



Meeting: Trust Board Meeting in Public

Date: Wednesday, 24 April 2024

Time: 09.45 – 11:45

Venue: Rooms 1&2, R&I Building, Stoke Mandeville Hospital and live streamed to the public

Start Time	Item	Subject	Purpose	Presenter	Encl.
09.45	1.	 Chair's Welcome to the Meeting Meeting Guidance Who's Who of the Board Apologies for absence 	Information	Chair	Verba
	2.	Declaration of Interests	Assurance	Chair	Verba
Gene	ral Bı	usiness			
10:10	3.	Minutes of the last meeting • 27 March 2024	Approval	Chair	Paper
	4.	Actions and Matters Arising	Assurance	Chair	Paper
	5.	Chief Executive's Report	Information	Chief Executive Officer	Paper
	6.	Place & System Briefing	Information	Chief Executive Officer	Paper
Comr	nittee	Reports			
10:25	7.	Finance and Business Performance Committee Chair Report	Assurance	Committee Chair	Verba
	8.	Quality and Clinical Governance Committee Chair Report	Assurance	Committee Chair	Paper
Perfo	rman	ce			
10:40	9.	Integrated Performance Report	Assurance	Chief Operating Officer	Paper
	C	UESTIONS FROM THE PUBLIC			
С	OMFO	RT BREAK – 10 minutes			
11.00	10	Delivery of 2023/24 Objectives	Assurance	Chief Digital and Transformation Officer	Paper
Finance					
11:10	11	Finance Report	Assurance	Chief Finance Officer	Paper
	12	Fundraising Policy	Approval	Chief Finance Officer	Paper

11.20	13. Private Board Summary Report	Information	Chief Executive Officer	Paper
AOB				
	14. Risks identified through Board discussion	Discussion	All	Verbal
	ANY OTHER BUSINESS			
	QUESTIONS FROM THE PUBLIC			
	Date of Next Meeting: 29 May 2024, 09.45			

The Board will consider a motion: "That representatives of the press and other members of the public be excluded from the remainder of the meeting, having regard to the confidential nature of the business to be transacted, publicity of which would be prejudicial to the public interest" Section 1 (2) of the Public Bodies (Admission to Meetings) Act 1960.

Papers for Board meetings in public are available on our website www.buckshealthcare.nhs.uk





TRUST BOARD MEETINGS MEETING PROTOCOL

The Buckinghamshire Healthcare NHS Trust Board welcomes the attendance of members of the public at its Board meetings to observe the Trust's decision-making process.

Copies of the agenda and papers are available on our website www.buckinghamshirehealthcare.nhs.uk.

Members of the public will be given an opportunity to raise questions related to agenda items during the meeting or in advance of the meeting by emailing: bht.communications@nhs.net

If members of the public wish to raise matters not on the agenda, then arrangements will be made for them to be discussed after the meeting with the appropriate director.

When viewing the streamed live meeting please note that only nine directors can be visible at any time. When a director stops talking after a few minutes the system will automatically close their camera and show their initials until the director speaks again.

An acronyms buster has been appended to the end of the papers.

David Highton
Trust Chair





THE SEVEN PRINCIPLES OF PUBLIC LIFE

The Committee has set out **'Seven Principles of Public Life'** which it believes should apply to all in the public service. These are:

Selflessness

Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.

Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.

Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

Honesty

Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

Leadership

Holders of public office should promote and support these principles by leadership and example.

This document should be read in association with the NHS Code of Conduct.

Board of directors





Non-executive directors

Dr Lise Llewellyn John Lisle Tom Roche Nicola Gilham











Non-exec directors (associate)
Dr Adrian Hayter Elaine Siew









Raghuv Bhasin Chief operating officer



Karen Bonner Chief nurse



Mr Andrew McLaren Chief medical officer



Jon Evans
Chief finance officer



Bridget O'Kelly Chief people officer



Duncan Dewhurst
Chief digital &
transformation
officer



Charmaine Hope
Chief estates and
facilities officer







Meeting: Trust Board Meeting in Public

Date: Wednesday, 27 March 2024

Time: 09.45 – 12.00

Venue: R&I Centre, Stoke Mandeville Hospital and live streamed to the public

MINUTES

Voting Members:

Mr D Highton (DH) Trust Chair Ms K Bonner (KB) Chief Nurse

Mr J Evans (JE) Chief Finance Officer
Mrs N Frayne (NF) Non-Executive Director
Mrs N Gilham (NG) Non-Executive Director

Mr J Lisle (JL)

Non-Executive Director (via MS Teams)

Dr L Llewellyn (LL)
Mr N Macdonald (NM)
Chief Executive Officer
Mr T Roche (TR)
Non-Executive Director

Ms J Ricketts (JR) Deputy Chief Operating Officer Dr S Gardner (SG) Deputy Chief Medical Officer

Non-Voting Members:

Mr D Dewhurst (DD) Chief Digital Information Officer

Dr P Flanagan (PF) Board Affiliate

Dr A Hayter (AH) Associate Non-Executive Director (via MS Teams)

Ms C Hope (CH) Chief Estates and Facilities Officer

Mrs H Hornby (HH) Board Affiliate
Mrs B O'Kelly (BOK) Chief People Officer

Ms E Siew (ES)

Associate Non-Executive Director

In attendance:

Miss J James (JJ)

Mrs E Jones (EJ)

Ms M East (ME)

Mr Azuma Kalu (AK)

Trust Board Business Manager

Senior Board Administrator (minutes)

Director of Midwifery (observing)

Head of Pathology (observing)

Mr M Hall (MH)

Member of Trainee Leadership Board (observing)

Ms L Pounds-Cornish

Principle Clinical Psychologist (for agenda item 3)

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

01/03/24 Welcome, Introductions and Apologies

The Chair welcomed everyone to the meeting particularly Charmaine Hope, Chief Estates and Facilities Officer who was attending her first Board Meeting, Michelle East, Director of Midwifery who was observing the Chief Nurse, Azuma Kalu, the Trust's new Head of Pathology and Matt Hall a member of the Trainee Leadership Board who were both observing.

02/03/24 Annual Register of Directors Interests

The Board NOTED the updated annual register of Directors Interests.

03/03/24 Patient Story

KB introduced the patient story of Keith, told by his father Paul. Keith has a diagnosis of autism spectrum disorder (non-verbal) and epilepsy and was treated at the Regional Burns Unit at Stoke Mandeville Hospital followed by ongoing care as an outpatient.

The Board discussed the importance of health literacy and confidence, ensuring patient records were complete and up to date to ensure appropriate support could be provided to those individuals with additional needs. The role of the Carer's Passport was outlined and the work to date on this. Learning from experiences such as this was discussed as a useful tool and valuable tool for taking forward actions and quality improvement.

The Board **NOTED** the patient story.

04/03/24 Minutes of the last meeting

The minutes of the meeting held on 28 February were APPROVED as a true and accurate record.

05/03/24 Actions and Matters Arising

The Action Matrix was NOTED.

Action: An update would be brought to Quality Committee on the separate clinic for newly diagnosed Parkinson patients - KB

06/03/24 Chief Executive's Report

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

- The emerging financial position of the Integrated Care Board (ICB) and the implications of this on the Trust. The system position had moved out twice since it's reforecast at Month 9 which had resulted in a turnaround director being appointed in system to look at the causes of that through a governance review and to help get the system to a better place for planning for next year.
- The system had submitted a planning submission which showed a deficit of £161m and work
 was underway to submit a revised plan by 5 May which would be challenging and would
 require significant work to set a rigorous plan for the workforce, reconciling income and
 having a coherent elective plan.

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

- The benefits of local initiatives such as 'Health on the High Street' and the importance of
 making the best use of the space and publishing the services on offer. A review would be
 brought back to Board on how the service was being utilised and embedded as part of the
 Trust's community services.
- A bid was being prepared for funds related to investments to drive productivity, potentially
 available later in the year recognising the implementation of the electronic patient records
 system would be happening later in the year and the capacity for other projects would be
 challenging.
- The improvements in changes to culture in the UEC and emergency pathway led by two
 colleagues being recognised by their colleagues for a CARE Award, noting this was more
 work to do to make this consistent.

The Board NOTED the CEO report.

07/03/24 Update on Fit and Proper Person Test

BOK provided an overview of the changes to the Fit and Proper Persons Regulation following the introduction of a Fit and Proper Persons Framework by NHSE. It was confirmed all Board members met the requirements of the regulation for 2023/24.

The Board were **ASSURED** by the report.

08/03/24 Audit Committee Chair Report

JL highlighted the following points:

- The annual report and accounts for 2022/23 and been finalised and the Trust had received a
 positive Head of Internal Audit Opinion for 2023/24 recognising a more robust system of
 delivering actions for internal audit was required noting processes and actions needed
 strengthening.
- A new approach to reviewing the Corporate Risk Register was being undertaken by the Committee ensured the Board Sub Committees had the relevant risks for oversight.

The Board **NOTED** the Committee Chair report.

09/03/24

Finance and Business Performance Committee Chair Report

NG highlighted the following points:

- The Month 11 performance metrics had been reviewed recognising the focus on reducing the outpatient DNA rates and increasing discharges before noon. Theatre productivity was discussed, and the implementation of patient initiated follow ups (PIFU).
- The diagnosis for cancer standard had improved noting however Gynaecology was significantly less than standard at 28% noting the mitigations in place including recruitment of additional specialists.
- The Month 11 finance report showed the Trust was tracking at £1.6m over the planned deficit position because of the additional pay bill for the last round of industrial action.
 Managing the bank and agency pay bill was discussed noting the additional controls being implemented.
- Assurance was provided on the capital programme and work to ensure the capital allocation was spent.
- Several contracts were recommended to Board for final approval.
- The Committee had received a demonstration on the new Power BI Dashboards which provide real time data.

The Board **NOTED** the Committee Chair report.

10/03/24

Quality and Clinical Governance Committee Chair Report

LL noted several risks were escalated during the February and March meetings including the implementation of new digital systems within clinical services particularly the early identification of sepsis, the need for significant organisational change to implement Patient Safety Incident Response Framework (PSIRF), two measles cases had been identified and the ongoing rise in the demand for safeguarding services and the need for focus and improvement on cleanliness within the Trust following recent surveys.

The Board **NOTED** the Committee Chair report.

11/03/24

Strategic People Committee Chair Report

TR highlighted the following points:

- The importance of welcoming new people into the organisation from diverse cultures to ensure a smooth transition.
- Staff survey results had been discussed noting the importance of focussing on the intersectionality of colleagues.

The Board **NOTED** the report

12/03/24

Charitable Funds Committee Chair Report

NG highlighted the following points:

- Cazenove, the Charity's fund managers provided an update on the performance of the current sustainable multi-asset investment fund.
- The annual report and accounts had been submitted in line with the 2023 deadline
- Expected 2024/25 expenditure was discussed.
- The Fundraising Policy had been reviewed and updated.

The Board **NOTED** the report.

13/03/24

Integrated Performance Report (IPR)

JR highlighted the following points:

- There had been more than 5 days of industrial action during February.
- There was sustained improvement in both quality and performance recognising there was more work to do.
- The Urgent and Emergency Care metric remained static and alternative pathways to admission were being used with urgent community response hospital home whose teams were working hard to provide rapid care outside of the emergency department.
- There was a reduction in length of stay in both community and acute hospital sites. Whilst the number of medically optimised for discharge patients was consistent the number of bed days lost with these patients has significantly reduced.

- The elective care long waits for treatment were reducing, including a reduction of patients waiting 65 weeks.
- Cancer performance remained challenged however there had been an improvement attributed to the gynaecology backlog being cleared.
- There had been a reduction in hospital mortality and a slight increase in the number of category 2 and 3 pressure ulcers.
- Initiatives were underway to stabilise workforce numbers and reduce temporary staff demand with a focus on ward nursing.

During Board discussion the following were noted:

- Evaluation was underway regionally to understand and demonstrate how the hospital at home pathway was affecting the front door at A&E and the number of ambulances in attendance.
- The need to understand the lost bed day reduction initiatives and benefits and the impact on productivity
- Action: Evaluate the lost bed day reduction initiatives and the impact on productivity.
- The potential use of tools to track pathways within community services for greater transparency.
- The 62-day cancer performance, recognising this was reliant on activity at tertiary centres in some cases.
 - Action: Finance and Business Performance Committee to receive clarity on the plans to improve performance on 62-day cancer waits.
- The improvements seen against the smoking within pregnancy breakthrough objective were commended recognising a paper would be presented to the Board next month looking at progress against all 2023/24 objectives in more detail.

The Board **NOTED** the report.

14/03/24

Finance Report

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

- As at month 11, the Trust was reporting a year-to-date (YTD) deficit of £1.4m behind the
 plan due to the impact of industrial action from December to February which the Trust had
 not been recompensed for.
- £7.7m had been received in February to support the deficit and the revised deficit plan was £4.4m.
- A position had been agreed with the ICB which was consistent with forecast assumptions.
- The Trust had committed to reducing the temporary pay bill which had not yet done and provided a challenge from a run rate of spend position.

During Board discussion the following was noted:

- The estimation of the impact of industrial action on the system had been estimated as £15m however £10m had been received.
- The detail of the elective recovery fund (ERF) was discussed noting the Trust was earning the funding in line with the activity data.
- The Trust pay bill was reviewed including the importance of effective rostering and delivering training to support internationally recruited nurses. The numbers of substantive colleagues had increased however the numbers of temporary staff had not reduced, and tighter controls would be put in place ensuring there were safe staffing levels.
- The importance of learning from 2023/24 for the budgeting process in 2024/25.
- The quantification of the overlap effect of training international nurses for a supernumerary period would be included in the next report to Finance and Business Performance Committee - Action

The Board **NOTED** the report.

15/03/24

Buckinghamshire Healthcare Projects Limited Purchase Orders

SG informed the Board of two requests related to the Buckinghamshire Healthcare Projects Ltd (BHPL) Pharmacy@Bucks:

- 1) Uplift to the annual call-off purchase order for 2023/24.
- 2) New call-off purchase order for 2024/25.

These had both been recommended for approval by Finance and Business Performance Committee.

The Board **APPROVED** the above purchase order requests for BHPL.

16/03/24

South Central Ambulance Service (SCAS) non-emergency patient transport service contract

JR requested the Board approved the annual contract for the provision of Non-Emergency Patient Transport Service (NEPTS) e.g., for outpatient appointments and discharge home from hospital. The Contract had been approved by Executive Management Committee and Finance and Business Performance Committee.

During the coming year the ICB would undertake a procurement for this service.

The Board **APPROVED** the contract.

17/03/24

Organisational Risk Report

JJ referred to the submitted the report and noted a new risk had been added to the corporate risk register (CRR) which was the lack of a commissioned community tissue viability service.

The Board highlighted the number of overdue actions within the CRR and requested focussed attention on this going forward and to include in the report the amount of time a risk remains on the register.

The Board **NOTED** the report.

18/03/24

Compliance with Legislation

KB referred to the submitted report noted it had been discussed at Executive Management Committee and Quality and Clinical Governance Committee (QCGC). The Trust was compliant with 62 out of 78 regulations and proposals and actions were in place with updates going to the relevant Board Sub Committee for oversight and governance.

It was noted since the report was published a new director with responsibility for health and safety and the compliance areas linked to property and estate had been appointed who would undertake a new review of systems and processes which would be shared with F&BP.

Focussed discussions took place on the need to triangulate this information with external reviews and the Computer Misuse Act and importance of effective IT asset management.

The Board **NOTED** the report.

19/03/24

Staff Survey

BOK introduced the full national results of the 2023 Staff Survey and a breakdown of scores locally including a summary of key highlights and areas for improvement and future focus.

BOK thanked colleagues for completing the survey noting it was one of the highest rates nationally at 61% in addition to maintaining scores for the people promises. The survey was promising overall and particularly good around the Trust acting for health and wellbeing of colleagues.

The Board commended the uptake of the survey and how to support further increases in this. Consideration was given to the importance of ensuring equal career progression opportunities and the further attention required on specific staff groups that stood out within the results, particularly younger colleagues, and those from a black Asian and minority ethnic background. The need to use more overt language related to racism was also discussed, referencing the following report – 'Too hot to handle? Why concerns about racism are not heard... or acted on'.

The initiatives to increase flexible working were commented on noting there was more to do. There was more learning to undertake with teams to address the anonymity issue and the benefits of completing the survey to help make a difference.

The Board **NOTED** the report.

20/03/24

NHS Equality, Diversity & Inclusion Improvement Plan

BOK presented the summary of Trust compliance with the six high level actions within the national Equality, Diversity & Inclusion Plan.

The Board recognised there was significant further work to do in this area and opportunity for improvements across the organisation. Actions/interventions in place across the Trust were discussed including reciprocal mentoring and the significant benefits of this.

It was noted the plan would come back to Board with more detail of real-life experiences and examples and would form part of the appraisal process.

The importance of respect from all people towards all colleagues at all levels in the organisation was stressed.

The Board **NOTED** the report.

21/03/24 People Promise Update

BOK provided an overview of the programme, the key achievements during the year as an exemplar site and plans to embed sustainably going forwards.

The strength of wellbeing initiatives within the Trust and the communication of these were discussed.

The Board **NOTED** the report.

22/03/24 GP Vocational Training Scheme Contract

BOK requested the Board approved funds for the payment of medical salaries through the GP Vocational Training Scheme (GPVTS).

It was noted the numbers had dropped and reflected the national position.

The Board APPROVED the contract.

23/03/24 Managing Violence, Aggression and MSK

BOK provided an update on the progress made with Trust actions related to the management of violence and aggression against colleagues and the prevention of musculoskeletal (MSK) conditions at work following the receipt of a letter by the Health & Safety Executive (HSE) in March 2023 (sent to all Trusts).

The Board **NOTED** the report.

24/03/24 Private Board Summary Report

The Board **NOTED** the report.

25/03/24 Risks identified through Board discussion

The following risks were identified during board discussion:

• The emerging financial position of the system and the Trust.

26/03/24 Any other business

TR highlighted to the Board the role of the national register in organ donation and local cricket matches being hosted by NHS Blood and Transplant.

27/03/24 QUESTIONS FROM THE PUBLIC

No questions from the public had been received.

Date of the next Trust Board Meeting in Public: 24 April, 09.45



Generated Date	17 Apr 2024 15:28
Action Criteria	
Project	Public Board



Public Board	ublic Board							
Reference	Minute Reference	Agenda Item	Detail	Owner	Fixed Target	Variable Target	Last Update Description	
							Description	
1813		annual C	Combine reporting with the annual Compliance with	Chief Nurse	31 Jan 2024	26 Jun 2024	Update to March Board: Compliance with Legislation Report within Board papers for March 2024 meeting	
			Legislation Report				External Reviews Policy due for renewal June 2024; policy to be rewritten in line with findings and recommendations from recent independent governance reviews/audits.	
							Review of reporting to be considered as part of policy review.	
2023	13/03/24	IPR	Evaluation of the lost bed day reduction initiatives and impact on productivity	Chief Operating Officer	26 Jun 2024	26 Jun 2024		
2032	03/07/23	Patient Story	Annual summary of developments in services related to those patients seen by the Board via the Patient Story agenda item	Chief Nurse	26 Jun 2024	26 Jun 2024		