

Full Council of Governors meeting

14 December 2022 17:30hr

Clinical Education Centre, 1st Floor South Block, Russells Hall Hospital, Dudley DY1 2HQ

No.	Time	Item	Paper ref.	Purpose	Presenter
1.	17:30	Welcome 1.1 Introductions & Welcome 1.2 Apologies			Sir David Nicholson Chair
2.		Effective Annual Planning workshop			Kat Rose, Director of Strategy & Partnerships
3.	18:15	Council Meeting 3.1 Declaration of interests 3.2 Quoracy 3.3 Announcements		For noting	Sir David Nicholson Chair
4.	18:25	Previous meeting 3 rd November 2022 – Full Council 4.1 Minutes 4.2 Matters arising 4.3 Update on actions	Enc 1	For approval	Sir David Nicholson Chair
5.	18:30	Chair and Chief Executive's update	Enc 2 / verbal	For information & discussion	Sir David Nicholson Chair Diane Wake Chief Executive
6.		System wide developments	Verbal	For information & discussion	Sir David Nicholson Chair Diane Wake Chief Executive
7.	18:50	Well-Led Governor Development - Analysis of governor survey results - Next steps	Verbal	For assurance	Alex Giles Committee Deputy Chair
8.		Any Other Business (to be notified to the Chair)	Verbal	For noting	Sir David Nicholson Chair
9.	19:10	Close of meeting and forward meeting dates 2023/24: 23 March, 22 June, 5 October, 21 December, 28 March 2024	Verbal		Sir David Nicholson Chair
10.		Reflections on the meeting			All
11.		Quoracy To consist of eight governors of which at least five must be public elected governors and including at least the chair or/ vice chair to preside over the meeting.			

UNCONFIRMED Minutes of the Full Council of Governors meeting
Thursday 3rd November 2022, 16:00hr held virtually using MS Teams

Present:	Status	Representing
Mr Arthur Brown	Public Elected Governor	Stourbridge
Dr Syed Gilani	Staff Elected Governor	Allied Health Professionals & Health Care Scientists
Mr Alexander Giles	Public Elected Governor	Stourbridge
Mrs Sandra Harris	Public Elected Governor	Central Dudley
Mr Mike Heaton	Public Elected Governor	Brierley Hill
Mrs Catherine Lane	Staff Elected Governor	Nursing and Midwifery
Dr Mohit Mandiratta	Appointed Governor	Primary Care Representative (Former CCG appointment)
Mrs Elizabeth Naylor	Public Elected Governor	North Dudley
Mrs Yvonne Peers	Public Elected Governor	North Dudley
Mr Alan Rowbottom	Public Elected Governor	Tipton & Rowley Regis
Cllr Alan Taylor	Appointed Governor	Dudley MBC
Mrs Mary Turner	Appointed Governor	Dudley CVS

In Attendance:

Mrs Liz Abbiss	Director of Communications	DG NHS FT
Mr Julian Atkins	Non-executive Director	DG NHS FT
Dr Thuva Amuthalingum	Associate Non-executive Director	DG NHS FT
Mrs Helen Board	Deputy Trust Secretary	DG NHS FT
Mr Alan Duffell	Interim Chief People Officer	DG NHS FT
Dr Julian Hobbs	Medical Director	DG NHS FT
Professor Liz Hughes	Non-executive Director	DG NHS FT
Mrs Karen Kelly	Chief Operating Officer	DG NHS FT
Mrs Madhuri Mascarenhas	Administration Coordinator	DG NHS FT
Sir David Nicholson	Trust Chair Chair of meeting	DG NHS FT
Mr Andy Proctor	Director of Governance / Board Secretary	DG NHS FT
Ms Kat Rose	Director of Strategy & Partnerships	DG NHS FT
Mr Adam Thomas	Chief Information Officer	DG NHS FT
Ms Diane Wake	Chief Executive	DG NHS FT
Mr Lowell Williams	Non-executive Director	DG NHS FT

Apologies:

Dr Gurjit Bhogal	Non-executive Director	DG NHS FT
Mrs Emily Butler	Public Elected Governor	Halesowen
Professor Gary Crowe	Non-executive Director	DG NHS FT
Ms Jill Faulkner	Staff Elected Governor	Non-Clinical Staff
Ms Catherine Holland	Non-executive Director	DG NHS FT
Mrs Vicky Homer	Public Elected Governor	South Staffordshire & Wyre Forest
Mrs Maria Lodge-Smith	Public Elected Governor	Brierley Hill
Miss Chauntelle Madondo	Public Elected Governor	Rest of England
Dr Atef Michael	Staff Elected Governor	Medical and Dental
Mr Vij Randeniya	Non-executive Director	DG NHS FT
Mrs Mary Sexton	Chief Nurse	DG NHS FT
Mrs Sarah-Jane Stevens	Appointed Governor	University of Wolverhampton
Mr Kevin Stringer	Interim Director of Finance	DG NHS FT

Not In Attendance:

Ms Kerry Cope	Staff Elected Governor	Nursing and Midwifery
Ms Louise Smith	Staff Elected Governor	Nursing and Midwifery

COG 22/84.0 16:00	Welcome
COG 22/85.1	<p>Introductions & Welcome</p> <p>The Chair welcomed all to the meeting.</p> <p>The chair advised that Mr Richard Tasker had stood down as Public Elected Governor, Central Dudley to take up a substantive post at the Trust and that a note of sincere thanks be minuted for his commitment to the role.</p>
COG 22/85.2	<p>Apologies</p> <p>Apologies had been received as above.</p>
COG 22/85.3	<p>Declarations of interest</p> <p>The chair asked those present to indicate if there were any items to declare in respect of the published agenda.</p> <p>The Chair advised that he was also chair of the Sandwell and West Birmingham NHS Trust. Mr Duffell recorded that he was Chief People Officer at the Royal Wolverhampton NHS Trust.</p> <p>The chair reminded all governors to ensure they maintained an up-to-date declaration.</p>
COG 22/85.4	<p>Quoracy</p> <p>The meeting was declared quorate.</p>
COG 22/85.5	<p>Announcements</p> <p>The Annual Members Meeting had been rescheduled to 17th November 2022 owing to the delay in laying of annual report and accounts before Parliament. All governors were invited and had a responsibility to attend to receive the Trusts Annual Report and Accounts and the Auditors report upon them.</p>
COG 22/86	Previous meeting
COG 22/86.1	<p>Previous Full Council of Governors meetings held on 20th June 2022 and Extraordinary meeting held on 18th July 2022 (Enclosure 1 & 1a)</p> <p>The minutes from the previous meetings were given as enclosure 1 for the full Council of Governors meeting held on 20 June 2022 and the Extraordinary Full Council of Governors meeting held on 18 July 2022.</p> <p>It was Resolved to</p> <ul style="list-style-type: none"> • Approve the minutes as an accurate record for the meetings held as given above
COG 22/86.2	<p>Matters arising</p> <p>There were none.</p>

<p>COG 22/86.3</p>	<p>Update on actions</p> <p>All actions were completed and would be removed from the list.</p>
<p>COG 22/87.0</p>	<p>Chair and Chief Executive's update (Enclosure 2/verbal)</p> <p>The Chair thanked all for his warm welcome to the Trust and commented that he had been impressed by the people he had met and remarked on their pride in being part of the Trust.</p> <p>Ms Wake summarised the September 2022 report given as enclosure two and highlighted the following as updates to the position in respect of:</p> <p>Operational performance was good and that elective recovery was on trajectory to pre-covid levels. Noted that productivity was still an area of focus and had robust plans in place to address. No patients were waiting more than 104 weeks at the Trust or within the local System. The focus was now on reducing those waiting 78 and 52 weeks. Winter plans were well developed and there were no plans to cancel any elective/cancer work as requested by the Centre. The position on the two-week standard was improving and noted that 31 and 62 days still had work to do and noted that the Trust had the smallest number in the System. Ms Wake explained that all trusts had been put into tiers where tier 1 not doing well, and tier 4 was performing the best – The Dudley Group had been assigned as tier 3 and was sharing best practice.</p> <p>Emergency Department performance remained challenged with the Trust recently ranked worst in the country for offloading ambulances. This was unusual and described the steps taken to recover the position including the introduction of the North Bristol Model that had worked well in the beginning and needed embedding as business as usual to reap the full benefit. Ambulance activity at the Trust had been high in the last few days, highest across midlands, and had seen some handover times breached. The Trust would continue to embed good practice, remain focussed on systems and processes, and track performance carefully to ensure the delivery of safe, effective patient care.</p> <p>Ms Wake reported that there were currently 14 inpatients with COVID-19 and one patient receiving treatment in the CCU. There were around 30 staff off with COVID-19 or related issues and noted that the BA5 strain was prevalent. There was a concerted effort on promoting the vaccination programme for Flu and COVID-19 boosters. There had been a slower uptake and reported that since September there was presently a 30% take up for flu and COVID-19 for both staff and members of the public.</p> <p>Mrs Kelly commented that the number of ambulance arrivals had increased and reported that at a Delivery Board meeting earlier in the day, the ambulance service had noted the high abandonment rate on calls to 111. The 111 contract had not been renewed and the ambulance service had continued to cover the service into the new year. The 111 service was not staffed correctly and thought it could be contributing to the high number of ambulance conveyances.</p> <p>The Chair asked that his sincere thanks be placed on record to the previous Chair, Dame Yve Buckland for her efforts. He highlighted that he had met many members of staff since joining the organisation and their passion and</p>

	commitment were impressive to note, as was the Trust's commitment to achieving its strategic goals.
COG 22/88.0	<p>System Wide Developments (verbal)</p> <p>The Chair reported that the Integrated Care Board had met and noted that a decision in respect of the future plans for Dudley Integrated Health Care NHS Trust was expected later in the month and recounted that it had been a long ongoing situation where latterly it was made clear that no staff would transfer from The Dudley Group with a preference for partnership working to prevail.</p> <p>He commented on the work underway as part of the Provider Collaborative, made up of four acute trusts in the Black Country and West Birmingham System, and noted there was some remarkable work being delivered. He had attended the recent clinical summit and had been impressed by the high level of medical engagement and collaboration and anticipated interesting and exciting developments to emerge.</p> <p>Work at Place level was equally important and noted the importance of governor involvement. There would be tougher times ahead with people struggling and the Trust had a responsibility to support communities in whatever way it could. The Trust was a major employer with a large estate and thought it could contribute in more ways than delivering healthcare. He expressed that he would be interested to talk to governors as representatives of the communities served by the Trust about their ideas on the matter.</p>
COG 22/89.0	<p>Patient flow and Dudley winter planning (Presentation)</p> <p>The Chair introduced chief operating officer Mrs Karen Kelly to update the Council on the Winter planning arrangements for the Dudley PLACE.</p> <p>Mrs Kelly presented a report on the winter planning preparation undertaken to meet the demands of the period as a joined-up approach by all health and social care partners. This included detailed plans to mitigate the shortfall in patient beds and to ensure optimum patient flow.</p> <p>The chair commented that a limiting factor to the success of the plans was the availability of staff. Mrs Kelly outlined some further mitigations to address the issues at hand including the need to think and work differently and gave the example of the Discharge to Assess model and not overprescribing care needs. She added that recent recruitment drives for health and social care staff had seen some good results but it was unlikely to be enough to meet the current needs.</p> <p>Mrs Kelly shared the details of the action plan for the whole of the Dudley system. The plan would be closely monitored and governance arrangements designed to address the whole pathway. There were several actions to support improved flow and ensure that patients received the right care in the right setting. The focus would be on actions in relation to admission avoidance, discharge and 'bridging bed' choices to help reduce the number of patients medically optimised for discharge (MOFD) being delayed. It had been developed as a document that would be used to hold each other to account for the delivery; all system players had signed up for the plan that would be presented at the Urgent and Care Services Group the following days.</p>

	<p>Mr Giles asked how the Trusts discharge performance compared to other acute trusts on the patch. Mrs Kelly confirmed that the Trust maintained good discharge performance noting that in order to clear the current backlog, a double rate of discharge numbers for a week would be required.</p> <p>The Chair thanked Mrs Kelly for the detail provided and noted that there would be a huge effort for all involved to ensure that patients are safe over the winter. It would involve avoiding admission where appropriate, the Trust working as well as it could to treat patients appropriately and then a set of interventions to make the discharge element better. He asked that his thanks be passed on to everyone involved in the work.</p>
COG 22/90.0	Safe Caring and responsive
COG 22/90.1	<p>Update from Engagement and Experience Committee (Enclosure 3)</p> <p>Mr Giles noted that Mr Tasker had chaired the meeting and summarised the report given as enclosure three. He highlighted the work underway by the Committee that included the launch of a governor survey; the output of which would be analysed and used to support the ongoing development of the Council of Governors. There had been active governor participation in several Trust activities including the National PLACE audit.</p> <p>The Committee had undertaken an annual review of its Terms of Reference that was submitted for approval by the full Council.</p> <p>The Committee had undertaken a review of the governor's membership of council committees that was submitted for approval by the full Council.</p> <p>It was Resolved to</p> <ul style="list-style-type: none"> • Approve the Terms of Reference for the Experience and Engagement Committee • Approve the schedule of governor membership of the committees of the Council
COG 22/90.2	<p>Update from Quality and Safety Committee (Enclosure 4)</p> <p>Professor Hughes summarised the upward report from meetings held in July and August 2022 and highlighted the following:</p> <p>Positive assurances had been received relating to closing off Serious Incident (SI) investigation action plans noting that there was further work to do but much better processes were now in place. Progress to improve mandatory compliance rates for staff within the Medical Division was acknowledged. It had been positive to note that the Recognise Acute Deterioration Action (RADAR) programme was being rolled out.</p> <p>The Emergency Department had been subject to a Peer review led by the Black Country Integrated Care Board (ICB) in August 2022 with a focus on patient flow across the System. The findings for the Trust had been positive and the review team had noted the ongoing and continuous improvement work. Positive feedback was also received in relation to the motivated and competent workforce.</p>

	<p>The Committee continued to focus on the improvement required to achieve an ongoing 30-day time frame compliance for response to complaints. There was a planned trajectory for improvement with slow progress achieved to date. Work was underway to align the complaints team more closely with the divisions.</p> <p>Dr Hobbs highlighted that in terms of safety and quality, the Trust continued to do well and noted that in the learning from deaths metric used by the 15 hospitals that make up the AQUA Alliance, Dudley had the best data set for sepsis treatment and improvement in outcomes.</p> <p>The chair noted the importance of the work undertaken by the committee and thanked Professor Hughes for her stewardship in that regard. He invited questions. There were none.</p>
COG 22/91.0	Effective
COG 22/91.1	<p>Update from Finance and Performance Committee (Enclosure 5)</p> <p>Mr Williams summarised the report given as enclosure five from the last meetings held in the intervening period of June, July, and August 2022 and thanked Mr Rowbottom and other governors for their regular attendance. He referenced the performance matters discussed earlier and commented that in general the Trust continued to perform well and noted the ongoing challenges of urgent and emergency care. He highlighted the various pieces of work commissioned and the number of decisions made including business cases recommended to the Board of Directors approval as detailed in the report.</p> <p>Mr Williams highlighted the growing anxiety in the System over the funding required versus the demand that was being experienced post-COVID-19 that had been raised in Council previously. There was an emerging difficult financial situation to resolve in the current financial year and on into future years; not unique to our Trust as affecting most trusts and systems across the country. The Trust was in the process of developing a robust cost improvement programme (CIP) and was working as a System to ensure that there was no detriment to our patients. Further details would be shared once they had been reviewed and approved at Board. He asked that Governors be assured that members of the executive team and the wider Board were taking the matter very seriously.</p> <p>Mr Rowbottom stated that he had attended many meetings and recognised the challenges faced and noted the relentless work of the team in developing mitigations where possible.</p> <p>Mr Giles acknowledged the System-wide challenge and asked if the Trust position was as good as it could be. Mr Williams merited the efforts of all to maintain progress in managing in-year operations and finances and noted that the Trust was forecasting a deficit comparable to other trusts. The challenges were equally matched with the one difference being that the starting position in terms of reserves with some trusts holding larger reserves than the Dudley Group where the cash and liquidity position was challenging. Mr Giles placed on record his thanks to all for their efforts.</p> <p>The Chair stated that the Board took the financial matters very seriously and would continue to achieve the best possible position. The challenges would remain for the foreseeable future.</p>

COG 22/91.2	<p>Update from Audit Committee (Enclosure 6)</p> <p>Mrs Board summarised the report given as enclosure six that had previously been provided as a verbal update by the Audit Committee chair at the June 2022 meeting of the Full Council.</p>
COG 22/91.3	<p>Update from Digital Trust Technology Committee (Enclosure 7)</p> <p>Mr Thomas summarised the report highlighting the matters considered at the last meeting of the Digital Trust Technology Committee held in September 2022. He highlighted the key risks principally around the planning for the technology upgrades required and working out what was affordable with available funding and how the associated risks were managed.</p> <p>There were positive assurances to note in respect of how data maturity and cyber security were managed to note the Trust's high performance on KPI's that were required for national submission.</p> <p>In September the three-year nationally funded outline was agreed upon in principle and noted that some uncertainty prevailed owing to government policy changes. There was ongoing work as a data services provider to make access to computers for staff more straightforward.</p> <p>There had been lengthy consideration of the concerns about how the maternity team was recording four discreet items within the clinical record that were negatively impacting the Trust's Clinical Negligence Scheme for Trusts (CNST) submission for data quality. Subsequent to the September meeting, the maternity department was now meeting 100% compliance with the regulatory data submission.</p> <p>The Chair thanked Mr Thomas for the update and invited questions. There were none.</p>
COG 22/92.0	Well-Led
COG 22/92.1	<p>Workforce & Staff Engagement Committee (Enclosure 8)</p> <p>Mr Atkins summarised the three upward reports provided in the pack for meetings held in June, July, and August 2022 and highlighted the following aspects:</p> <p>The June Committee had considered mandatory training compliance and in particular resuscitation, safeguarding, and manual handling and noted the matter had also drawn expression of concern from governors. The Committee held an extraordinary meeting on 24th June with a detailed discussion about the planned actions to address compliance rates and was pleased to report there was now some improvement.</p> <p>The Committee also heard about the Trusts involvement with the KickStart scheme that provided six-month placements for 16 to 24-year olds who were receiving universal credit. Of the 24 individuals hosted by the Trust, 10 had achieved a substantive post, one had gone to work for Health Education England and one had registered on the Trust's staff bank. The scheme had finished and the HR team was looking out for similar initiatives.</p>

	<p>The Committee had received a positive report from the Inclusion and Wellbeing steering groups.</p> <p>The July Committee focussed on the work of the Dudley Improvement Practice initiative. Progress on how their work supported teams across the Trust would be fed back regularly.</p> <p>The Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standards (WDES) had been approved with action plans for closing any gaps reviewed.</p> <p>The Equality Diversity Strategy was also in development and would come back to the Committee for endorsement at a later date.</p> <p>The Electronic Staff Record (ESR) system is also under review and the Committee agreed that staff resources be made available to analyse how the system can be used more effectively.</p> <p>Mr Atkins commented on the sad loss of Mr Andrew Boswell who had been the Trust's Statutory Mandatory Training (SMT) lead and commended his dedication and commitment to the role adding he would be very much missed.</p>
COG 22/92.2	<p>Appointments & Remuneration Committee (Enclosure 9)</p> <p>The Chair summarised the report given as enclosure nine which detailed the key matters considered at the Council of Governors Appointments and Remuneration Committee meeting held in October 2022.</p> <p>The Committee had considered the following matters and had agreed on several items to submit to Council for endorsement as follows:</p> <ul style="list-style-type: none"> • The Committee Terms of Reference had been subject to an annual review that had been subject to some changes to membership, quoracy, and chairing arrangements. • The Committee had considered the output of the annual chair and non-executive director appraisals for the period 2022/22 noting that all had achieved their objectives and had agreed on development plans as needed. • Extension of the term of office for non-executive director Professor Elizabeth (Liz) Hughes until November 2025 • The appointment of Dr Gurjit Bhogal to that of the voting non-executive director. Extension to his term of office is to be extended to May 2026 (not May 2023 as indicated in the report) • Note the work underway in respect of the vice chair appointment to support the shared chair role • Endorse the appointment of Yvonne Peers to the role of Deputy Lead Governor <p>All present agreed, without abstention, to the recommendations as per the preamble to this minute.</p>
COG 22/92.3	<p>Trust Secretary report (Enclosure 10)</p> <p>Mrs Board summarised the report given as enclosure ten and highlighted the following.</p>

	<p>Council of Governors Elections and Appointments 2022. On conclusion of the nominations section of the current round of elections overseen by Civica Elections Services, having received only two nominees for two of the vacancies, no ballot would be required.</p> <p>The Trust would welcome Mr Mushtaq Hussain as governor for Central Dudley, and Mr Clare Inglis as governor for Allied Health Professionals and Healthcare Scientists at the next Full Council meeting in December 2022. Where vacancies remained, these would be included in the next round of scheduled elections in Spring 2023.</p> <p>In respect of the vacancy for the non-clinical governor role, it was proposed to consider the application of a Trust Constitution clause that would allow a governor to continue to attend the Council of Governors in an advisory capacity, if the Council of Governors so wishes, although they would not have voting rights. Jill Faulkner will reach her end of term of office in December 2022 and had consented to support the Council, until the next round of elections, as set out in the Trust Constitution, and intends to submit a nomination at the Spring 2023 elections.</p> <p>The Chair asked those present if content to adopt this approach. All present agreed.</p> <p>Work continued to support governor development and noted the workshop activity held in this regard and the launch of an online governor survey.</p> <p>The Trust Constitution would be subject to review during quarter four reflective of the governance and strategic changes emerging as a result of the Health and Social Care Act 2022.</p>
COG 22/92.4	<p>Trust Strategy update (Enclosure 11)</p> <p>Miss Rose summarised the report noting it had been a year since the launch of the strategy. The presentation slides had been circulated with the meeting pack.</p> <p>During September 2022, Board members and senior leaders completed several walk rounds talking to staff about the strategy. There had been a development session with the board and council and the output from these activities would inform on a review of the strategy. An update would be submitted for consideration to the November 2022 meeting of the Board. There would be further discussion about priorities for the coming year and gave the example of developing community services and how it fitted with the aim of providing care as close to home as possible and how the work of the digital and technology programme would underpin it. Good progress was being made and noted more work to do over the remaining years.</p> <p>The Chair thanked Miss Rose and her team for their work and invited questions. There were none.</p>
COG 22/93.0	<p>Governor matters</p> <p>There had been none raised.</p>

COG 22/94.0	For information Integrated Performance Report. The Chair advised that owing to the rescheduling of the Council meeting to November, the latest IPR available contained July data and proposed to circulate the latest report on or around the 10 th of November once issued for review at the next Board of Directors (public session).
COG 22/95.0	Any other Business (Verbal) There was none raised.
COG 22/96.0	Reflections on the meeting (Verbal) The Chair noted the poignancy of chairing his first-ever meeting of the Full Council adding that he had helped to write the legislation that established foundations trusts and gave thanks to the governors for their warm welcome and support. Mr Giles thanked all for the reports submitted and how they illustrated the good work being done for the people of Dudley in challenging times.
COG 22/97.0	Close of meeting and forward Council of Governor meeting dates: 2022 Meeting closed at 5.31pm

Sir David Nicholson, Chair of meeting

Signed..... Dated

Paper for submission to the Council of Governors
14th December 2022

Title:	Public Chief Executive's Report
Author:	Diane Wake, Chief Executive
Presenter:	Diane Wake, Chief Executive

Action Required of Council			
Decision	Approval	Discussion X	Other
Recommendations: The Council of Governors is asked to note and comment on the contents of the report.			

Summary of Key Issues:
<ul style="list-style-type: none"> • Operational Performance • Covid 19 • Winter vaccines • Charity Update • Glitter Ball • Tesco Community Golden Grant • Healthcare Heroes • Provider Collaborative • Exercise Arctic Willow • Patient Feedback • Visits and Events

Impact on the Strategic Goals	
 Deliver right care every time	✓
 Be a brilliant place to work and thrive	✓
 Drive sustainability (financial and environmental)	✓
 Build innovative partnerships in Dudley and beyond	✓
 Improve health and wellbeing	✓

Implications of the Paper:			
Risk	N		Risk Description
	On Risk Register:	N	Risk Score:
Compliance and/or Lead Requirements	CQC	Y	Details: Safe, Effective, Caring, Responsive, Well Led
	NHSE/I	N	Details:
	Other	N	Details:
Report Journey/ Destination	Working / Exec Group	N	Date:
	Committee	N	Date:
	Board of Directors	Y	Date: 17 November 2022
	Council of Governors	Y	Date: 14 December 2022

CHIEF EXECUTIVE'S REPORT – PUBLIC BOARD – 17 NOVEMBER 2022

Operational Performance

Elective restoration and recovery remains strong; the Trust continues to deliver against the national requirement to ensure zero 104 week+ breaches for patients waiting for routine procedures, placing the Trust joint 1st among the 20 Midlands Trusts. Reducing the 78+ week plus routine backlog by March 2023 remains the focus of the operational divisions, with progress being made; long waits in this category have reduced to a total of 65, placing the Trust 7th of 20 regional acute Trusts, with DGFT's 78 week backlog constituting 0.4% of the total Midland backlog. Ensuring a timely service remains a priority and to this end, the Trust continues to deliver short waiting times of 11 weeks on average, against a Midlands average of 14 weeks. Reducing the number of patients waiting 52-78 weeks remains a challenge, with a small rise in such waits. However, progress is being seen at speciality level, particularly within the large volume speciality of General Surgery which has attained at 20% reduction in long waits in this category within month. Additional, new capacity has come online in September with the opening of 2 new Minor Procedure Room facilities, which is providing additional capacity to meet elective and cancer demand.

Cancer treatment remains a priority for the organisation; the cancer 2 week wait target was achieved for 2 months this summer. While 2 week wait performance fell back slightly last month, this was within the context of an increase in referrals in the high volume tumour sites of Skin and Colorectal. Treating patients waiting over 104 days to commence treatment remains an equal priority and while the total number remains higher than forecast, the backlog is stable and slowly reducing. Urgent and Emergency Care remains under considerable pressure, with ambulance handover delays a significant challenge. However, the Trust has implemented additional off-load and assessment capacity, as well as operational changes within the Emergency Department, which has seen delays over 60 minutes reduce significantly during the latter half of October.

Covid 19

The Dudley COVID-19 community rate has decreased to 48.4 cases per 100,000 Week commencing 12th October was 90.9 per 100,000. In comparison, the Black Country rate is 41.0 per 100,000 and the West Midlands rate is 48.8.

We continue to monitor the community and our staff infection rates for COVID-19 and ensure our guidance is appropriate and proportionate, and in clinical areas we continue to ask people to wear face masks.

Winter Vaccines

During September, we launched our staff winter vaccination programme. Staff have the opportunity to receive their free COVID-19 booster and their flu vaccines on site via our hub or through the roving team. As at 04.11.2022, 2092 (45%) staff had taken up the COVID booster and 40% or 1883 staff had received the flu vaccine.

Charity Update

Superhero Fun Run

Members of the public rallied together dressing up as their favourite superheroes to join Trust staff at Himley Hall on Sunday 2nd of October for a 5k fun run to raise funds for the Dudley Group NHS Charity. Over 50 runners took part in the race and together have managed to raise £3,200 for the Dudley Group NHS Charity's Thank You Appeal.

PureGym's Dudley Port team began the day with a warmup session for all those taking part. HSBC UK Wolverhampton Market were also there to support, alongside Black Country Radio, with its hosts Paul Essom and Christine Edwards in attendance. Well-known local busker Billy Spakemon brought further musical motivation to the day as the runners readied themselves at the start line.

Virtual London Marathon

On Sunday 2nd of October, the superheroes were joined by some of the Trust's virtual London Marathon runners who began their 26.2 miles marathon distance by completing their first 5k at Himley Hall. Connor McManus, founder and head coach at Collective Fitness, and Martin Lopez, head of marketing at Windsor Academy Trust, both started their journey at the Superhero run and finished their marathon at Russells Hall Hospital at around 4.30pm.

In addition, Louise Brookes, who is therapy lead from Midlands Orthopaedic Centre, incorporated the 5k into her total running distance. Our medical director Julian Hobbs and district nurse Matthew Welch both also completed the marathon on the day. Huge congratulations to all the runners they raised almost £2,000 between them for our Trust charity.

The 'Great Pink' charity quiz

For Breast Cancer Awareness Month, the Dudley, Wolverhampton, and Southwest Staffordshire Breast Screening Service organised a brilliant 'Great Pink' charity quiz on Friday night at David Lloyd. The event was well attended by over 120 Trust staff members and their friends and families. There was a brilliant selection of raffle prizes donated as well as a fish and chips dinner for those attending. In total the team managed to raise over an incredible £1,600. A huge thank you to everyone who supported the event, the donations will help the service raise awareness of the importance of breast cancer screening and improve the experience for their patients.

Glitter Ball 2022

The Dudley Group NHS Charity Fundraising Event the **Glitter Ball** will be held on **Thursday 24th November 2022** at the Copthorne Hotel, Merry Hill, Dudley. The event has been fully sponsored by Mitie, Summit Healthcare, How To Find a Care Home, and Dudley Building Society. We also have sold several table packages to companies such as HSBC, Waldrons Solicitors, Ansons Solicitors and Workwear Junction.

The funds raised from this event will go towards the Thank You Appeal - [Dudley Group Thank You Appeal 2022 - JustGiving](#)

Tesco Community Golden Grant

On October 15th, shoppers in 100 large Tesco stores across the UK were given the chance to take part in a lucky dip to find specially created gold versions of its iconic blue voting token worth £1million in grants to local good causes. The £1million donation marks £100 million in community grants being given to more than 50,000 good causes since they were launched in 2016.

The finders were able to choose which of the three local good causes in that store's current vote. The Dudley Group NHS Charity's project to purchase sensory equipment for the children's emergency department was selected as the winner in one of the 100 large Tesco stores and we will receive a golden grant award of £10,000 towards our project which is brilliant news!

Healthcare Heroes

Healthcare Heroes



Julie Smith, C8

Julie always gives 110 per cent on every shift she works. She genuinely cares for the patients and goes above and beyond for them. She never lets her team struggle and interacts well with everyone including patients, relatives, and other healthcare professionals. She has so much compassion for her patients and as well as being an extremely hard worker. Julie always makes sure that she is providing the best quality care

for the patients on every shift that she works.

Imaging



Imaging was nominated for how they have transformed within the last 18 months by working to make significant improvements across the department that have undoubtedly improved patient and staff experience. The management team continues to lift the team's spirits post COVID and makes further improvements on a daily basis. The team plays a vital role within The Dudley Group and is

continuing to meet patient targets across the Imaging Departments at Russells Hall Hospital, and Corbett and Guest sites. Post COVID, Imaging has managed to get the backlog of patients down more than any other hospital within the local area, while the community diagnostic centre is the fourth best performing nationally.

Anita Dhanda, C7



When a patient went into cardiac arrest during a busy day shift, Anita was amazing at supporting all her staff and helped all the team in their efforts to resuscitate the patient. Anita then checked on each staff member individually to ensure they were all okay and that they didn't need time out. If they did, she was happy for them to have one. Anita's care for her colleagues meant a lot to them after a traumatic event and they are so lucky to have such a compassionate sister on C7. She is an extremely kind and caring

member of staff toward not only to her patients but also her colleagues, and these amazing values haven't gone unnoticed

Mortuary

Following feedback from the Human Tissues Authority inspection, our mortuary team had an excellent



outcome. The mortuary team are a very well managed team with brilliant audit and governance practices. The team work extremely hard every day to maintain these standards not only in their department but also across the Trust. They strive to give the best and most respectful service possible. For all their hard work, the team deserved the recognition of being August's team Healthcare Hero.

Provider Collaboration

Due in part to ICB developments and the forthcoming Clinical Summit, Provider Collaborative activities were limited in the month of October with the following a quick summary of activities for public consumption:

1. **COLLABORATIVE EXECUTIVE** (12th October 2022). Key items discussed and decisions for communication are:
 - a. **Case for Change** – deferred to enable the development of the ICB 'Joint Forward Plan', from which a more rounded range of pertinent issues are likely to become evident.
 - b. **Monthly Performance Report** – 57 projects across 9 Clinical Networks being progressed. Clinical Leads are being supported to build on their early foundational work and deliver as many of these within this financial year.

- c. **Network Away Days** – Two Clinical Networks (Colorectal and ENT) held away days in September. Both were very well attended and focused on a pertinent range of priorities for discussion. Outputs were very positive with good alignment and agreement across the system.
- d. **Digital as an Enabler of the BCPC Programme** – Positive discussions on a range of digital workstreams including the move towards a common EPR, and the establishment of a system wide PTL. Both issues will support better working across the system and are being progressed as quickly as possible.
- e. **Clinical Leads Group** – Various care pathway work to ‘level up’ are now underway and should be reporting back for implementation in due course.

BCPC Critical Care network has been successful in securing 7 of 15 ACCP trainee placements for the entire Midlands area. These trainees will commence from January 2023, with 3 trainees being allocated to RWT, 2 allocated to DGFT and a further 2 to WHT to complement those already in place. All organisations will urgently need to ensure that business cases are developed to transition these placements into substantive roles after their 3-year placements.

- f. **Communications** – General update provided on communication and engagement activities. Engagement on a ‘Vision statement’ has identified the preferred statement as follows:

“One healthcare system, across multiple sites, working in partnership to provide better, faster, and safer care to the population of the Black Country and beyond”

As part of the active communication and engagement efforts, there is an urgent need to establish a standalone website as a key channel through which to showcase and engage upon our work. It is anticipated that the work of the Clinical Networks, Clinical Summits, and corporate system wide work will be communicated, showcased, and promoted on this website in due course.

- g. **Strategic Developments**

- i. **Surgical Robotics**

An update was provided to the Collaborative Executive on the BCPC system priority for Surgical Robotics. The SRMIG has been established and is now working its way through an implementation programme, embracing mobilisation, estates, and training workstreams.

External opportunities to secure TIF2 Capital resource are also being pursued which has enabled the option of including an additional Orthopaedic Robot (approved within WHCT internal processes) within this submission, whilst in parallel the procurement process is currently being actively progressed with a ‘direct award’ recommended given our criteria / need.

- ii. **Development of BC Cancer Strategy**

A brief paper was shared outlining the process and timelines for the development of a BCPC Cancer Strategy. It is anticipated that a draft of this Cancer Strategy will be shared with the BC Cancer Board sometime before Xmas.

- iii. **Update from the ICB**

The ICB COO (Matt Hartland) attended for the first time as the BCPC strengthened its governance arrangements. Some key messages were provided about the development of system wide governance arrangements (‘target operating model’), the process for developing and establishing the Joint Forward Plan (and its subcomponents), in addition to some general updates on a range of recent topical discussions from key ICB committees.

It is anticipated that communication channels will become more refined with time, with better sharing of key decisions from the diverse range of decision-making committees.

2. **CLINICAL SUMMIT** (19th October 2022).

This was the sixth Clinical Summit with over 150 delegates in attendance from all four partners at the West Bromwich Albion Football Club.

The day was co-chaired by Sir David Nicholson and Diane Wake with a range of corporate presentations were given providing an update on key successes to date, in addition to a 'stock take' on the Provider Collaborative journey for the first half of the year, positioning the priority and focus for the remainder of the year on delivery.

Key presentations were also given by the Clinical Leads for the Colorectal, ENT, and Ophthalmology leading to invigorating dialogue from the audience.

The afternoon was dedicated to time and space for colleagues to join Clinical Networks on key discussions to improve quality of care through care pathways developments, or ways in which to better manage the waiting times targets with a focus on HVLCs and the 78 week target by March 2023.

3. **FORTHCOMING ACTIVITIES IN NOVEMBER / DECEMBER 2022:**

- There will be no Collaborative Executive or Clinical Leads Group meetings in November due in part to the recent Clinical Summit and expected Winter Pressures.
- DW will be presenting at the BC ICB Masterclass session on 10th November 2022
- The next Collaborative Executive will be on 5th December 2022
- The next Collaborative Board will be on the 15th December 2022
- The next Clinical Leads Group will be on the 20th December 2022

Exercise Arctic Willow

The NHS is preparing for potential strike action and will take part in a "multi-day exercise" to stress test the health service ahead of a winter of extreme operational pressures and possible strike action. NHS England have set out steps to prepare for possible industrial action, including taking part in "Exercise Arctic Willow" in the week commencing 14 November.

It is described as "a multiday exercise for integrated care boards (working with trusts) which will seek to explore the health and social care response to multiple, concurrent operational and winter pressures, and the interdependencies with local resilience forum (LRF) partners".

Several trade unions have begun industrial action ballots, including the Royal College of Nursing and Unison, and their plans may be announced in the coming weeks. Our task in the NHS is to be prepared for any potential industrial action so there is minimal disruption to patient care and emergency services can continue to operate as normal.

Patient Feedback

B1: Excellent care from admission to discharge and I couldn't have been treated better. Every health professional from orderlies, nurses, surgeons and anaesthetists were kind and caring. The level of cleanliness of ward was also excellent.

C2 (Children's)- the staff have all been extremely helpful and friendly. The rooms are clean and comfortable; staff go above and beyond to help with whatever you require.

C4: The staff were excellent in all areas concerning my stay, friendly, interactive and informative. Communication was good and clear; I have no issues whatsoever and would happily return for more treatment as required.

C6: Amazing staff as I've always found. I am so grateful for the treatment I received and so thankful to all the staff. Thank you.

Accident & Emergency- I had amazing service on my visit. The staff booking me in were pleasant, friendly and caring to my needs. The waiting time was very short from booking in to seeing a nurse then being sent for an X-ray and getting the results. Everything was explained well to me as each step was about to happen. My entire visit only took one hour which I thought was great. A follow up phone call was arranged for the next day which happened and from that an appointment has been made to see a consultant in two weeks' time. Very impressed!

GI Unit- I went into the treatment room promptly and had treatment soon after. The operatives were pleasant and understanding.

Merry Hill Blood Test Centre - My daughter has been to the new Blood Test Centre at Merry Hill and said it was excellent, very easy to book, efficient and made going for a blood test (especially with a toddler in a pram) very easy. There were also no worries about finding a parking space or paying, and the staff were very friendly.

Visits and Events

23 September 2022	Walk-round with Chairman to Renal Unit, Surgical Hub, Ward B1
28 September 2022	Black Country & West Birmingham Elective Diagnostic Strategi Board – Chaired
29 September 2022	Black Country Integrated Care Board
29 September 2022	Board and Council of Governors Strategy Review
30 September 2022	Black Country Ear, Nose and Throat away day
3 October 2022	Integrated Care Board Development Session
7 October 2022	Get It Right First Time (GIRFT) Midlands Urology network virtual event
10 October 2022	Phlebotomy Hub Opening at Merryhill Shopping Centre
12 October 2022	Black Country Provider Collaborate Executive
13 October 2022	NHS Leaders Conference
14 October 2022	Black Country Collaborate Clinical Leads meeting
17 October 2022	Integrated Care System Cancer Board - Chaired
17 October 2022	Midlands Provider Collaborate Workstream
18 October 2022	Consultant Lead Clinician interviews for Black Country Provider Collaboration
18 October 2022	West Midlands Acute Provider meeting
19 October 2022	Black Country Provider Collaborative Clinical Summit

20 October 2022	Private Board of Director meeting
24 October 2022	Healthcare Heroes
25 October 2022	Emergency Department Sunflower Room opening
26 October 2022	Black Country & West Birmingham Diagnostic Strategic Board – Chaired
2 November 2022	Dudley Group Cancer Summit
2 November 2022	Dudley Group Maternity Department away day
4 November 2022	Emergency Department Dudley Improvement Practice report out
10 November 2022	Dudley Health and Care Partnership Board meeting – Chaired
10 November 2022	Black Country Integrated Care System Stakeholder workshop
14 November 2022	Integrated Care Board Development session
15 and 16 November 2022	NHS Providers Annual Conference