



Meeting: Trust Board Meeting in Public

Date: Wednesday, 31 January 2024

Time: 09.30 – 11.30

Venue: Hampden Lecture Theatre and live streamed to the public

## **MINUTES**

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Mr D Highton (DH) Trust Chair

Mr R Bhasin (RB) Chief Operating Officer

Ms K Bonner (KB) Chief Nurse

Mr J Evans (JE) Chief Finance Officer

Mrs N Frayne (NF) Non-Executive Director (via MS Teams)

Mrs N Gilham (NG)

Mr J Lisle (JL)

Dr L Llewellyn (LL)

Mr N Macdonald (NM)

Mr A McLaren (AM)

Mon-Executive Director

Non-Executive Director

Chief Executive Officer

Chief Medical Officer

Mr T Roche (TR)

Non-Executive Director

# Non-Voting Members:

Mr D Dewhurst (DD) Chief Digital Information Officer
Dr A Hayter (AH) Associate Non-Executive Director

Mrs H Hornby (HH)

Miss S Lewis (SL)

Mrs B O'Kelly (BOK)

Ms A Williams (AW)

Board Affiliate

Board Affiliate

Chief People Officer

Chief Commercial Officer

#### In attendance:

Miss J James (JJ)

Mrs E Jones (EJ)

Mr M Fernandez (MF)

Trust Board Business Manager

Senior Board Administrator (minutes)

Deputy Chief Nurse (observing)

Mrs H Brown (HB) Patient Experience Improvement Manager (for agenda item 3)

Ms Georgina Thorne (GT)

Lead Nurse Acute Paediatrics (for agenda item 3)

Ms Tracey Underhill (TU) Lead Freedom to Speak Up Guardian (for agenda item 19)

#### 01/01/24 Welcome, Introductions and Apologies

The Chair welcomed everyone to the meeting, noting this was the last meeting Ali Williams would be attending prior to leaving the Trust.

Apologies had been received from Elaine Siew, Associate Non-Executive Director.

#### 02/01/24 Declarations of Interest

None

#### 03/01/24 Patient Story

KB introduced Maya, her mother and therapy dog who had joined the meeting to share her reflections on her experiences of the Trust when she had been admitted as a paediatric patient.

Maya provided feedback back that staff lacked confidence to engage and support her. Following this, colleagues worked in partnership with Child and Adolescent Mental Health Service (CAMHS) to make improvements. Changes were made to the way children and young people are cared for

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including the innovative use of therapy dogs and when Maya was next admitted, her experience was more positive.

The Board discussed the experiences of Maya and noted the following:

- Work was ongoing in the Care Groups to transfer the learning to adult services.
- Work was continuing to improve the transition from children to adults' services across all pathways.

The Chair thanked Maya for sharing her story.

## 04/01/24 Minutes of the last meeting

The minutes of the meeting held on 29 November 2023 were **APPROVED** as a true and accurate record.

## 05/01/24 Actions and Matters Arising

The Action Matrix was NOTED.

## 06/01/24 Chief Executive's Report

NM referred to the submitted report and highlighted the following points:

- The progress on delivering the Trust Strategy recognising the successful planning day with system partners in designing the clinical strategy noting the group were meeting again mid-February once data analytics were available to aid decision making.
- Thanks were expressed to the clinical team and AM for their work around receiving the elective care kite mark.
- Thanks were given to colleagues involved in the safeguarding inspection.
- Thanks were expressed to Ali Williams for her work over the last five years at the Trust as Chief Commercial Officer.

In response, members of the Board discussed and raised the following points:

- Industrial action had resulted in loss of income and activity and fatigue for colleagues who
  were being supported however cover provided was good and there were no patient safety
  concerns.
- The Trust was an anchor institution regarding healthy communities and was working to promote healthy activity for colleagues and schools and included the research teams work on cholesterol and achieving Net Zero.
- The great stories in the CARE Awards were highlighted.
- The Trust's clinical strategy was linked with the BOB strategy noting there was nothing contradictory in them. The Primary Care Strategy would be discussed at the Trust Board meeting in Public in February.

The Board **NOTED** the CEO report.

#### 07/01/24 Place and System Briefing

NM referred to the submitted quarterly update report and highlighted the following points:

- Work was underway to build the clinical strategy and workplan for next year in the Bucks Place.
- The Trust had requested greater control of resourcing within the ICB.

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- The Governance structure would be changed to allowed for the changes at Place level.
- Conversations were taking place within the Provider Collaborative to make changes at scale particularly in elective care and corporate services.
- Access to therapy, reducing waiting times in community paediatrics and integration and development of the pathway were an area of focus and oversight for the Executive Partnership and within that the Trust had responsibility for timelines and compliance of health assessments and looked after children and the close alignment of health and children's services.

The Board NOTED the report.

### 08/01/24 Non-executive director champion roles

DH explained the NED champion roles had reduced to five roles and the other roles were now committee based and dealt with through a unitary board and committee structure rather than individually. It was noted the reporting of Health and Safety was taken through Executive Management

Committee and Strategic People Committee recognising a recent Internal Audit had reviewed health and safety reporting in the Trust and given a reasonable assurance on Trust processes and oversight.

The Board **NOTED** the revised roles.

## 09/01/24 Audit Committee Chair Report

JL highlighted the following points:

- There had been three internal audit reports all with reasonable assurance; financial
  management, health and safety legislation assurance processes and the process of
  managing temporary staffing and agency spend.
- There was an improved position on action clearance.
- Consideration had been given to the initial 24/25 plan.
- The timing of external audit had been noted with completion due before the end of January.
- There had been an improved year on year position with DSPT recognising there had been some milestone slippage.

The Board NOTED the Committee Chair report

## 10/01/24 Finance and Business Performance Committee Chair Report

NG highlighted the following points:

- The NHSE productivity measure being used for performance was discussed. For 24/25
  productivity measures would be reviewed with Committee and consideration given on how to
  track productivity by service line.
- The monthly integrated performance report had been discussed and would be reviewed for the new year.
- The Trust was currently on track with 65-week waiters noting the risk of ongoing industrial action.
- The length of stay was reducing however the financial savings were not yet being seen.
- Hospital at Home at been set up and work was ongoing to ensure its best use and it was used at capacity.
- The Trust benchmarked well for productivity nationally but there was still work to do against local targets.
- The Trust was £0.6m adverse deficit to plan and £1.3m adverse to the revised forecast and was expected to meet the plan for the year.
- The Capital plan had been reviewed and work was underway to ensure the 23/24 allocation was spent.
- The Committee recommended the Board approved the development of the Cardiac and Stroke business case and the options appraisal for the Wycombe Hill development.

The Board NOTED the Committee Chair report.

### 11/01/24 Quality and Clinical Governance Committee Chair Report

LL highlighted the following points:

- The strong performance of the quality metrics in the IPR were discussed.
- There had been good progress on the Aseptic Pharmacy Audit however further assurance had been requested.
- The ED quality report was discussed noting the long stay patients and work to do around risk of patient harm due to long waits in ED.
- The committee had approved the CNST maternity plan.
- The committee was briefed on the joint targeted inspection of services for children in Buckinghamshire. The inspection had since taken place and initial feedback had been good. Colleagues involved in the inspection were thanked.

The Board NOTED the Committee Chair report.

### 12/01/24 Strategic People Committee Chair Report

TR highlighted the following points:

- The improved annual survey staff response rate.
- The continued risk of industrial action.
- The draft people strategy was discussed highlighting the need for a more system wide approach.

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 The Trust had submitted a request to become a Teaching Trust which would strengthen links between education bodies and the Trust including a governance framework.

#### The Board NOTED the report

## 13/01/24 Integrated Performance Report (IPR)

RB highlighted the following points:

- Continued good performance in the people metrics and stable performance in the quality and operational metrics.
- Improved performance in ED and work with the team on the urgent and emergency care improvement programme.
- Cancer metrics were challenged in November in terms of performance and waiting times and had recovered significantly in December. There had been recruitment in Dermatology which had improved the diagnostic position.
- The improvement with 65 week waits position recognising the significant impact of industrial action.

During Board discussion the following were noted:

- Utilisation of Hospital at Home was 75-80 % which was line with other Hospital at Home services. Data was being tracked and there was a BOB review underway, further work was required to integrate the service with the Trust's full patient pathway with learning from others such as Oxford. Further work around virtual care including primary care and community pathways was underway. The benefits for older people for hospital at home was highlighted such as the assessment process, rehabilitation, and remote monitoring.
- The improved cancer metrics related to Dermatology and Gynaecology were highlighted as being at a sustainable level.
- There were detailed plans to reduce the backlog for being diagnosed within 28 days.
- The oversight for education health and care plans for young people who need more support
  was available through special educational need (SEND) support and an update would come
  to Quality and Clinical Governance Committee recognising there were some delays in
  receiving these plans.
- There was an uptick in cases of measles in the County and clear processes and triaging was in place highlighting the important of immunisation.

The Board **NOTED** the report.

# 14/01/24 Finance Report

JE referred to the submitted report and highlighted the following points:

- Year to date deficit was £15m and £600k behind plan.
- The Trust was committed to delivering the year end position subject to industrial action impact.
- Delivery was being rephased and NHSE had asked the Trust to reforecast to year end on
  the assumption there was no further industrial action. However, there were 3 days of
  industrial action in December and 6 days in January. The impact has been accounted for in
  December and the estimate is £600k, a combination of cost and lost income. Half of
  variance to forecast was industrial action and the other was a combination of not reducing
  temporary staffing pay bill as had been committed and lower than forecast income
  assumptions.
- Income was now being monitored and managed based on national performance data and was reported 3 months in arrears. There was an understatement of income as activity levels had gone up.
- The Trust was committed to reducing the temporary staffing bill recognising the successful recruitment of international and substantive colleagues in addition to increasing activity so additional income could be earnt.

During Board discussion the following was noted:

- There had been fortnightly controls of temporary staffing spend which had been increased to weekly with oversight by the Chief People Officer and Executive Management Committee.
- The data showed the rates that were paid were in line with the southeast region collaborative and framework agreed with partners.
- There was an issue around the volume of shifts with some areas having a high use of these shifts.

 Support was being provided to get the spend onto a sustainable basis going into the next financial year.

The Board **NOTED** the report.

## 15/01/24 Charitable Funds Annual Report and Accounts

JE referred to the submitted report and during discussion the following was highlighted:

- The Board was a corporate trustee of the Charitable Funds and had delegated approval to the Charitable Funds Committee to approve the 2022/23 Annual Report and Accounts.
- The funds as of the end of March 2023 were at £10.2m which was a £1m up on the previous year.
- In year the charity raised £3.6m and spent £2.1m to support the Trust.
- The final accounts had been adjusted by a further £55k.
- A fundraising strategy had been developed following a review before the pandemic which
  had found the Charity was passive. The charity was now more proactive and was working
  with fund managers to encourage more bids to be submitted for funding to support the
  hospitals and the community.
- NHS Charities Together was the umbrella organisation and during the pandemic the Trust received significant funds for staff welfare and wellbeing.
- Grants were available from the NHS Charities Together for specific items and they also provided advise around best practice.
- The Charitable Fund was fortunate to be aligned to a charity called Scanappeal who
  proactively raised funds for scanners in the Trust.
- There had been a large increase in funds compared to the previous year and it was queried how much of that had been due to the strategy and how this would drive the way going forward.

The Board **NOTED** the approval of the Charity's Annual Report and Accounts by Charitable Funds Committee.

## 16/01/24 Charitable Fund Investment Policy

JE noted the Charitable Funds Investment Policy had been reviewed and updated for changes in legislation and guidance. The policy confirmed the investment strategy of the Trust's Charitable Funds and detailed how these funds would be managed noting the change to a more ethical and sustainable set of investments aligned with the Charity's mission.

Action: JE to review if any investments were linked to sanctioned regimes.

The Board APPROVED the Charitable Fund Investment Policy

#### 17/01/24 CQC Improvement / Action Plan

KB updated the Board on the on-going work of improvement following the CQC's inspection in February and March 2022 and the inspection last year in maternity and children's services. The plan had been reviewed by the executive management committee and Quality and Clinical Governance Committee and Internal Audit had reviewed for compliance. The plan was on track and teams had worked hard to complete actions.

Reasonable assurance had been received from Internal Audit and further work was being undertaken to close actions. The report highlighted the inquires that had been received, the reasons they were received, and the actions undertaken, and lessons learnt would be included in the next report. These would also triangulate with learning from complaints and thematic reviews.

KB noted the CQC Inspection process was changing, and the Board would receive further details on this in May.

The Board **NOTED** the report.

#### 18/01/24 RAAC Assurance

AW updated the Board on further testing which had been carried out in three community sites which had not been included in the initial survey in 2021. The results found there was no RAAC in these sites and therefore the Trust was able to state there was no RAAC in the Trust's estate. The report had been reviewed by Finance and Business Performance Committee.

The Board were **ASSURED** there was no RAAC present in the Trust's estate.

#### 19/01/24 Freedom to Speak Up Guardian Report

BOK introduced Tracey Underhill, Lead Freedom to Speak Up Guardian who had joined the meeting to present the mid-year report.

There had been a slight increase in the number of concerns from those in the admin and clerical roles however there was no one significant theme for these concerns.

TU commented on the results of the Lucy Letby case at the Countess of Chester Hospital and the work undertaken after communication from NHSE which requested all Trusts considered the five key recommendations. The Trust had undertaken a high-level gap analysis which had been reported to EMC and Strategic People Committee and TU noted the outstanding action in the report had now been completed.

TU highlighted the range of key activities across the Trust to address concerns and themes which reflected the Trust was listening.

The Board discussed the report, and the following points were noted:

- Volunteers to be champions were from across all protected characteristics.
- New international nurses were being proactively enrolled at induction and reporting was now being seen from these groups which was encouraging.
- Freedom to Speak Up was reinforced throughout the journey of being introduced to the Trust, from initial induction, corporate induction and through other services such as wellbeing and pastoral support.
- Differences in the way speaking up in different cultures was viewed was acknowledged and the need to break down barriers in this area.
- Ambitions and goals for the next 12 months would be included in the next report.
- The importance of learning about speaking up for all new recruits early in their careers was highlighted.

The Board **NOTED** the report.

#### 20/01/24 Private Board Summary Report

The Board **NOTED** the report.

## 21/01/24 Risks identified through Board discussion

The following risks were identified during board discussion:

- Financial position and delivery of required activity levels for the remainder of the year and the impact on income due to industrial action.
- Efficiency programme
- Temporary staffing in relation to the financial challenge.

### 22/01/24 Any other business

There was no other business.

## 23/01/24 QUESTIONS FROM THE PUBLIC

No questions from the public had been received.

Date of the next Trust Board Meeting in Public: 28 February 2024 at 09.30

### **Public Board Action Matrix**

4action ID	Date Action Opened	Agenda Item	Summary of Action	Target Date	Exec Lead	Status	Update	Closed
1752	26/07/2023	External Reviews	Combine reporting with annual Compliance with Legislation Report	<del>31/01/2024</del> 27/03/2024	Chief Nurse	In Progress (deferred)	Compliance with Legislation Report due to Board in January 2024 - deferred to March 2024	
1879	25/10/2023	Patient Story	Revisit Parkinson's patient story after six months to review whether changes had been made and what the impact of those were - with a focus on clinic segmentation and moving care out of hospital	24/04/2024	Chief Nurse	In Progress	Not yet due	
1942	31/01/2024	Charitable Fund Investment Policy	Review & confirm if any investments were linked to sanctioned regimes	27/03/2024	Chief Finance Officer	In Progress	Not yet due	

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