

Council of Governors Meeting

**Tuesday 21 May 2024,
2:00pm**

**David Kenward Lecture Theatre, STRIVE,
James Cook University Hospital**




17 May 2024

Dear Colleague

A meeting of the Council of Governors will be held on **Tuesday, 21 May 2024 at 2.00pm** in the **David Kenward Lecture Theatre , STRIVE, James Cook University Hospital, Marton Road, Middlesbrough, TS4 3BW.**

This is a singular meeting with the North Tees Council of Governors only.

Yours sincerely



Professor Derek Bell
Joint Chair

Agenda

- | | | |
|------------|---|-------|
| (1) 2.00pm | Welcome | Chair |
| (2) 2.00pm | Apologies for Absence | Chair |
| (3) 2.00pm | Quorum and Declaration of Interests | Chair |
| (4) 2.05pm | Minutes of the last meeting held on, 15 February 2024 (enclosed) | Chair |
| (5) 2.05pm | Matters Arising and Action Log (enclosed) | Chair |

Items for Information

- | | | |
|------------|--|---------------|
| (6) 2.15pm | Lead Governor Report (enclosed) | Lead Governor |
|------------|--|---------------|

Items to receive

- | | | |
|------------|--|-------|
| (7) 2.25pm | Board Committee Assurance Reports (enclosed)
- Audit Committee (January & April 2024)
- Quality Committee (March & April 2024)
- People Committee (March 2024) | Chair |
|------------|--|-------|

(8) 2.35pm Any Other Notified Business

Chair

(9) 2.45pm Approximate close

Date of Next Meeting

Tuesday, 16 July 2024

Governors Roles and Responsibilities Holding the Board of Directors to Account

1. Key Principles

- 1.1 The overall responsibility for running an NHS Foundation Trust lies with the Board of Directors.
- 1.2 The Council of Governors is the collective body through which the directors explain and justify their actions.
- 1.3 Governors must act in the interests of the NHS Foundation Trust and should adhere to its values and Code of Conduct.

2. Standard Methods for Governors to Provide Scrutiny and Assistance

- 2.1 Receiving the Annual Report and Accounts.
- 2.2 Receiving the Quality Report and Account.
- 2.3 Receiving in-year information updates from the Board of Directors.
- 2.4 Receiving performance appraisal information for the Chair and other Non-executive Directors.
- 2.5 Inviting the Chief Executive or other Executive and Non-executive Directors to attend the Council of Governors meetings as appropriate.

3. Further Methods Available for Governors

- 3.1 Engagement with the Board of Directors to share concerns.
- 3.2 Employment of statutory duties.
- 3.3 Dialogue with Monitor via the lead Governor (if necessary and only in extreme circumstances)

North Tees and Hartlepool NHS Foundation Trust

DRAFT Minutes of a Meeting of the Council of Governors held on Thursday, 15 February 2024 at River Tees Watersports Centre

Present:

Professor Derek Bell, Group Chair
Stacey Hunter, Group Chief Executive (Item 14 onwards)

Hartlepool Elected Governors:

Mike Scanlon
Alan Smith

Stockton Elected Governors:

Janet Atkins
Anne Johnston
Elliot Kennedy
Mark White
Lynda White

Appointed Governors:

Christopher Akers-Belcher, Healthwatch Hartlepool
Andrew Martin-Wells, Hartlepool Borough Council
Steve Nelson, Stockton Borough Council
Prof Tim Thompson, Teesside University
Natasha Douglas, Healthwatch Stockton

Out of Area Elected Governor:

Angela Warnes (Lead Governor)

Sedgefield Elected Governors:

Allison Usher

Easington Elected Governors:

Sarah Moule

Staff Elected Governors:

David Russon
Andy Simpson
Steven Yull

In Attendance:

Neil Atkinson, Managing Director	MD
Ann Baxter, Vice Chair	AB
Chris Macklin, Non-Executive Director	CM
Fay Scullion, Non-Executive Director	FS
Alison Fellows, Non-Executive Director	AF
Prof Liz Barnes, Non-Executive Director	LB
Stuart Irvine, Director of Strategy, Assurance and Compliance/Company Secretary	DoSA&C/CS
Sarah Hutt, Assistant Company Secretary	ACS
Heidi Holliday, Secretary to Trust Board (note taker)	StTB

CoG/1193 Welcome

The Joint Chair welcomed members to the meeting and the newly elected Governors to their first meeting.

CoG/1194 Apologies for absence

Apologies for absence were received from George Lee, Elected Governor for Hartlepool, June Black, Elected Governor for Stockton, Paul Garvin, Elected Governor for Stockton, Robbie Harris, Elected Governor for Stockton, Mark Davis, Elected Governor for Stockton and Christopher Hood, Appointed Governor for Durham County Council.

CoG/1195 Declaration of Interests

The Chair of the meeting referred to the Trust's declaration of interest register and asked attendees if any new declarations needed to be noted. The Chair noted there were no perceived conflicts of interest from the agreed agenda. Should a conflict arise during the course of the

meeting, affected individuals should raise the conflict and a decision would be made to ensure appropriate action was taken.

CoG/1196 Healthwatch Update

Christopher Akers-Belcher, Appointed Governor for Hartlepool Healthwatch presented an overview of the role of Healthwatch and how it linked into the wider footprint.

Healthwatch was the independent consumer champion for health and care services and was established as a statutory service in every top tier Local Authority area in England, by the Health and Social Care Act 2012.

Healthwatch work to understand the needs, experiences and concerns of people who use health and care services and to represent their voices to decision-makers so that services were better able to meet the needs of their local communities.

Local Healthwatch Teams were very much embedded into the community and statistics highlighted the number of contacts made each year. During 2022/23, across Tees Valley, there had been:

- 7,581 people had shared their experiences of health and care services, helping to raise awareness of issues and improve care;
- 15,842 people had contacted Healthwatch for clear information and signposting about topics such as GP access, dentistry and mental health, and
- 1,428,671 people were informed about the role of Healthwatch via meetings, events, radio, publicity, leaflets, social media and bulletins.

Hartlepool Healthwatch could be contacted at either the main office in Hartlepool Town Centre, the central hub or via the outreach services available in the University Hospital of Hartlepool.

NHS England had raised a concern regarding poor health literacy therefore, commissioned the Integrated Care Boards (ICBs) and Healthwatch to identify what people would want to be involved in, for example research and engagement, and what the barriers were for people to be involved. Digital poverty was also a concern and digital opportunities was also being explored.

Following a query raised regarding differences in council areas at micro level, it was noted that a review across all 15 council areas had been undertaken to identify trends. The most common trends included GP access, dentistry and more recently, pharmacy access.

The Council of Governors thanked Christopher Akers-Belcher for the presentation and it was agreed that this would be built into the annual cycle of business going forward.

- Resolved:**
- (i) that, the content of the presentation and work of Healthwatch be noted; and
 - (ii) that, regular updates on Healthwatch be built into the annual cycle of business of the Council of Governors.

CoG/1197 Minutes of the last meeting held on, 14 December 2023

- Resolved:** that, the minutes of the meeting held on Thursday, 14 December 2023 be confirmed as an accurate record.

CoG/1198 Matters Arising and Action Log

An update regarding the action log was noted and the DoSA&C/CS provided information regarding the questions and issues raised at the pre-Council of Governors meeting that were not already covered in the reports presented that day.

Concerns were raised regarding members of the Trust no longer receiving regular updates from the Trust. Following discussion, it was agreed that a review of the membership records be undertaken to, identify if contact details were up to date, what information had previously been shared and when. The DoSA&C/CS agreed to liaise with Ruth Dalton, Deputy Director of Communications, Engagement & Marketing to review what information was shared with staff and Governors to ascertain what could be tailored for members, prior to the next meeting. A suggestion was made for a shared portal, which the Governors could access, where information and updates could be accessed. It was noted that guidance was awaited from the Chief Information & Technology Officer with regards to this. A further suggestion was made to review how South Tees Hospitals NHS Foundation Trust (STHFT) managed their membership and if there were any lessons to be learned.

Following a query regarding community meetings and groups, the DoSA&C/CS reported that he had requested the Communications Team develop an annual schedule of dates, which would be shared with Governors.

Discussions ensued regarding staffing levels at the University Hospital of Hartlepool and the recommended standard for safety. It was reported that staffing shortfalls was a national issue, with the biggest issue being around banding of staff. Discussions were taking place to resolve the issues and patient safety continued to be paramount. The national tool for workforce planning was discussed regularly at the Quality Committee meetings and the Trust was dedicated to increasing staff levels. It was noted that this was also a key area of focus for universities and discussions were ongoing.

- Resolved:**
- (i) that, the content of the updates be noted; and
 - (ii) that, a review of information shared with staff and Governors be undertaken to identify what could be tailored and shared with members of the Trust; and
 - (iii) that, the annual schedule of dates of community meetings and groups be shared with Governors, once produced by the Communications Team.

CoG/1199 Lead Governor Report

AW provided an overview of the meetings she had attended and provided feedback on the queries raised by fellow Governors.

An induction event for the new Governors had taken place on Monday, 22 January 2024, which was an opportunity to find out more about their background and interests. The new Governors would bring a rich mix of personal and professional experience that would add value to the Trusts collective voice. The new Governors had each been allocated a mentor.

The first Trust walkabout of the year had taken place on Thursday, 18 January 2024, which had been very useful and all Governors were encouraged to attend when possible. Future walkabout dates were noted within the report.

The Lead Governor had observed the Board of Directors meeting held on Thursday, 1 February 2024, which provided an excellent opportunity to see Non-Executive Directors challenge and hold the Executive Directors to account and Governors were encouraged to attend a future meeting when possible.

Promotion materials had been developed to use to promote the Trust's membership and the role of a Governor. Initial dates had been booked at the North Tees site to promote the roles and support from fellow Governors at these sessions was being sought. An evaluation of the impact of the activities would be undertaken.

Progress had been made against the actions identified regarding collaborative working and it was noted that regular briefings had started to be received from STHFT, in addition to the regular Trust briefings. Work was to be planned with the Company Secretaries to continually review and progress the actions.

Following a query regarding the issues raised by staff during the Trust walkabout, it was reported that the CN/DoPS&Q coordinated the feedback, which would be developed into a workplan. It was agreed that an update be circulated to Governors.

The ACS requested that if Governors were attending meetings within their constituencies that information be shared with her.

- Resolved:**
- (i) that, the content of the report be noted; and
 - (ii) that, an update on feedback from the recent Trust walkabout be requested from the CN/DoPS&Q and circulated to Governors; and
 - (iii) that, Governors inform the ACS as and when they attend meetings or groups within their constituencies.

CoG/1200 Group Chair's Report including Board Business

The Group Chair provided an update in respect of the Group Chair's Report and highlighted the key issues.

There was a recommendation that Governors, as well as the Board of Directors, undertook three online training modules regarding Freedom to Speak Up called, Speak Up, Listen Up and Follow Up. Following a member's concern regarding the inability to log in to ESR, it was agreed that the option of a 'bank' of computers be looked in to with the Freedom to Speak Up Guardian (FTSUG), which the Governors could use to undertake the training.

The Trust Volunteers Service was looking at ways to expand its volunteer activity at the Hartlepool site, including reception cover on a full time basis. Work was also ongoing to review and improve external signage at the Hartlepool site. Following a query raised regarding the reception role and it being a paid role, it was confirmed that there was currently no funding available and the Volunteers were keen to undertake this role. Volunteers would be supported in this role, and other roles, ensuring there was sufficient resources available.

A meeting with LilyAnne's Wellbeing Charity had been held on Thursday, 8 February 2024. An impressive presentation was provided on the work that undertook and the Trust was looking to provide support to them in possibly expanding the services. The Charity were to be invited to attend a future Meeting in Common of the Board of Directors of STHFT and the Trust.

- Resolved:**
- (i) that, the content of the report be noted; and
 - (ii) that, LillyAnne's Wellbeing Charity be invited to present at a future Meeting of the Board of Directors of STHFT and the Trust.

CoG/1201 Joint Partnership Board Update

The Vice Chair provided an update in respect of the Joint Partnership Board (JPB) and highlighted the key topics of discussion.

A presentation was provided at the JPB meeting, setting out the consultation process to form a Group Executive Team, with the consultation process commencing on Monday, 22 January 2024. A large recruitment process was also planned for the Clinical Board Leadership Team, which would commence on Friday, 1 March 2024.

The next JPB meeting was to focus on updates on developments and for preparing for the JPB becoming the Board for the Group from April 2024.

The Group Chair and Group Chief Executive thanked colleagues for their engagement throughout the process and for their enthusiasm in being part of the Group. A development session was to be held in March 2024 to focus and agree on the ambition and vision of the Group. Learning from other Group models was being obtained.

Resolved: that, the content of the report be noted.

CoG/1202 Report of the Managing Director

The Managing Director provided an overview of key local, regional and national issues including strategic delivery and operational performance. Key highlights included:

- The Trust continued to exceed the overall four-hour national standard, achieving 83.99% in December. There was an acknowledgement that pressures remained within Type 1 pathways and a steering group continued to review progress with improvements already evident.
- An increase in the number of ambulance arrivals were seen during December at 2,017, with a handover completion rate of 97.35%. During December, 44 ambulance handovers were completed outside of the required 59 minutes. The Trust continued to focus on preventing ambulance handover delays.
- There continued to be an increase in the number of super stranded patients from previous months however, there were great community services to help ensure patients returned home as soon as possible.
- Dame Emily Lawson visited the Trust's emergency department and urgent care on Wednesday, 7 February 2024, where the Trust highlighted some of the great work that was being undertaken, which had been a success.
- The Referral to Treatment (RTT) incomplete pathway standard continued to be a challenge, both within the Trust and nationally. The Trust reported 71.70% against a standard of 92.00% in December, with 157 patients waiting over 52-weeks.
- The Cancer 28-day faster diagnosis and Cancer 31-days had both met the standard however, the 62-day standard had not been met. There had been an improvement in performance compared to the previous month however, was consistently below the standard of 85%. Work was ongoing to proactively contact individuals to discuss options, which was reviewed on a regular basis by the Quality Committee.
- Following a procurement exercise undertaken by the ICB for an integrated Urgent and Emergency service across Teesside, the Trust and its partners (STHFT, North East Ambulance Service (NEAS) and Hartlepool and Stockton Health (HaSH)) had been awarded the contract with the Trust taking the lead from a contracting perspective. The contract had been signed that day and would be in place from 1 April 2024.
- Construction work on the Community Diagnostic Centre (CDC) continued to progress for the plan for completion by summer 2024.
- The Trust continued to provide financial support to the system and was expected to exceed the agreed financial plan and post a surplus, which had been accepted by NHS England.

Following a member's query regarding the different ways of working that were implemented during times of industrial action, it was noted that positives and negatives from these periods were being captured to identify areas of learning and to adopt different ways of working that had showed improvements.

The MD reported on the financial duty of the overall system to breakeven and advised that the surplus of the Trust was a benefit to the Trust and the system and that the surplus would remain within the Trust's accounts and would be used for the following year's financial planning.

Discussion ensued regarding operational pressures and discharges from hospital and it was agreed that an update be provided on this. Pressures in discharges had been recognised, along with the increase in the average length of stay and work was ongoing which included discharge panels being held twice daily. It was also noted that Healthwatch were currently in the middle of a review and once intelligence had been ascertained, it would be shared with the Council of Governors.

Following a query regarding the Cancer 62-day standard not being met, it was reported that this was a key area of focus for the Trust and that Vandana Jeebun, Respiratory Consultant was reviewing the particular issues being faced. It was agreed that an update be brought to a future meeting, highlighting improvements that had been made. Patients were also being contacted to help manage their waits and discuss what options were available to them.

- Resolved:**
- (i) that, the content of the report be noted; and
 - (ii) that, an update regarding operational pressures and discharges from hospital be provided; and
 - (iii) that, intelligence ascertained from the review undertaken by Healthwatch, be shared with the Council of Governors; and
 - (iv) that, an update be provided at a future meeting regarding the Cancer 62-day standard, highlighting what improvements had been made.

CoG/1203 Integrated Compliance and Performance Report

AB, Vice Chair presented the December 2023 Integrated Compliance and Performance Report (IPR) explaining that each element of the IPR was reviewed in detail at the relevant Board Committees in order to gain appropriate assurance.

A key area of focus was around mental health access and there had been Executive to Executive discussions with Tees, Esk and Wear Valleys (TEWV) NHS Trust regarding the provision of services. Due to the limited resources available, roles of the voluntary sector were also to be reviewed as part of this work. The Quality Committee were discussing this issue on a regular basis.

- Resolved:** that, the content of the report be noted.

CoG/1204 Interim Governor Elections 2024

The DoSA&C/CS provided a verbal update on the Interim Governor Elections for 2024 and highlighted the key issues.

The Trust was working with Civica Election Services (CES) to conduct the interim round of elections, who was acting as the Returning Officer and would ensure the elections were run in accordance with statutory requirements. Dates for the elections round were to be agreed for March/April 2024 and once finalised, information would be shared with Governors.

- Resolved:**
- (i) that, verbal update be noted; and
 - (ii) that, further information, including dates, was to be shared with Governors once finalised.

CoG/1205 Constitution Update

The DoSA&C/CS provided an overview of the purpose of the Constitution and the key changes proposed to be made following national guidance. The updated Constitution was now aligned with best practice and national guidance and was also aligned to STHFT's Constitution.

The maximum term of office of nine years was reiterated however, it was noted that re-elections beyond the nine years could be considered by strict exception, for example in the event that there would be no other representative for an Appointed Governor role. A query was raised regarding those areas where there were shortages of Governors and whether there could be the potential to be re-elected if there were Governors wishing to re-stand. It was noted that focussed work would need to be undertaken in the first instance to identify why those areas were not receiving applications. Following discussion, it was confirmed that the third term of office would be subject to the same processes for the first and second term of office.

The Lead Governor supported the updated Constitution and provided feedback following a detailed process that had been followed in reviewing the Constitution and provided assurance that the Trust had sought every means of assurance with all aspects of any proposed changes.

A query was raised regarding the wording 'significant transaction' and it was noted that this was in line with nationally guidance and was defined in the Constitution.

The Group Chair and Lead Governor placed on record their thanks to the DoSA&C/CS and ACS for the vast amount of work undertaken in producing the revised Constitution.

The Council of Governors approved the updated Constitution.

The Group Chair welcomed the Group Chief Executive to the meeting at 10.45am.

Resolved: that, the Council of Governors approved the updated Constitution ahead of presentation to the Board of Directors.

CoG/1206 Draft Sub-Committee Minutes

Minutes of the Nominations Committee held on 20 July 2023

Angela Warnes, Lead Governor presented the minutes of the Nominations Committee, which was held on 20 July 2023, and highlighted the key points.

Resolved: that, the minutes of the Nominations Committee held on 20 July 2023 be noted.

Minutes of the Meeting in Common of the Nominations Committee held on 26 September 2023

Angela Warnes, Lead Governor presented the minutes of the Meeting in Common of the Nominations Committee, which was held on 26 September 2023, and highlighted the key points.

Resolved: that, the minutes of the Meeting in Common of the Nominations Committee held on 26 September 2023 be noted.

Draft Minutes of the Nominations Committee held on 18 January 2024

Angela Warnes, Lead Governor presented the draft minutes of the Nominations Committee, which was held on 18 January 2024, and highlighted the key points.

Resolved: that, the draft minutes of the Nominations Committee held on 18 January 2024 be noted.

CoG/1207 Board Committee Assurance Reports

The Group Chair presented the following Committee Assurance Reports and highlighted the key issues:

- Quality Assurance Committee
- People Committee
- Resources Committee

- Audit Committee

AF had attended STHFT's Audit Committee the previous day, which had been very useful. There were a few key points for discussion with the DoSA&C/CS.

The Council of Governors congratulated staff for all their hard work involved in reaching the financial position to date.

- Resolved:**
- (i) that, the Board Committee Assurance Reports be noted; and
 - (ii) that, AF discuss the key points noted from South Tees Hospitals NHS Foundation Trust with the DoSA&C/CS.

CoG/1208 New Fit and Proper Person Test Framework

The DoSA&C/CS presented the New Fit and Proper Person Test (F&PPT) Framework report which provided an update on the implementation of the revised requirements for the Fit and Proper Person Test process for Board members and the outcome of testing against the new guidance that related to 2023/24.

The Trust had prepared the documentation that was required to be signed by the Group Chair and returned to NHSE, to confirm the outcomes of the F&PPT guidance for 2023/24.

As the Trust was operating under Group arrangements with STHFT and the Group Chair and Group Chief Executive were hosted by North Tees & Hartlepool NHS Foundation Trust for payrolls and administrative purposes, a letter of confirmation was to be sent to STHFT confirming the Group Chair and Group Chief Executive were fit and proper persons and would be addressed to the Vice Chair at STHFT.

Once the required documentation had been signed off by the Group Chair and submitted to NHSE, the Trust would be able to evidence that the Trust was compliant with Health and Social Care Act 2008 (Regulated Activities) Regulations 2014: **Regulation 5** - people who have director level responsibility for the quality and safety of care, and for meeting the fundamental standards of fit and proper to carry out that important role.

Upon conclusion of Phase 1 testing, Phase 2 would commence, with the aim of completion by 31 March 2024.

- Resolved:** that, the content of the report be noted.

CoG/1209 Council of Governor Register of Interests

The Council of Governor Register of Interests as at February 2024 was included in the papers for Governor's information. The Register of Interests would be available to the public via the Council of Governors papers and referred to in the Annual Report 2023-24.

- Resolved:** (i) that, the Register of Interests as at February 2024 be noted.

CoG/12010 Non-Executive Director Portfolios

The Non-Executive Director Portfolios were included in the papers for Governor's information.

- Resolved:** that, the Non-Executive Director Portfolios be noted.

CoG/1211 Governor Photoboard January 2024

The Governor Photoboard as at January 2024 was included in the papers for Governor's information.

Resolved: that, the Photoboard as at January 2024 be noted.

CoG/1212 Any Other Business

There was no other business reported.

CoG/1213 Meeting New Group Chief Executive

Warm welcome.

CoG/1214 Date and Time of Next Meeting

Resolved: that, the next meeting be held on Thursday, 21 May 2024 at 2.45pm, venue to be confirmed.

The meeting closed at 12.30pm.

Signed:

Date:

DRAFT

Council of Governors Action Log

Date	Ref.	Item Description	Owner	Completed	Notes
19 September 2023	CoG/1165	Lead Governor Report A programme of Governor development sessions be agreed and circulated.	S Irvine/S Hutt	Ongoing	A draft list of development areas has been collated and areas to be covered in 2024/25 is to be finalised.
19 September 2023	CoG/1166	Joint Chairs Report The future requirements of NEDs would be considered as part of Group progress and an update would be provided at a future meetings.	D Bell/S Irvine	Ongoing	The requirements of Non-Executive Directors has been confirmed and future roless will be confirmed shortly. Update to next meeting.
15 February 2024	CoG/1198	Matters Arising and Action Log A review of information shared with staff and Governors be undertaken to identify what could be tailored and shared with members of the Trust. The annual schedule of community meeting/groups dates be shared with Governors, once produced by the Communications Team.	S Irvine S Irvine	Ongoing Ongoing	The Trust is proposing to provide weekly Trust updates and quarterly Anthem updates via the Membership Database. The list is being finalised with the Communications Team.
15 February 2024	CoG/1199	Lead Governor Report An update on feedback from the last Trust walkabout be requested from the CN/DoPS&Q and circulated to the Governors. Governors inform the Assistant Company Secretary as and when they attend meetings or groups within their constituencies.	S Irvine Governors	Ongoing Ongoing	Feedback from Walkabouts are being collated by the NPS&Q Team. An update will be presented to the next meeting Ongoing
15 February 2024	CoG/1202	Report of the Managing Director An update to be provided to focus on operational pressures and discharges. Following the Healthwatch review of operational pressures and discharges, intelligence was to be shared with the Council of Governors. An update on the Cancer 62-day standard be provided at a future meeting, highlighting improvements made to date.	S Irvine S Irvine/C Akers-Belcher S Irvine	Completed Ongoing Completed	This is covered in the Chief Executive Report. Report has been received an update will be provided at the next meeting. This is covered in the Chief Executive Report.
15 February 2024	CoG/1204	Inerim Governor Elections 2024 Further information on the interim Governor Elections 2024 was to be shared with Governors once finalised.	S Irvine	Ongoing	An update is provided as part of the agenda.
19 September 2023	CoG/1167	Report of the Managing Director The MD would look in to what the Multi-faith Prayer Group were doing whilst work was ongoing to replace or repair the RAAC in the accommodation blocks.	N Atkinson	Completed	Completed

14 December 2023	CoG/1181	Matters Arising and Action Log An update would be provided regarding the urgent care tender as soon as the period of embargo had ended.	D Bell	Completed	Covered in the Group Chair and MD Reports.
14 December 2023	CoG/1183	Joint Chair's Report including Board Business A future Governor Development session to cover the Faculty for Learning, Leadership & Improvement. Future digital strategy updates to be provided as and when necessary.	S Irvine D Bell	Completed Completed	Item has been added to development programme for 2024/25. Item has been added to development programme for 2024/25.
14 December 2023	CoG/1184	Report of the Managing Director Members to provide feedback on the new format of the MD's presentation to CoG. A copy of the MD's presentation slides to be shared with Governors.	Governors Managing Director	Completed Completed	AW spoke with MD to provide feedback. Presentation circulated following the meeting.
14 December 2023	CoG/1186	Outcome of Governor Elections 2023 Obtain feedback from new Governors regarding reasons to apply to inform future election processes.	S Irvine	Completed	AW engaged with the new Governors and feedback received would be progressed through the next round of elections.
15 February 2024	CoG/1196	Healthwatch Update Regular Healthwatch updates are to be built into the annual cycle of business of the Council of Governors	S Irvine	Completed	This now forms part of the business cycle.
15 February 2024	CoG/1200	Group Chair's Report including Board Business LillyAnne's Wellbeing Charity to be invited to present at a future meeting of the Group Board of North Tees & Hartlepool NHS Foundation Trust and South Tees Hospitals NHS Foundation Trust.	S Irvine	Completed	LillyAnne's attended Group Board on 15 May 2024.
15 February 2024	CoG/1207	Board Committee Assurance Reports Alison Fellows to discuss with the DoSA&C/CS the key points noted at South Tees Hospitals NHS Foundation Trust's Audit Committee.	A Fellows/S Irvine	Completed	Meeting has taken place and will be considered as part of aligning Committee business cycles.

Lead Governor Report (NT&H)

Meeting date: 21 May 2024

Reporting to: Council of Governors

Agenda item No: 6

Report author: Angela Warnes, Lead Governor, NTHFT

Action required:
Information

Delegation status (Board only):

N/A

Previously presented to: N/A
N/A

NTHFT strategic objectives supported:

Putting patients first

Valuing our people

Transforming our services

Health and wellbeing

STHFT strategic objectives supported:

Best for safe, clinically effective care and experience

A great place to work

A centre of excellence, for core and specialist services, research, digitally supported healthcare, education and innovation in the Northeast of England, North Yorkshire and beyond

Deliver care without boundaries in collaboration with our health and social care partners

Make best use of our resources

CQC domain link:

Choose an item.

Board assurance / risk register this paper relates to:

N/A



Key discussion points and matters to be escalated from the meeting

ALERT: Alert to the matters that require the board's attention or action, e.g. non-compliance, safety or a threat to the Trust's strategy.

N/A

ADVISE: Advise of areas of ongoing monitoring or development or where there is negative assurance. What risks were discussed and were any new risks identified.

N/A

ASSURE: Assure Inform the board where positive assurance has been achieved, share any practice, innovation or action that the committee considers to be outstanding.

N/A

Recommendations:

The Council of Governors are asked to:

1. Note the activities undertaken by the Lead Governor.
2. Note the opportunities and benefits of attending a Trust walkabout and consider attending.
3. Provide feedback on the proposed revised format for the pre-council of governors meeting.
4. Note the progress made on the actions relating to collaborative working.
5. Note the receipt of a letter regarding the complaints process and assurances received.
6. Note the information relating to feeding back concerns.

Meeting of the Council of Governors

21 May 2024

Report of the Lead Governor North Tees and Hartlepool NHS Foundation Trust

This report provides an overview of both regular and one-off meetings attended by the Lead Governor and other related activities undertaken.

Key Meetings and Activities

Since the last meeting of the Council of Governors on 15 February 2024, I have undertaken the following meetings/activities:

1. Regular Informal Meetings with the Group Chair, Vice Chairs and Lead Governors

Monthly catch-ups provide an opportunity for the Lead Governors to be updated and briefed on any current issues such as:

- Updates on industrial action.
- Briefing on any areas of media interest – positive or adverse.

Other topics for discussion have included:

- Appointment of Group and site Executive Leadership Teams.
- Appointment of Clinical Board Leadership Teams.
- Devolution of responsibilities from the North Tees and Hartlepool Executive Board to the Group Executive Board.
- Disestablishment of North Tees and Hartlepool Non-Executive Directors (NEDs) and appointment of the Group NEDs.
- Progress against actions from Council of Governor feedback on 26 October 2023 regarding collaborative working.
- Attendance of Governors at Group Board Committees as observers.
- Agenda items for the Council of Governors meeting.

I also have regular catch-ups with the Chair and Vice Chair (previously for North Tees and Hartlepool) to discuss any issues specific to North Tees and Hartlepool NHS Foundation Trust. I also have regular written and verbal communication with Janet Crampton, Lead Governor for South Tees, and we have collaborated on the development of the actions for the collaborative working activity alongside Stuart Irvine and Jackie White, Company Secretaries.

2. Attendance at Joint Partnership Board and Education Event

I attended, alongside Janet Crampton, Lead Governor for South Tees, the Joint Partnership Board on 21 February, including the formal signing of the Partnership Agreement by the two Trusts and the North East and North Cumbria ICB. This meeting was followed by an Education Event with presentations from four local Universities.

3. Nominations Committees

I attended a series of meetings (13 March, 21 March and 27 March 2024) convened to approve proposals for the appointment of the NEDs to the Group Board. The proposals were ratified at the

Extraordinary Meeting-in-Common of Council of Governors on 28th March 2024, via Teams which I chaired.

4. Observation of Board of Directors Meetings

I observed the final Board of Directors meeting for North Tees and Hartlepool virtually on 4 April 2024 where a proposal to devolve responsibilities, where appropriate, to the Group Executive Board was approved. The revised constitution, which had been approved by our last full Council of Governors meeting, was also approved, with a review date of 3 years (or earlier should the need arise).

I also attended the inaugural public meeting of the Group Board, which took place on 17 April 2024 at James Cook University Hospital. This was a seminal moment in the journey to formalise the collaboration between the two Trusts into the Group arrangements and it felt like a meeting of a well-established Board. The paperwork that formed the basis of the agenda items was informative and integrated the business of both Trusts, but it was clear to see the relevant information relating to each individual trust. There were excellent examples of constructive challenge by the Group's NEDs. There were also examples of collaborative working across the range of executive and operational functions discussed and it was clear that staff from the two trusts were keen to work together and learn from examples of good practice.

I would recommend that governors attend at least one Group Board meeting if possible. **Please let Sarah Hutt (sarah.hutt@nhs.net) or Heidi Holliday (heidi.holliday1@nhs.net) know if you would like to attend in person or virtually and access will be given to the papers.**

5. Meeting with Stacey Hunter Group CEO

Janet Crampton and I had a very informative and constructive teams meeting with Stacey on 15 April 2024. We discussed her initial key priorities of establishing group and site leadership teams, as well as the devolution of responsibilities to the Group Board. Stacey reported that she has engaged widely with staff across the two Trusts and was immersing herself in the culture of both organisations, with frequent scheduled walkarounds and listening events. Both Janet Crampton and I look forward to working closely with Stacey in our role as Lead Governors.

6. Trust Walkabout

The latest walkabout took place at the University Hospital of Hartlepool on 11 April 2024. The Governors who attended, in addition to myself, were Mike Scanlon, June Black and Sarah Moule. The areas visited, in small groups, included the x-ray department, cardiac and heart failure rehabilitation, chemotherapy unit, rapid response home first team, hand services and dementia support. Comments were made about the calm and friendly atmosphere at the hospital and commitment of staff and positive energy. Emerging themes included the challenges relating to digital systems and some of the estate, which was repurposed wards rather than bespoke planned areas. Feedback was captured by the Deputy Director of Nursing, Rue Musekiwa, and will be triangulated against other sources of data and incorporated into relevant action plans. Governors are encouraged to attend at least one walkabout if possible.

7. Council of Governor's Feedback and Action Plan on Collaborative Working

Progress has been made against the actions identified and an update is provided in the attachment to this report.

8. Promoting Trust Membership and Role of the Governor

The election process has now closed so thanks to all of you for your efforts to promote this. I attended the University Hospital of Hartlepool on Thursday 11 April for the walkabout and also took the

opportunity to do some canvassing before the walkabout using the pop-up stand and leaflets. Although there wasn't a lot of 'passing trade', I did make some good connections with Hartlepool Carers Organisation, who also had a stand, and they agreed to forward details of membership and election to their networks. There are also great opportunities for Hartlepool Governors to attend one of their groups as a means of engaging and seeking feedback from users of the Trust's services as well as promoting membership.

I also had a 'barrow' on Friday 12 April at University Hospital North Tees and thank you to Lynda White for joining me. Again, passing trade was slow but I did manage to chat to some people and hand some leaflets out. The next event to promote membership is planned for 31 May 2024.

9. Regular Email Briefings

I have provided some additional updates and briefings on 9 February, 27 February, 22 March, 8 April and 25 April to all Governors via email since the last meeting.

10. Further Information

10.1 Governor Resignations

Since our last meeting, two public elected Governors have resigned, Paul Garvin (Stockton) and Alan Smith (Hartlepool). My thanks go to both for their commitment and support to the Council of Governors. Alan has served for over 8 years and has been a passionate advocate for the people of Hartlepool and the wider Tees population and he has been a support to many of us. The Group Chair and I presented Alan with a long service plaque on 11 April 2024 and formally thanked him for his service.

10.2 Pre-Council of Governors Meeting

Unfortunately the Pre-Council of Governors meeting scheduled for 14 May 2024 has been cancelled due to the timing of receipt of papers. At the next scheduled Pre-Council of Governors meeting I would like to take the opportunity to try a different format. The focus of the meeting will be private discussion between the Governors and Lead Governor and requests for further information will be forwarded to the Company Secretary and addressed by the relevant people in the Council of Governors meeting.

10.3 Letter regarding Complaints Process

I received a letter from a member of the public asking me to address a concern at the Council of Governors meeting. There was also a copy of a very detailed letter to Stacey Hunter requesting an investigation into this matter. The concern relates to the handling of a multi-agency complaint received by the Trust in September 2022. The letter states that in their opinion, the Trust has breached the statutory regulations governing the handling of complaints. I have replied to the letter stating that it is not our role to get involved in individual complaints. However, as the concern relates to the complaints process itself I said that I would seek assurance from the relevant NEDs that the complaints processes are aligned to statutory requirements and best practice guidelines. I have subsequently requested assurance and have been informed that feedback and assurance on this will be provided at the meeting.

10.4 Feeding Back Concerns

As Governors we regularly receive feedback from members of our constituencies and this is usually fed back to the Trust through informal means, as well as through Council of Governors meetings. Where concerns relate to an individual patient and their care, the person raising the concern should be advised to contact the Patient Experience Team. As Lead Governors, Janet Crampton and myself have asked for further clarification on the route for feeding back general concerns and requested that

an action log is developed and completed to record concerns and actions and provide feedback. This will enable Governors to demonstrate that they are raising concerns and ensure that actions are put in place and are followed through.

11. Recommendations

Governors are asked to:

1. Note the activities undertaken by the Lead Governor.
2. Note the opportunities and benefits of attending a Trust walkabout and consider attending.
3. Provide feedback on the proposed revised format for the Pre-Council of Governors meeting.
4. Note the progress made on the actions relating to collaborative working.
5. Note the receipt of a letter regarding the complaints process and assurances received.
6. Note the information relating to feeding back concerns.



Question 1: What practical strategies can we put in place to help us to understand each other's cultures, organisational structures and challenges and enable us to learn from each other?

You Said	We propose	Update 17 05 24	RAG rating
Share Trust services/systems/management structures.	Links to information on each others websites for governors to access – end January 2024 More detailed information to circulated to Governors – end February 2024 Induction pack for generic information to be added to packs March 2024	Links to websites for governors have been sent Induction packs for NT&H and ST have been shared and a combined pack will be developed for new governors starting later this year.	Yellow
Sharing of weekly briefings from both Trusts to governors.	Email distributions for each COG to be provided to comms by end of December 2023	Weekly briefings now shared for NT&H and ST	Green
Joint Governor inductions.	From next round of elections and by March 2024	On track – meeting being held on elections and subsequently inductions	Yellow
Plan joint walkabouts at across Group sites.	From 2024/25	Pick up later in year – April 2025	White
Strengthen Governor Place with NEDs.	Matrix to be shared and governors to engage colleagues where they have areas of interest	Following NED appointments NED place matrix circulated. Further work to do with regard to what this entails.	Green
Governors to develop a shared culture and values	Development of a compact (house rules) for joint working together – facilitated session	Cover in joint session in May with James	Yellow
Governors to use 'Insights' strengthen collaboration.	Interest and experience and skills of governors to be explored further	Not agreed at this stage to progress	White

Question 1: What practical strategies can we put in place to help us to understand each other's cultures, organisational structures and challenges and enable us to learn from each other?

You Said	We propose	Update 17 05 24	RAG rating
Forward looking joint governor development sessions	Agreed – build in one session as joint meeting arrangements	2 development sessions built into 2024/25 schedule as joint	Green
Increased commonality in CoG agendas/meetings.	Agreed – 4 meetings per year joint – 2 separate – joint to include common agenda as much as possible	4 joint meetings scheduled	Green
Pre-CoG meeting for both Trusts to allow questions to be submitted in advance.	Not agreed for South Tees	Ongoing for NT&H Not applicable for ST	Grey
Align all CoG meetings to take place on the same date and nearer to Board meetings to prevent reporting lag.	Agreed see above – 4 meetings per year 1 whole day, joint development and meeting	4 joint meetings scheduled including 2 development sessions	Green
Rotate CoG meeting at Group sites going forward/share best practice.	Agreed – to be held across all 4 main sites	to take place on alternative sites and for the whole day	Green
Alignment of constitutions	Agreed - on track	Completed	Green
Dedicated Q&A sessions	To be included in development sessions	Not progressing	Grey

Question 2: How can we improve communication flows between Governors within and between the two Councils?

You Said	We Propose	Update 17 05 24	RAG rating
Extended CoG meeting time for key issues, Governor discussion and networking	Format of meeting and use of time to explore exception reporting and NED feedback;	Agreed not to progress	
More frequent CoG meetings	6 meetings a year – by exception ad hoc 6 weeks notice where able to	4 joint meetings scheduled plus 2 joint development sessions plus 2 Trust specific meetings	
Sharing of weekly briefings from both Trusts to governors.	Email details of COGs to be shared with comms by end of December 2023	Weekly briefings now shared for NT&H and ST	
Share Governor portraits and names between Trusts.	Links to website Include in induction pack	Links to website shared Induction pack in progress	
Regional Governor networking opportunities.	Jackie to explore in more detail	Jackie has raised with ICS and will follow up as no progress	
Introduce Governor buddying system	Matrix to be shared and encourage governors to explore buddying / interest areas themselves	No progress	



Question 2: How can we improve communication flows between Governors within and between the two Councils?

You Said	We Propose	Update	RAG Rating
Governor e-mail distribution list/WhatsApp network group to support Governor communication.	For foreseeable contact Lead Governors South Tees to trial Whatsapp and feedback	Not progressing for NH&H Under construction for ST	
Face to face meetings the preferred option, with optional TEAMS link only if appropriate.	For accessibility purposes a teams link will be provided but where possible colleagues should attend face to face	No action but meetings will be accessible for all	
Increase external Communications	Agree a communications plan with communications and co secretaries for external communications	Comms plan for governor elections undertaken	
In Common Membership meetings going forward (promoting membership and increased diversity).	Agreed – set up membership meeting by end of January 2024	Membership & Engagement meeting in common to be scheduled	



Chair's Log

Meeting: NTHFT Audit Committee	Date of Meeting: 29 January 2024
Connecting to: Group Board	Date of Meeting: 15 May 2024
Key topics discussed in the meeting	
<ul style="list-style-type: none"> Board Assurance Framework – received and noted, assurance gained. Update from Chair of NT Resources Committee on use of BAF – received and noted, assurance gained. IPR (December 2023) – received and noted, assurance gained. Internal Audit Progress Report (December 2023) – received and noted, some assurance gained (but see action below). Counter Fraud Progress Report (December 2023) – received and noted, assurance gained (see action below). External Audit Draft Plan – received and noted. Overdue Policies – received and noted, some assurance gained (see action below). Fit & Proper Person Report – received and noted, assurance gained (see action below). GGI Governance Update – received and noted, assurance gained. Statement of Debtors – received and noted. Losses & Compensation Payments Report – received and noted. Summary Single Tender Action Report – received and noted. 	
Actions	Responsibility / timescale
<ul style="list-style-type: none"> Quoracy of Committee as only 2 NEDs are members – AF and CM to discuss with Chair and check diaries to ensure meetings are quorate, prior to next meeting. Internal Audit Progress Report highlighted an increase in the number of overdue IA recommendations – (a) an update on these to be brought to the next meeting (AuditOne); (b) AF to raise at the next Board meeting; (c) IT audit to be cancelled and moved to 2024/25 plan. Counter fraud – Conflict of Interest questionnaire required by end March 2024 (SSH). A further update on overdue policies to be brought to the April 2024 meeting (SG). Fit & Proper Person Framework – (a) create an SOP for the process; (b) send letter of confirmation re Joint Chair and Joint CEO to STH. 	
Escalated items	
<p>Key Issues/ Concerns for escalation:</p> <ul style="list-style-type: none"> Internal Audit Progress Report highlighted an increase in the number of overdue IA recommendations – (a) an update on these to be brought to the next meeting (Audit One); (b) AF to raise at the next NTH Board meeting. <p>Sharing good practice/Things to celebrate:</p> <ul style="list-style-type: none"> Independent Governance Review is complete and assurance has been gained. Separate BAF domain for risks relating the Trust's Estate has been created and is operational. 	
Risks (Include ID if currently on risk register)	Responsibility / timescale
No new risks identified.	

Chair's Log

Meeting: NTHFT Audit Committee	Date of Meeting: 30 April 2024
Connecting to: Group Board	Date of Meeting: 15 May 2024
Key topics discussed in the meeting	
<ul style="list-style-type: none"> Board Assurance Framework – the report was received and noted and assurance gained. Referral from Quality Committee – Clinical Audit Update. Delays and reasons noted, along with progress made since last Quality Committee meeting. Will be discussed again at QC (see action below). IPR March 2024 – received and noted, assurance gained. Internal Audit Progress Report – received and noted, some improvement noted on overdue recommendations since previous AC meeting, some assurance gained (but see action below). Internal Audit Plan – received, discussed and agreed. Committee confirmed that the draft plan reflected the organisation's strategic objectives and risks and will provide the assurance the Committee requires. Counter Fraud Progress Report – received and noted, assurance gained, proposed CF plan for 2024/25 approved. External Audit Update – received and progress to date duly noted. Overdue Policies – received and noted, some assurance gained (but see action below). Statement of Debtors – received and noted; agreed report now to be brought to every other AC meeting. Losses & Compensation Payments Report – received and noted; agreed report now to be brought to every other AC meeting. Summary Single Tender Action Report – received and noted. Concerns expressed at the number of instances in this report, and whether effective processes are in place to control use of single tenders. See action below. 	
Actions	Responsibility / timescale
<ul style="list-style-type: none"> Quality Committee referral – (a) update will be discussed at May 2024 Quality Assurance Council; (b) outstanding audits to be discussed at next Quality Committee; (c) Update report to next Audit Committee (TH). Internal Audit progress update to come to next AC meeting. Update on overdue policies to come to next meeting, including more information on due dates and key responsibilities (SG). Single Tender Action Report – update to come to next AC for a deep dive, including a reformatted report that (a) reviews processes to give assurance that the system for planning and managing these matters is effective, including the use of permitted reasons for waiving the normal requirements (e.g. reasons for urgent cases, only one provider genuinely available etc.); (b) removes items that are not actually procurement based (e.g. leases) (KHH). Annual forward plan for AC to be produced for next meeting (SI/KHH), including (a) scheduled deep dives on key issues (e.g. receipt and discussion of IA risk management report in due course); and (b) assurance updates from the new committees, which will need to report separately to both Trusts' Audit Committees on an agreed schedule. 	
Escalated items	
<p>Key Issues/ Concerns for escalation:</p> <p>None at this time (actions agreed for outstanding clinical audits - see above).</p>	

Sharing good practice/Things to celebrate:

- Internal Audit Plan approved.
- Annual Counter Fraud plan approved.
- Good assurance received on operation of BAF and IPR, and on counter fraud.

Risks (Include ID if currently on risk register)

Responsibility / timescale

No new risks identified.

Quality Committee

Title of report:	Chairs Report – Quality Committee								
Date:	26 March 2024								
Prepared by:	Fay Scullion Non Executive Director - Chair Quality Committee								
Executive sponsor:	Lindsey Robertson, Chief Nurse/Director of Patient Safety and Quality								
Purpose of the report	<p>The purpose of this report is to provide the Board with an update in relate to Patient Quality and Safety:</p> <ul style="list-style-type: none"> - identifying key emerging themes and trends that may have an impact on Quality and Safety - Risks for the Board to note - <p>Provide reassurance to the Board</p>								
Action required:	Approve		Assurance	X	Discuss	X	Information	X	
Strategic Objectives supported by this paper:	Putting our Population First	X	Valuing People	X	Transforming our Services		Health and Wellbeing	X	
Which CQC Standards apply to this report	Safe	X	Caring	X	Effective	X	Responsive	X	Well Led
Executive Summary and the key issues for consideration/ decision:									
<p>Each meeting commences with the patient story, as this has strengthened the connection between the strategy and delivery and demonstrates the impact on the local population. The patient story highlights areas of good practice, integration across services, and areas for development.</p> <p>The Board Assurance Framework is the primary agenda item and a focus of the Quality Committee, which generates scrutiny and discussion. In addition, there are standing reports aligned to the annual work plan, that are provided as an annual, bi-annual update, or quarterly update as well as Executive Summary Reports.</p> <p>The committee focuses on the BAF Objectives :</p> <p>1 Quality 3a Integration and Collaboration</p> <p>Safe</p> <p>The figures for Clostridium difficile (c. diff) are still higher than threshold –in February. There is a continued internal focus on improving compliance with cleaning methods. There has been an increase in C.difficile cases regionally and nationally with work streams being developed to improve knowledge on antimicrobial stewardship.</p> <ul style="list-style-type: none"> • There have been nineteen Catheter Associated Urinary Tract Infection (CAUTI) reported in February against a threshold of seventeen, a working group is being developed to make recommended improvements. • The Trust reported six MSSA bacteraemia against a threshold of three. The main source remains skin and soft tissue with a notable reduction of venflon-associated causes. 									

- No falls resulted in severe harm and of the nine with moderate harm, they have been reviewed through the safety response process and duty of candour applied as required. There were three within one ward and **the team is looking into any key themes and identify any learning.**

Effective

- Re admissions are still higher than target, 9.44% against 7.70%. **A deep dive audit has been undertaken in EAU on patients who have re attended within seven days post discharge.** Findings from this audit are being shared with the care group to understand where community pathways may help prevent re-admission where clinically appropriate.
- Patient Initiated Follow up continues to be a focus of outpatient transformation as part of Getting It Right First time (GIRFT). Although activity continues to increase month on month, activity still remains below standard.
- Focussed 'Time and motion' is underway to identify potential efficiencies and maximising theatre utilisation. A combination of sickness, equipment availability and industrial action contributed to reportable theatre cancellations.
- Of the nine cancelled patients not reappointed within twenty eight days in January, only one patient remains outstanding.

Responsive

- The number of ambulance arrivals to the A& E department remains high. Performance is 99.70% against a target of 100%. The Trust is second in the region for handover and turnaround time-fifteen and twenty six minutes respectively minutes. **Collaborative work continues with colleagues across the region and NEAS.**
- Trust reports 0.8% of patients waiting twelve hours in the department which is a reduction from 1.3% at last report. The majority of the waits were due to bed waits and flow into acute admission areas.
- Capacity and demand continues to be reviewed with **extra clinics being arranged** to meet demand and improve performance for Cancer 28 day faster diagnosis. Pathways continuing to be prioritised, alongside an increase in the number of straight to test pathways.
- 62 day standard has not been met, however at 68.71%, the Trust is performing above the regional average of 66.4%. **Patients being proactively contacted and prioritised as needed**
- Mental Health assessments for patients remains an issue, although the position has been more positive since the cessation of the project. **On-ongoing discussion with mental health care providers continues at Executive level**

Well-led

- Trust sickness absence is above the threshold of 4% with an absence rate of 5.80% which is **reducing** from last report of 6.02%. This correlates to increased activity within the Occupational Health and Well-Being service and other associated support services including the Alliance counselling service and Trust Psychology service
- Appraisal performance is 87.57% which is a **slight increase** from previous month figure of 87.23% Further work on going around streamlining of appraisal paperwork following engagement and feedback.

Maternity

- Reduction of smoking at both booking and delivery continues to be a priority with targeted improvement drives across maternity services. **Targeted projects** have been initiated as part of Quality Improvement programme.

- Right place of birth at 98.25% is an **increase** from last reported figure of 98.10% against a target of 100%. Continuing to undertake multi-disciplinary case reviews for babies born at North Tees to identify themes and learning points.
- On-going work with labour ward coordinators to ensure appropriate use of acuity app and clinical decision making to ensure 1:1 care in active labour. Performance 98.06% against 100% target.
- Breast Feeding Initiated after birth 43.85% against a target of 55.60% work on going reviewing mandated fields within Bagdernet to enable data validation.

Board Assurance Framework/Corporate Risk Register risks this paper relates to:

This report is linked to all parts of the Board Assurance Framework; with no specific risk being identified.

Does the report impact on any of the following areas (*please check the box and provide detail in the body of the report*)

Equality, diversity and or inclusion	X	Reputational	X
Workforce	X	Environmental	X
Financial/value for money	X	Estates and Facilities	X
Commercial	X	Compliance/Regulatory	X
Quality, safety, experience and effectiveness	X	Service user, care and stakeholder involvement	X

Board Subcommittee meetings where this item has been considered (specify date)	Management Group meetings where this item has been considered (specify date)
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Recommendation	The Board is asked to receive the report, review and accept the monthly position and the continued improvement plans across all areas of quality.
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Chair's Log

Meeting: Quality Committee NT&H	Date of Meeting: 22 April 2024
Connecting to: Group Board	Date of Meeting: 15 May 2024
Key topics discussed in the meeting	
<p>Agenda items discussed at the Quality Committee meeting included;</p> <ul style="list-style-type: none"> Monthly Integrated Performance Report Annual VTE Trend Analysis Liaison Psychiatry Update Executive Summary Reports, Claims Report, Minutes and Summaries of Meetings <p>Infection, Prevention & Control</p> <p>Infection rates continue to be monitored with Clostridium Difficile still higher than the threshold, although a slight decrease from the previous month (8 against a threshold of 4). The Trust has the lowest number in the region, but fogging is still increased in high risk areas, as well as continual reinforcement of correct infection control techniques. Ward 38 is a particular concern. Environmental swabbing has been negative. MSSA has reduced in the last month, the main source is skin and soft tissue. Pseudomonas Aeruginosa is at 4 against a threshold of 3, and this is high across the region. Regional work is happening to help staff work towards reducing this.</p> <p>Readmissions</p> <p>Readmissions are still higher than target, and a deep dive audit on EAU has shown that community pathways have not been strong, resulting in readmissions. Working is underway to consider an in-situ GP who can help with looking at the right way to return patients to their home.</p> <p>Cancer Standards</p> <p>Cancer 62 day standard has not been met. Proactive work has been undertaken by clinical and secretarial teams to look at backlog, clinical reprioritisation of patients and extra clinics where necessary. This remains a risk and the Cancer Working Group are looking at this.</p> <p>A&E</p> <p>The number of ambulance arrivals to A&E continues to remain high and performance has increased slightly (99.7%). It was noted that when there is a reduced demand on ambulance service, this has a negative effect on the community outreach team, in that the correct service is not necessarily with the patient. Wider work with NEAS and the ICB is ongoing to ensure that the correct service is delivered at the point of need (seem to be hitting the target but missing the point).</p> <p>Mental Health support for patients in A&E continues to be monitored and shows a slight positive improvement. Discussions with TEWV are ongoing and positive, and plan to trial staff to be based in A&E.</p> <p>Stranded Patients</p> <p>The number of super stranded patients is still high at 62 against a target of 43, and this is due to the complexity of needs on discharge that requires bespoke arrangements. This has highlighted the need for continual work on integrated pathways.</p>	

Waiting Lists

To manage the backlog of waiting lists, long waiters have been contacted to identify reappointments. Extra ad-hoc evening and weekend clinics are being supported.

Smoking Cessation

Ongoing work within maternity services and Quality Improvement Programmes continues to show a positive (although slow) improvement in smoking cessation.

F&FT

Friends and Family test continues to improve and is now at 84% return.

Actions

Responsibility / timescale

No key actions to note.

Escalated items

Key Issues/ Concerns for escalation:

There are no key issues or concerns for escalation.

Sharing good practice/Things to celebrate:

The Trust has declared compliance with all 10 safety actions within Maternity.

PSIRF training and work is progressing well.

Risks (Include ID if currently on risk register)

Responsibility / timescale

There were no new risks identified from the meeting.

Board of Directors

Title of report:	People Committee								
Date:	21 March 2024								
Prepared by:	Ann Baxter, Chair of People Committee and Non-Executive Director								
Executive sponsor:	Gary Wright, Deputy Chief People Officer								
Purpose of the report	The purpose of this report is to provide the Board of Directors an overview of the work of the people Committee and specifically the committee meeting held on 21 March 2024								
Action required:	Approve		Assurance		Discuss		Information	X	
Strategic Objectives supported by this paper:	Putting our Population First		Valuing People	X	Transforming our Services		Health and Wellbeing	X	
Which CQC Standards apply to this report	Safe		Caring		Effective		Responsive	Well Led	X

Executive Summary and the key issues for consideration/ decision:								
<p>A summary of the key points from the People Committee held on 21 March 2024:</p> <p>Terms of Reference / Cycle of Work In line with the People Committee cycle of work, the terms of reference of the Committee is to be reviewed on an annual basis, to ensure they remain current and reflective of the membership, responsibilities and key deliverable.</p> <p>It was acknowledged that as we move towards a Group model, it is important to review in conjunction with South Tees and specifically review the membership. It was agreed to add 'workforce plan' to cycle of work.</p> <p>BAF The BAF contains a section that specifically relates to People. The Strategic Aim is to ensure every member of our staff feel valued (Corporate Strategy and People Plan) and the principal objective is to have a workforce that is compassionate and inclusive, recognised and rewarded, has a voice that counts, are safe and healthy and always learning.</p> <p>The strategic risks relating to the People BAF are set out below, including the inherent, current and target risk scores which have been reviewed, noting aggregated risk score for each strategic risk to indicate the overarching strategic risk rating.</p> <p>Discussions took place at People Committee in January 2024 in relation to the actions in place as a means of mitigating each strategic risk. As a result, actions have been reviewed and refreshed to ensure they are robust, with appropriate responsible leads identified and realistic and achievable timeframes agreed.</p> <p>As discussed and agreed at Risk Management Group, leads are to be identified for individual strategic risk included on each Board Assurance Framework. The following leads have been identified in relation to the strategic risks included on the People BAF:</p> <ul style="list-style-type: none"> • Risk of not addressing the health and well-being needs of our people – Lisa Johnson • Risk of not having a culture of compassion, civility and respect – Rachel De Silva • Risk of not growing our workforce for the future – Michelle Taylor • Risk of not developing and embedding appropriate new ways of working – Michelle Taylor • Risk of not having appropriate levels of staff with the right skills to deliver safe services – Lisa Johnson 								

There are twelve planned actions to maintain or improve the current risk scores in the People section of the BAF and actions are planned to cover each risk. An update on progress is provided in the attached report.

At the committee, members discussed the need to understand operational risks. A concern was raised regarding risk rating being static and further work needed to review.

People Metric

The People Committee were provided with an update on the four People Metric contained within the Integrated Performance Report (IPR):

- Appraisal
- Mandatory Training Compliance
- Sickness Absence
- Turnover

Appraisal - The Trust wide threshold for appraisal compliance is 95%. The Trust position for appraisal compliance for February 2024 stands at 87.57% which is a slight increase from the previous month.

Mandatory training - The Trust wide threshold for mandatory training compliance is 90%. The Trust compliance position for February 2024 is 90% which is maintained from the previous reporting period.

Sickness Absence - The Trust absence threshold is 4%. The current Trust absence rate as at end January 2023 is 5.80%. This is a decrease level of absence on the previous month's rate of 0.22%.

Turnover – The Trust threshold for turnover is 10%. The current Trust turnover rate for February 2024 is 8.06% which maintained from the previous reporting period.

Absence / Health and Wellbeing

A report was presented that gave an overview of the current Trust position in relation to sickness absence across the Trust as well as detail on approach and processes taken in relation to effective and timely management of sickness absence.

It is noted that the complexity of cases is increasing, as is the time taken to manage these, which both require focused attention to ensure effective case management through timely attention.

The current Trust absence rate as at end January 2024 is 5.80%. This is a decrease on the previous month's rate of 6.00% however exceeds the current Trust absence threshold of 4%. 2.49% of the 5.80% was due to short-term absence and 3.31% of the 5.80% rate was due to long term absence.

Regional Trusts sickness rates for December 2023 places the Trust as the lower end of the benchmarking table.

This report includes an update on the improvement plan activities in addition to recent actions which has been developed and implemented in a collaborative approach with key stakeholders. This model of continuous improvement and development continues to be woven and embed within the People Services function.

The report further outlines the current key performance metrics in relation to the Occupational Health and well-being service and provision. In addition, reports on the activity in relation to staff mental health support provided both internally and externally to the Trust. The report does not outline the activity currently undertaken via the Trusts psychology service, however work in underway to identify and report this activity in future.

The committee discussed the need for the report to outline the strategic approach to absence reduction. There was a request to provide more information regarding DNA's with appropriate actions to reduce.

Medical Workforce

The information presented provided central oversight in relation to a number of medical workforce priorities.

The information reported shows that the Trust is not compliant with job planning and mandatory training requirements, with job planning currently reported as 31% against a target of 90%, and mandatory training reported as 72.63% against a tolerance of 90%.

In addition, the report shows that whilst there are a number of appraisals to be completed ahead of the appraisal year end date of 31 March 2024, work is progressing to ensure that appraisals are booked in with the aim of increasing compliance ahead of the annual reporting period.

By undertaking a detailed review of the information, it has been possible to identify the range of data available to us and how this may be best shared with the care groups to support them in agreeing plans to meet future compliance. This in turn will enable the team to monitor progress against agreed trajectories to ensure that plans remain on track, with opportunities to escalate any concerns and understand what support is required to enable progress to continue. General Updates:

- The most recent period of industrial action for junior doctors took place between 24 – 28 February 2024, with confirmation of the number of doctors taking strike action.
- The BMA is recommending that consultants vote to accept the revised pay offer from the government.
- The BMA has rejected a pay offer for specialist, associate specialist and specialty (SAS) doctors following a majority 'no' vote in a membership referendum, however there is no call for industrial action at this time.
- The rates of pay for junior doctors during periods of industrial action are to be reviewed.
- The Medical Leadership Training programme is about to commence, with cohort 1 scheduled to start on 14 March 2024, with 12 delegates booked to attend
- The national Clinical Impact Award (NCIA) scheme opened on 4 March 2024 and applications will be accepted until 5pm on 15 April 2024.

Gender Pay Gap

The Trust has a statutory obligation under the Equality Act 2010 (Gender Pay Gap Information) Regulations 2017, to publish the organisations Gender Pay Gap information on an annual basis.

Relevant organisations are required to publish their gender pay gap report by 30 March each year. The data included in this report was taken from the snapshot date of 31 March 2023. The gender pay gap shows the difference in the average pay between all men and women in the workplace. The key points to note from the metrics are:

- An increase of 8.96% in the average Gender Pay Gap.
- A reduction of 41.39% in the average Bonus Pay Gap.

The Trust's gender balance is 84% female and 16% male, however this is not reflected across the Trust's pay band structure with higher female representation at pay Bands 1-7 and higher male representation for Medical and Dental staff.

This report provides a position and overview of RN, RM, AHP and HCSW workforce during January 2024.

There was a discussion regarding if in the future, reporting can be at group level. This is to be investigated.

Nursing, Midwifery and Allied Health Professions Workforce Report

This item was deferred.

FtSU

Following on from the Lucy Letby case, all NHS organisations were asked by NHS England to review their current Freedom to Speak Up (FtSU) arrangements to assure themselves of the effective and accessible arrangements for FtSU in their organisations.

The National Guardian Office (NGO) and the FtSUG role was first established in 2016 following the events at Mid-Staffordshire NHS Foundation Trust, the recommendations from the subsequent inquiry led by Sir Robert Francis QC and his report "The Freedom to Speak Up" (2015).

The Freedom to Speak Up Report raised over 200 recommendations. One of the recommendations was to have a designated person who was impartial and independent working in every Trust. This role would facilitate staff to speak up in confidence about concerns at work including any public interest disclosure. It was acknowledged that staff should be listened to, taken seriously and would not suffer detriment from speaking up.

The NGO train and support FtSUG as well as providing appropriate resources to help establish a healthy “Speak Up, Listen Up, Follow Up” culture.

Both FtSUG services encourage workers to speak up about anything that gets in the way of patient care or affects their working life. When a worker has spoken up, the FtSUG follows the FtSU process as per national guidance and aligned to the Trust speaking up policy (which recently adopted the new NHS England national policy template) and standard operational procedure.

The FtSUG triangulates data and reports high level themes raised from concerns and this is used to enhance learning and improvement within the organisations

As the two Trusts are now part of a Joint Group Model, discussions have taken place between the FtSU Guardians around plans for the two services to work more collaboratively going forward and to develop a sustainable plan for proactive and reactive work around FtSU.

It was agreed by the committee that 2023 staff survey results can be incorporated into the report to Board of Directors.

Staff Survey

This item was deferred.

Board Assurance Framework/Corporate Risk Register risks this paper relates to:

People BAF

Does the report impact on any of the following areas *(please check the box and provide detail in the body of the report)*

Equality, diversity and or inclusion		Reputational	
Workforce	X	Environmental	
Financial/value for money		Estates and Facilities	
Commercial		Compliance/Regulatory	
Quality, safety, experience and effectiveness		Service user, care and stakeholder involvement	
Board Subcommittee meetings where this item has been considered (specify date)		Management Group meetings where this item has been considered (specify date)	
People Committee 21/03/24		N/A	

Recommendation	The Board of Directors are requested to note the work of the People Committee
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