

**Paper for submission to the Board of Directors 14<sup>th</sup> May 2020**

<b>TITLE:</b>	<b>Public questions</b>		
<b>AUTHOR:</b>	Helen Board Deputy Trust Secretary (Interim)	<b>PRESENTER</b>	Yve Buckland Chairman
<b>CLINICAL STRATEGIC AIMS</b>			
<i>Strengthen hospital-based care to ensure high quality hospital services provided in the most effective and efficient way.</i>			
<b>ACTION REQUIRED OF COMMITTEE</b>			
<b>Decision</b>	<b>Approval</b>	<b>Discussion</b>	<b>Other</b>
		<b>X</b>	
<b>RECOMMENDATIONS:</b>			
The Board is asked to note the questions raised by the Council of Governors and the public where indicated.			
<b>CORPORATE OBJECTIVE:</b>			
All			
<b>SUMMARY OF KEY ISSUES:</b>			
<b>Public Questions</b>			
<p>The Trust Board will continue to meet ‘virtually’ and won’t be holding a public meeting in line with government guidance and to support social distancing. The agenda and meeting papers were circulated to the members of the Council of Governors. Additionally, a link to the Trust website and information providing the location of the agenda and papers has been emailed to our five local MPs and foundation trust members.</p> <p>We have provided a facility for governors and members of the public to submit any questions they may have to the Board for consideration. Questions should have been submitted by close of play of Tuesday 12th May, kept brief and to the point and sent to the following email link <a href="mailto:dqft.foundationmembers@nhs.net">dqft.foundationmembers@nhs.net</a></p> <p>Questions received:</p> <p>Rex Parmley, public elected governor, Halesowen Q. In recent briefings, Governors have been advised that the Trust has sufficient PPE and is participating in a mutual aid scheme to support other organisations in the local health care economy. How much help have we been able to give so far and are we ensuring that we have sufficient stock in reserve for our own use and conversely, what equipment have we been provided with using this scheme?</p> <p>A. We have received a small number of formal requests for mutual aid related to PPE. Outside of this formal scheme, we have provided PPE to local care homes and social care teams to enable them to safely care for their service users.</p> <p>We have provided mutual aid to other organisations over time when we have had sufficient stocks of items to allow this. Examples include:</p> <ul style="list-style-type: none"> <li>- Black Country Healthcare – hand sanitiser, ‘Fit Test’ Solution, non-medical gloves</li> <li>- Sandwell &amp; West Birmingham NHS Trust – gowns</li> <li>- University Hospitals of North Midlands NHS Trust – aprons (offered but ultimately they sourced</li> </ul>			

elsewhere)

More recently we have been asked by a number of organisations and the regional teams if we are able to provide support on surgical masks and gowns, however, these items are in extremely scarce supply so we haven't been able to assist.

Hilary Lumsden, public elected governor, Halesowen

Q. In relation to the redeployment of students during the pandemic. What additional support are students receiving in their placement in terms of the emotional wellbeing and what additional training have they had to prepare them for their role?

A. The students are undertaking an enhanced placement on fixed term contracts and are fully supported by the professional development leads and matrons in the area that they have been deployed to. They continue to receive support for their learning by a named assessor/supervisor, they have access to the full range of the Trust's staff health and wellbeing services; we have provided dates for students to book onto individual support sessions with the professional development team and they are all aware of our contacts for any additional support required.

As part of the induction all students receive the following:

- Overview of the role and expectations
- Chief nurse welcome
- HR starter pack
- Staff health and wellbeing information
- Basic Life Support/Sepsis/EObs (electronic observations) training
- Manual Handling and IT training
- PPE training

Q. This is regarding mandatory training. The uptake of resuscitation training for all ages groups is low. Is this because of a lack of trainers? Have they been deployed elsewhere or is it more of a logistical problem? What measures are in place to rectify the shortfall?

A. Resuscitation trainers and resuscitation officers have not been re-deployed at this time and continue to offer training for resuscitation as well as Basic Life Support, ABCDE, track and trigger and DNACPR training. They work proactively with wards and departments to deliver sufficient training at a range of times to be as flexible as possible to accommodate their clinical commitments. Training is delivered in line with the Resuscitation Council UK 2015 guidance. We keep our training capacity under review in line with the Resuscitation Council Standards which would support more members within the team to provide increased cover.

**IMPLICATIONS OF PAPER:**

**IMPLICATIONS FOR THE CORPORATE RISK REGISTER OR BOARD ASSURANCE FRAMEWORK**

RISK	N		Risk Description
	Risk Register: N		Risk Score:
COMPLIANCE and/or LEGAL REQUIREMENTS	CQC	Y	Details: Well Led
	NHSI	Y	Details: Well led
	Other	N	Details:
REPORT DESTINATION	EXECUTIVE DIRECTORS	N	DATE:
	WORKING GROUP	N	DATE:
	COMMITTEE	N	DATE: