability and improved engagement with schools. The funding is expected to address gaps, especially in early years and secondary education. The importance of relationships with schools for effective speech and language support, addressing system-level barriers, the autonomy of academies, and strategies for engaging schools and parents was discussed. Concerns were raised over the issue of long waiting times for diagnosis, the role of school-based therapy in supporting children while they wait, and the approach of providing intervention regardless of diagnostic status. Questions about managing demand for speech and language services, balancing individual and group needs, and ensuring equitable access regardless of diagnosis were addressed. The Trust Board noted the update.

1.0	Welcome and apologies
1.1	The Chair welcomed all attendees to the meeting, and apologies for absence were noted as recorded above.
2.0	Disclosure of interests
2.1	Members confirmed that they had no additional declarations of interest in respect of the items on the agenda. The Trust Board confirmed the Register of Interests was accurate.
3.0	Minutes of the previous meetings and matters arising
3.1	The minutes of the meetings held 18 March 2025, and 1 April 2026 were approved as accurate records.
4.0	Review of action tracker
4.1	It was confirmed that there are no outstanding actions on the Board tracker. The Trust Board noted the update. No further matters were raised.
5.0	Chair's Update
5.1	The Chair highlighted recent and upcoming engagements with key figures, including attending a session at the House of Lords, arranging visits with NHS England, and planning a visit to Luton with the new Chief Executive of NHS Alliance. These activities are part of ongoing efforts to strengthen relationships and share the Trust's progress. The Trust Board noted the update.
6.0	Chief Executive Officer's Report
6.1	The Chief Executive confirmed the board had formally agreed to activate the Advanced Foundation Trust application, with the process culminating in a board-to-board meeting with national colleagues scheduled for early July. Directors required for the July meeting are being identified, and relevant dates are being held in preparation for the national review and hopeful approval. The Trust fully supports the Government's objectives to eradicate modern slavery and human trafficking, recognising the important role it plays in preventing exploitation and supporting individuals who may be affected. The Trust Board reviewed and approved the modern slavery and human trafficking statement for 2026-27.

7.0	Freedom to Speak Up Annual Report
7.1	The Freedom to Speak Up Guardian introduced the annual report, highlighting a mature and well-embedded framework, stable case numbers, and ongoing cultural priorities post-merger, with the board approving the report and discussing follow-up processes, new guardian appointments, and the importance of psychological safety. During 2025-26, 65 Freedom to Speak Up cases were reported, with attitudes and behaviours being the most common theme raised, which is consistent with national trends. The Trust maintains high compliance with mandatory speak up training. ACTION: To invite the new Freedom to Speak Up Guardian to meet the Trust Board for introductions and engagement and to develop and implement a simple metric to measure whether Freedom to Speak Up cases are resolved to the satisfaction of the individual raising the concern. The Trust Board noted the update.
8.0	People Priorities Update
8.1	The Chief People Officer provided a comprehensive update on workforce metrics, staff survey improvement actions, and ongoing efforts to support staff wellbeing, manage sickness and turnover, and address challenges arising from organisational change, with board members discussing targets, local variations, and the importance of sustainable improvement. The sickness absence target was adjusted to 5.5% to reflect current realities, and the importance of tracking both quantitative and qualitative aspects of appraisals was emphasised. Five trust-wide staff survey improvement actions were identified, focusing on enhancing appraisals, reducing bullying and harassment (especially for culturally diverse staff), supporting staff with long-term conditions, increasing promotion opportunities for diverse staff, and improving staff health and wellbeing. These actions are being tracked and reported through the People Participation Equalities Committee. Turnover rates are below the 12% target, and it was confirmed that exit data is regularly reviewed to identify reasons for leaving, with particular attention paid to factors within the Trust's control, such as working relationships. The impact of organisational change on staff morale and engagement was discussed, with risks identified in the board assurance framework. Support services are at different stages of integration, and efforts are being made to address skills gaps and provide training where needed. The board is monitoring the situation and considering additional support as required. Progress on cascading trust-wide objectives through teams and updating the Electronic Staff Record was discussed, with 33% completion reported by mid-May and a target for full completion by the end of June. Differences in process adoption between legacy organisations are being addressed through support and reminders.

	The Trust Board noted the progress against the annual plan for 2026-27.
9.0	Equality, Diversity and Inclusion Annual Report
9.1	The Chief People Officer introduced the annual Equality, Diversity and Inclusion annual report, confirming compliance with statutory duties and outlining new objectives for 2026-27, with board members approving the objectives and requesting more measurable targets and ongoing updates on inclusion initiatives and cultural competency training. Plans are underway to roll out cultural competency and inclusive leadership training across the organisation, with an inclusion plan being developed to support this initiative. The Trust is moving away from anti-racism language towards a broader inclusion focus. Open space sessions have been well received, particularly by culturally diverse staff, and further sessions are planned to address a wider range of inclusion issues. Board members were encouraged to participate in staff networks to better understand staff experiences and challenges. The Trust Board approved the equality objectives for 2026-27.
10.0	Integrated Governance and Performance Report
10.1	The executive team introduced the Integrated Governance performance report, highlighting stable incident profiles, ongoing challenges with pressure ulcers, medicines management, safeguarding, infection prevention, and the need for improved patient feedback, with board members discussing action plans, risk management, and the importance of clear targets and monitoring. Significant progress has been made in reducing the Neurodevelopmental Disorders waiting list, with a plan to clear the backlog over the next two years and achieve less than 82 weeks' wait by April 2028. Insourcing and targeted actions have improved staff morale and service delivery. Audiology, dietetics, dentistry, and wheelchair services have smaller numbers of long waits, with specific action plans in place to address these. Workforce challenges and external factors, such as theatre availability for dental procedures, are being managed through ongoing engagement and resource allocation. The board agreed to implement clear trajectories and regular reporting for all services breaching 52-week waits, with a focus on both reducing long waits and improving overall compliance with national targets (e.g., 78% within 18 weeks). The board discussed the importance of clear definitions of harm, particularly in public reporting, and the need to balance meeting new national targets with managing demand and resource constraints.

	The Chief Finance and Resources Officer provided an update on the Trust's financial position, reporting healthy cash reserves, successful achievement of year-end plans, and ongoing efforts to address contract and funding challenges, with the board discussing the implications for future financial sustainability and risk management. Both trusts achieved their financial plans, receiving additional funding from NHS England and ending the year with a collective surplus of £3.2 million, which has been added to reserves pending further freedoms under Advanced Foundation Trust status. The Trust holds a strong cash position, with £49 million combined at year-end. Efforts are ongoing to address contract signing delays, particularly with local government funders, and to improve cash flow forecasting and management. A new financial risk has been raised regarding the deconstruction of block funding from April 2027 and the review of nursing rules. External audits are underway with no issues identified so far, and the board is monitoring these risks through the Finance and Infrastructure Committee. The Trust Board discussed the report and agreed the rating of reasonable assurance.
11.0	Audit and Risk
11.1	The Chair introduced the report highlighting that both audits are progressing on time and that there were no matters of escalation to report. The Trust Board noted the update.
12.0	Trust Board Assurance Framework
12.1	The Director of Corporate Affairs led a discussion on the board assurance framework, outlining updates to strategic risks, the process for tracking actions towards risk mitigation, and the debate over whether long service waits should be included as a board-level risk, with the board agreeing to review and refine the framework further. The board assurance framework has been refreshed to align with the new strategy and annual plan, with updates on closed and new risks. Further work is planned to detail actions required to achieve target risk levels, and the framework will continue to be reviewed at each board and committee meeting. The board debated whether long waits in services other than neurodevelopmental should be included as a board-level risk, concluding that only the largest and most persistent issues warrant this status, while others are managed through active plans and committee oversight. The Trust Board discussed the report and agreed the rating of reasonable assurance.

13.0	Questions from Stakeholders
13.1	There were no questions received.
14.0	Any Other Business
14.1	There were no matters raised.
-	Date, time and location of next meeting
	The meeting closed at 15:20, Date of next meeting: 22 July 2026 Location: Units 7-8 Meadow Park, Meadow Lane, St Ives PE27 4LG