

Trust Board Meeting in Public

Date: Wednesday 26 March 2025

Time: 13:00 pm – 16:20 pm

Location: 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
Dr Caroline Kavanagh	Medical Director
Anita Pisani	Deputy Chief Executive
Mark Robbins	Director of Finance and Resources
Gary Tubb	Non-Executive Director
Matthew Winn	Chief Executive

In Attendance:

Sarah Feal	Trust Secretary and Freedom to Speak-up Guardian (Minutes)
Lea Fountain	Associate Director of Communications

Apologies:

Aliyyah-Begum Nasser	Non-Executive Director
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Minutes

1.0	Staff Story: Impact of our Retention Programme
1.1	<p>Jenny Williams and Melanie Hayes presented the work that they had been leading to deliver the NHS People Promise.</p> <p>Key achievements highlighted:</p> <ul style="list-style-type: none"> ▪ Developed careers recruitment microsite ▪ Monthly open recruitment webinar for potential candidates ▪ Launch of Induction padlet ▪ Stafftrack – local survey which tracks throughout the employee journey ▪ Intensive team development support. ▪ Managers and staff introduced to Health and Wellbeing materials and conversation template ▪ Developed administration development toolkit ▪ Retention guides for managers and staff developed ▪ Completion rate for service increased from 39% to 62% in 2024 National Staff Survey <p>Work is now underway to embed this as part of the culture for teams.</p> <p>Key lessons learned are:</p> <ul style="list-style-type: none"> ▪ Taking the staff survey results to a front-line level with intense support increases engagement in staff survey. ▪ Building a strong and trusting relationship with service lead, coaching, empowering and supporting service lead gaining their buy-in and commitment to implement and continue to see benefits of the programme. ▪ Information and resources that we have, become more accessible when shared and discussed in local teams. <p>The Trust Board congratulated the team for the work and noted the update.</p>
2.0	Welcome, apologies, and Register of Interests
2.1	The Chair welcomed all to the meeting. Apologies were noted for Aliyyah-Begum Nasser, Non-Executive Director.
2.2	<p>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.</p> <p>Catherine Dugmore declared a potential interest as Chair of West Herts. Hospital. The Trust Chair agreed they could remain in the meeting.</p>

3.0	Minutes of previous meeting and matters arising
3.1	The minutes of the meeting held on 29 January 2025 were approved as an accurate record.
3.2	<p>The action points from previous meetings were reviewed and the following confirmed as complete:</p> <p>5.0 Mid-Year Update on Trust Strategic Ambitions – September 2024: Progress has been made within individual teams in integrating feedback processes within the clinical contact. This topic was the focus of the last Trust wide Patient Outcome Measures Community of Practice, where the Norfolk Healthy Child Service shared learning about using goal setting as a feedback tool for identifying reasonable adjustments within the consultation. The Trust wide Patient Outcome Measures programme will continue with disseminating this approach, led by the Research team. Initial meetings have also taken place to join up the programmes of work in both Trusts focused on patient outcome measures and feedback tools.</p> <p>6.4 (I) Integrated Governance Report: The Trust Chair had written to all relevant teams.</p> <p>The Trust Board agreed to transfer action 6.4 (II) to the Group Trust Board as this is due in July 2025.</p> <p>The Trust Board noted the update. No further matters were raised.</p>
4.0	Chair's update
4.1	<p>The Chair provided the board with an update on a visit to the integrated discharge team at the Luton and Dunstable hospital. The team worked well together and emphasised place of death and commitment to families, which were managed well.</p> <p>Anna Gill had attended 'QI Fest', and reported the day was very inspiring and uplifting. Presentations on human behaviour were well received.</p> <p>The Trust Board noted the update.</p>
5.0	Trust Ambitions 2023-26
5.1	<p>The report was introduced which is a six-monthly high-level overview of how the Trust is performing in carrying out delivery of the Ambitions and strategic objectives. The two amber ratings were looked at in detail, in particular, Ambition 11; the Trust's sites having a community value and usage plan in place and Ambition 4; that all services are tied into formal partnerships that improve outcomes for local people.</p> <p>Ambition 1 regarding services being inclusive and easy to access were discussed, and it was felt that describing the score as 100% is over ambitious.</p>

	<p>It was highlighted that the team are focusing more now on the quality of the visit, as opposed to the raw data. It was also acknowledged that these were the 4 actions chosen which were decided by the Trust Board, and it was agreed that the score of 100% was reflective of the 4 actions achieved. A small typo was highlighted on page 31, the year should be amended to 2024-25.</p> <p>The members were asked to receive this report for decision-making and to agree that Table 2 is a reasonable assessment of progress to date and a forecast of likely success at the end of 2025-26, whilst acknowledging that some would not be achieved in the next year.</p> <p>The Trust Board noted the update and agreed the assessment rating of reasonable.</p>
<p>6.0</p>	<p>National NHS Staff Survey Results 2024</p>
<p>6.1</p>	<p>The report was introduced, and it was highlighted that the responses of 62% had increased by 8% and significant improvement had also been made in underrepresented staff groups from the previous year.</p> <p>The Trust is the best performing Community Trust in eight of the nine areas of the NHS People Promise. A continuous improvement has been made. Special attention is being given to the sexual harassment, and overall diversity and equality questions. Improvement had also been made on staff recommending the Trust as a place to work and to receive treatment, which is notable.</p> <p>The Workforce Disability Equality Standards were discussed, and the reasonable adjustments score has increased, due to interventions, for example, access to work and passports for staff. Work continues with the Disability network to identify further opportunities for improvement.</p> <p>The Executive team were congratulated for their hard work and achievement.</p> <p>The Trust Board noted the update and agreed the overall assurance rating substantial.</p>
<p>7.0</p>	<p>Chief Executive's Report</p>
<p>7.1</p>	<p>The Chief Executive introduced the report and thanked the outgoing Board members for their work.</p> <p>The Trust Board noted the update and approved the delegation of the preparation of the annual report and accounts and submission to NHS England to the Chief Executive Officer and the Director of Finance and Resources. Final approval and sign off is reserved to the Trust Board.</p> <p>The Trust Board approved the Provider Assurance Statement.</p>

8.0	Annual Budget 2025-26
8.1	<p>The proposed annual revenue budget for 2025-26 was introduced. The NHS financial planning framework has been used and informed from the current years outturn position and the following national planning assumptions for costs have been used:</p> <ul style="list-style-type: none"> ▪ Gross impact of Cost Uplift Factor = 4.15%, inclusive of agenda for change pay award, increase in Employer’s National Insurance contribution and non-pay inflation. ▪ Implied Efficiency of 2%. <p>There have been no uplifts in local authority budgets currently, however, negotiations for contract values are still happening.</p> <p>A balanced plan will be submitted to NHS England on 27 March following Trust Board approval. A Board Assurance Framework risk will be added and monitored, as per previous years and both quality and equality impact assessments will be carried out.</p> <p>To deliver the plan for 2025-26 the Trust is required to deliver cost and income efficiencies totalling £8.6m, or 4.7% of its expenditure budget.</p> <p>A query was raised regarding prioritisation decisions in the Provider Assurance Statement template, and it was explained that this was an Integrated Care Board template, and it was more relevant for acute Trusts. An amendment was requested to the additional comments ‘Change Improvement Plans’ to ‘Change Improvement Targets’.</p> <p>The Trust Board approved the following:</p> <ol style="list-style-type: none"> a. Draft Revenue Budget for 2025-26. b. Efficiency target required to deliver a balanced budget.
9.0	Integrated Governance Report
9.1	<p>The Trust Board received the report and reviewed the assurance summary for each objective the period December 2024 and January 2025. The report included the Clinical Operational Boards’ (Adults and Children & Young People) Key Matters and Escalations Reports.</p> <p>The Children & Young People’s report provided reasonable assurance, and the Adults and Ambulatory reports provided substantial assurance for Luton and Bedfordshire Adult services and Dynamic Health, and reasonable assurance for Integrated Contraception and Sexual Health and Dentistry.</p> <p>There are currently no risks scoring 15 above for this reporting period and all those 12 and above were reported, as per the usual risk management processes through committees. There were 9 issues scoring 4 and above.</p> <p>The Secretary of State for Health and Social Care visit was highlighted.</p>

An overall rating of substantial **assurance** was recommended and the rationale for this was provided in each chapter.

The following points were highlighted:

Provide Outstanding Care

Substantial assurance was provided for the indicators of safe, caring, effective and responsive.

- There has been a reduction in medication incidents, and an improvement made in overdue incident reporting.
- There were 263 patient safety incident cases of which 94% are either low or no harm. The moderate harm cases have been looked at in detail to identify learning and improvement. Staff are supported in incident management and a new violence and aggression tool is in place.
- A reduction has happened in insulin injection incidents and patients are being empowered do self-administer these.
- The antimicrobial framework is in the Document Library for the Trust Board. There are currently four themes where the Trust scored partially compliant, and work is underway to improve this.
- The board were advised that there are education and training activities happening with parents and clinicians to reduce the need for antibiotic prescribing.
- The Information Governance Toolkit has been updated and an expected level of achievement scored.
- The Quality team investigated low-level and no harm incidents and approved the recommendations from the report at the Quality Improvement Group.
- There has been a reduction in waiting lists in dynamic health services and there are no waiting lists for the Integrated Contraception and Sexual Health services. There has been a small increase in waiting lists for children's services except for the Speech and Language Therapy service.
- There have been no referrals to the Parliamentary and Health Service Ombudsman in the period.
- The Trust has been acknowledged as taking the highest number of calls from ambulance services in the East of England.

Be an Excellent Employer

Reasonable assurance was provided for safe, and substantial assurance for effective and well led.

- There is a continued focus on employee sickness rates and there are some complex cases. Confirmation was given that a forensic focus was being made on absence management, and it was noted the Trust is not an outlier amongst its peers.
- Agency and bank spend remains below target.

	<p>Be Sustainable</p> <p>Reasonable assurance was provided for well led.</p> <ul style="list-style-type: none"> ▪ The Trust is forecasting to 'break-even' and is on target for delivery of its efficiency programme target. ▪ Contract values are being finalised with local authority commissioners. ▪ The Capital programme in Wisbech is nearly completed. <p>The themes from Learning from Deaths were discussed, and the results from the review into the preferred place of death. It was noted that patients were able to die in their preferred place of death at least 85% of the time, which has a continued emphasis, for example, making sure staff are keeping information up-to-date and preferences are accurately documented when people change their mind. Obesity, epilepsy and dementia are key themes as a leading cause of death. Disability and reasonable adjustments were queried regarding how this is recorded. It was acknowledged that there is currently not enough valuable information on this, which is being looked at to improve this.</p> <p>It was agreed the co-production leads could work with families to identify any barriers and themes, which will be added to the current action plan.</p> <p>The Trust Board agreed the overall assurance rating of substantial.</p>
<p>10.0</p>	<p>Equality, Diversity and Inclusion</p>
<p>10.1</p>	<p>The Equality, Diversity and Inclusion Annual Report was presented.</p> <p>The Equality Delivery System has had a small increase in the possible score across the three domains.</p> <p>The cultural inclusion training was mentioned, and it was acknowledged that work is underway to align the work with Norfolk Community Health and Care NHS Trust in the forthcoming year.</p> <p>The Trust Board:</p> <ul style="list-style-type: none"> ▪ Noted the Equality Delivery System Report Domain outcome ratings for 2024-25, which had been published in line with the publication deadline. ▪ Approved the proposed Objectives for 2025-26 recommended by the People Participation and Equalities Committee. ▪ Noted the progress update towards the NHS England Equality, Diversity, and Inclusion Improvement Plan - 6 High Impact Actions. ▪ Noted the progress update towards the Workforce Disability Equality Standards, Workforce Race Equality Standards and Gender Pay Gap. ▪ Noted the progress on delivery of our year 2, 2024-25 Anti-Racism Plan and approved the year 3 plan.

11.0	Charitable Funds Committee
11.1	<p>The Committee Chair confirmed that there were no matters that required escalation to the Trust Board.</p> <p>Key points to note:</p> <ul style="list-style-type: none"> ▪ Dreamdrops continue to do an amazing job. ▪ The Trust had met with the Friends of North Cambridgeshire Hospital to discuss their plans for the next two years as they have indicated that they would be “disbanding”. Proposals to identify any final material investment opportunities (up to the sum of £0.5million) were being worked up with the priority of delivering over the next few months. <p>The Trust Board noted the report.</p>
12.0	Infrastructure Committee
12.1	<p>The Committee Chair confirmed that there were no matters that required escalation to the Trust Board.</p> <p>Key points to note:</p> <ul style="list-style-type: none"> ▪ Work continues to mitigate cyber risk. ▪ Additional investment for energy efficiency improvement has been received. <p>The Trust Board noted the report.</p>
13.0	Audit Committee
13.1	<p>The Committee Chair confirmed that there were no matters that required escalation to the Trust Board.</p> <p>Key points to note:</p> <ul style="list-style-type: none"> ▪ The Head of Internal Audit Opinion is on track to be delivered, and a positive opinion expected as in previous years. ▪ The national standards for the Data Security Protection Toolkit have increased. <p>The Trust Board noted the report.</p>
14.0	People Participation and Equalities Committee
14.1	<p>The Committee Chair confirmed that there were no matters that required escalation to the Trust Board, however, wanted to thank colleagues for their support.</p>

	<p>Key points to note:</p> <ul style="list-style-type: none"> ▪ The Anti-Racism plan review for the previous year and the year-3 plan. ▪ The Patient Involvement Partners were providing valuable support to the committee. ▪ Engagement is being re-visited. ▪ Good work is being done to make buildings accessible, for example, hearing loops and videos of clinic layouts. ▪ Questions will now be circulated in advance to potential job applicants ahead of interview stage. <p>The Trust Board noted the report.</p>
15.0	Board Assurance Framework
15.1	<p>The Trust Board reviewed the full Board Assurance Framework and following this review, there were now 12 strategic risks on the Assurance Framework, three new risks have been added in the last reporting period relating to leadership capacity and stakeholder buy-in for delivery of the agreed Group arrangements. There are 53 open risks on the risk register and all 16 risks scoring 12 or above are seen reported through all the committees and through the committee reports.</p> <p>There are currently 30 issues, 8 scoring 4 and above on the issue register.</p> <p>Having reviewed and considered the Trust Board and Committee papers they had received, members confirmed that the Board Assurance Framework accurately reflected the main risks currently facing the organisation, and agreed they would continue to horizon scan and raise emerging risks.</p> <p>The Trust Board agreed the overall assurance rating of substantial.</p>
16.0	Building Trust Programme
16.1	<p>The Trust Board reviewed the documents for the Group Trust Board arrangements, which had been circulated ahead of the meeting, and:</p> <ul style="list-style-type: none"> ▪ Endorsed the draft Strategic Business Case and recommend that the Group Trust Board approves the Case for submission to NHS England. ▪ Approved the Governance Manual and recommend that the Group Trust Board adopts this. ▪ Approved the Fit and Proper Person Test Framework Policy and recommend that the Group Trust Board adopts this. ▪ Approved the Partnership Agreement and recommend that the Group Trust Board adopts this. <p>The vision statement will be improved for the Strategic Business Case and a new vision will be developed for the new Trust.</p>

17.0	Any Other Business
17.1	<p>There were no matters raised. The Chair and other participants expressed their gratitude and appreciation for the departing board members acknowledging their valuable work and wished them well in future endeavours.</p> <p>The Trust Chair was also thanked for her outstanding commitment to the Trust, and the board acknowledged the positive impact and significant contribution her leadership and guidance had brought to the organisation.</p>
18.0	Questions from members of the public
18.1	There were no questions raised.
<p>The meeting closed at 16:20 Date of next meeting in public: 1 April 2025</p>	

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