

Excellent health care, improved health for all



The Dudley Group
NHS Foundation Trust



Council of Governors Meeting Papers

Thursday 22nd June 3:40 – 5:30 pm





COMMS TEAM UPDATE MAY 2023

Throughout May we communicated key messages across our digital platforms to support the Trust through the pressure of three Bank Holidays

CELEBRATING NURSES DAY

For the annual Nurses Day celebrations we teamed up with the nursing directorate to showcase 25 case studies from our Dudley nurses.

These featured nurses from across the organisation and provided incredible content to demonstrate why Dudley is such a great place to work and thrive. All of the case studies can be viewed via the Hub.

#NURSESDAY

"I have a passion to drive change, learning from good practice to improve patient outcomes and experience in community. I am always prepared to use my professional curiosity to ensure we provide the best care to our patients. Promoting a "just culture" to empower staff and supporting staff to achieve their potential."

Gurdees

STARBUCKS OPENING

Working alongside Mitie we arranged for the opening of the new Starbucks in South Block to be communicated across our channels.

Diane officially opened the new restaurant and we shared the photos via social and internal comms.

Social media success

May saw a number of successful social media posts including one of our highest engaged posts of 2023 which generated over 400 comments following the retirement of Carole Hickman.

We will continue with our focus on "our people" across our social channels moving forward.

ATLS EVENT

The Trust hosted an Advanced Trauma Life Support course with staff from Wolverhampton, Walsall and Birmingham. We promoted this significant event widely.

MIDWIVES DAY

Proud to be a midwife #IDM2023

Boluwatife

The satisfaction that comes with rendering safe antenatal, perinatal and postnatal care in a safe environment is why I enjoy being a midwife

We took the chance to celebrate our midwives by featuring 14 profiles of them across our comms channels.

This allowed us to share key messages to our external audiences with a recruitment focus. These profiles shared how much our midwives value their roles and enjoy working in Dudley.

IMPROVEMENT EVENTS

Working with Dudley Improvement Practice we have showcased two events in May. The first being the T&O theatres VSA event and secondly the community teams communications improvement event. Both weeks were shared across our platforms with a focus on the benefits to the teams and the organisation of the DIP process.

STAFF NETWORK DAY

This was a day dedicated to recognising networks and the incredible value they add to the workplace. Working with our EDI team we ensured that the day was widely circulated and participation levels were increased as a result.

COMPLEX NUTRITION VIRTUAL WARD

We worked with the Nutrition team to announce the UK's first nutritional virtual ward. Early data revealed 261 bed days have been saved since the creation of the ward and we shared this amazing project via the media, social media, our digital platforms, stakeholders and to staff. The Express and Star featured the ward online and in their print editions.

WE ALSO SUPPORTED

Insulin Safety Week

Paediatric Virtual Ward

Learning at Work Week

World Hand Hygiene Day

CELEBRATING OUR AMAZING STAFF

Physicians associate Richard Tullett was our May Healthcare Hero, we welcomed Gemma and Helen as our inaugural chief nurse fellows and community diabetes nurse Megan Evans received her April Healthcare Hero award

WE NEED YOUR SUPPORT IN THE COMING MONTHS



NHS75 Birthday Celebrations Ongoing

The NHS75 birthday takes place on July 5th and we are beginning to roll out communications ahead of both the day itself and the many events that follow.

Committed to Excellence
June 16th

Learning Disability Week
June 20th-26th

NHS Big Tea
July 5th


Flu vaccinations
September onwards

Promoting NHS 111

We are working with regional colleagues to ensure that NHS 111 is accessed by our local communities

Full Council of Governors meeting

22 June 2023 15:40hr
MS Teams

No.	Item	Paper ref.	Purpose	Presenter	Time
1.	Welcome 1.1 Introductions & Welcome 1.2 Apologies	Verbal	For noting	Chair	15:40
2.	Council Meeting 2.1 Declaration of interests 2.2 Quoracy 2.3 Announcements	Verbal	For noting	Chair	
3.	Previous meeting 5 th April 2023 – Full Council 3.1 Minutes 3.2 Matters arising 3.3 Update on actions	Enclosure 1	For approval	Chair	
4.	 To be a brilliant place to work and thrive Reduce the vacancy rate Improve the staff survey results				15:45
	Staff voice – an opportunity for those staff working at an operational level to talk about their role and in their own words say what it is like to work at the Trust and to share any key challenges and successes. Jackie Elson-Whittaker, Heart Failure Team . Introduced by Catherine Lane, Staff Elected Governor, Nursing & Midwifery				
	Appointments & Remuneration Committee	Enclosure 2	For approval	Sir David Nicholson, Committee Chair	
Governance					16:15
5.	Chief Executive's update	Enclosure 3 / verbal	For information & discussion	Diane Wake Chief Executive	
6.	Chairs update <ul style="list-style-type: none"> Board of Directors held May 2023 Trust integrated Performance report on and note position in respect of Trust targets Non-executive committee chair feedback 	Enclosure 4 Enclosure 5 Verbal	For assurance & discussion	Chair & non-executive committee chairs	
7.	Lead Governor update	Verbal		Alex Giles Lead Governor	
8.	Trust Quarterly Strategy Report and forward planning update	Enclosure 6 / verbal	For assurance	Kat Rose Director of Strategy & Partnerships	
9.	Board Secretary update <ul style="list-style-type: none"> Council Elections 2023 NHS Self certification 2022/23 Annual Report preparation update Quality account governor comment 	Enclosure 7	For approval/ assurance	Helen Board Board Secretary	



Drive sustainability financial and environment

Reduce the cost per weighted activity | Reduce carbon emissions

17:00

Green Plan Update summary of the Trust position against the questions being asked by the Greener NHS programme regionally and nationally as collected in the Greener NHS Data Collection. The Trust has established a Green Plan Working Group and Energy and Estates Sub- Group. The groups have developed a Climate Change Adaptation Plan. Update will include an overview of the recent staff travel survey carried out in January 2023.

Governors invited to share their views.

Presented by Ninette Harris, Trust Sustainability Lead



Build Innovative relationships in Dudley & beyond

Increase the proportion of local people employed | Increase the number of services jointly delivered across the Black Country

17:20

10.

10.1

Experience & Engagement Committee update

Enclosure 8

For assurance

Alex Giles, Interim Committee Chair

11.

Any Other Business (to be notified to the Chair)

Verbal

For noting

Chair

12.

Close of meeting and forward

meeting dates 2023/24:

5 October, 21 September Annual Members meeting, 21 December, 28 March 2024

Chair

13.

Reflections on the meeting

All

14.

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.

Items marked*: indicates documents included for the purpose of the record as information items and as such, no discussion time has been allocated within the agenda. Access to report information as guidance.

17:30

UNCONFIRMED Minutes of the Full Council of Governors meeting
Wednesday 05th April 2023, 16:00 hrs
held on Microsoft Teams

Present:	Status	Representing
Mr Arthur Brown	Public Elected Governor	Stourbridge
Ms Jill Faulkner	Staff Elected Governor	Non-Clinical Staff
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 Mushtaq Hussain	Public Elected Governor	Central Dudley
Ms Clare Inglis	Staff Elected Governor	Allied Health Professionals & Health Care Scientists
Dr Mohit Mandiratta	Appointed Governor	Primary Care Representative (Former CCG appointment)
Mrs Yvonne Peers	Public Elected Governor	North Dudley
Mr Alan Rowbottom	Public Elected Governor	Tipton & Rowley Regis
Mrs Sarah-Jane Stevens	Appointed Governor	University of Wolverhampton
Mrs Mary Turner	Appointed Governor	Dudley CVS

In Attendance:

Mr Julian Atkins	Non-executive Director – Chair of meeting	DG NHS FT
Ms Natalie Bagley	Therapy Assistant Practitioner	DG NHS FT
Dr Gurjit Bhogal	Non-executive Director	DG NHS FT
Mrs Helen Board	Board Secretary	DG NHS FT
Mr Ian Chadwell	Deputy Director of Strategy	DG NHS FT
Professor Gary Crowe	Non-executive Director	DG NHS FT
Mr Alan Duffell	Interim Chief People Officer	DG NHS FT
Dr Julian Hobbs	Medical Director	DG NHS FT
Catherine Holland	Non-executive Director	DG NHS FT
Ms Ruth Hopper	Continence Lead	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
Ms Layla Morris	Orthoptist	DG NHS FT
Mr Andy Proctor	Director of Governance	DG NHS FT
Mr Vij Randeniya	Non-executive Director	DG NHS FT
Ms Kat Rose	Director of Strategy & Partnerships	DG NHS FT
Ms Rebekah Plant	Freedom to Speak Up Guardian	DG NHS FT
Mr Kevin Stringer	Interim Director of Finance	DG NHS FT
Ms Diane Wake	Chief Executive	DG NHS FT
Mr Lowell Williams	Non-executive Director	DG NHS FT

Apologies:

Mrs Liz Abbiss	Director of Communications	DG NHS FT
Dr Thuva Amuthalingum	Associate Non-executive Director	DG NHS FT
Mrs Emily Butler	Public Elected Governor	Halesowen
Ms Kerry Cope	Staff Elected Governor	Nursing and Midwifery
Mr Mike Heaton	Public Elected Governor	Brierley Hill
Mrs Vicky Homer	Public Elected Governor	South Staffordshire & Wyre Forest
Mrs Catherine Lane	Staff Elected Governor	Nursing and Midwifery
Mrs Maria Lodge-Smith	Public Elected Governor	Brierley Hill
Dr Atef Michael	Staff Elected Governor	Medical and Dental
Sir David Nicholson	Trust Chair	DG NHS FT
Mrs Mary Sexton	Chief Nurse	DG NHS FT

Cllr Alan Taylor	Appointed Governor	Dudley MBC
Mr Adam Thomas	Chief Information Officer	DG NHS FT

Not In Attendance:

Miss Chauntelle Madondo	Public Elected Governor	Rest of England
Mrs Elizabeth Naylor	Public Elected Governor	North Dudley
Ms Louise Smith	Staff Elected Governor	Nursing and Midwifery

COG 23/1.0 16:00	Welcome
COG 23/1.1	Introductions & Welcome The Chair welcomed all to the meeting.
COG 23/1.2	Apologies Apologies have been received as above. The Chair informed the Council of Governors that he would be chairing the meeting today as Sir David Nicholson was on annual leave.
COG 23/2.1	Declarations of interest The Chair asked those present to indicate if there were any items to declare in respect of the published agenda. There were none.
COG 23/2.2	Quoracy The meeting was declared quorate.
COG 23/2.3	Announcements Mushtaq Hussain informed the Chair that he would be signing off from the meeting at quarter past five as he had a prior commitment. No further announcements were made.
COG 23/3.0	Previous meeting
COG 23/3.1	Previous Full Council of Governors meetings held on 14th December 2022 (Enclosure 1) The minutes from the previous meetings were given as enclosure one for the full Council of Governors meeting held on 14 th December 2022. It was Resolved to <ul style="list-style-type: none"> • Approve the minutes as an accurate record of the meeting held as given above.
COG 23/3.2	Matters arising There were none.
COG 23/3.3	Update on actions COG 22/102 – Chair & Chief Exec Update

	<ul style="list-style-type: none"> - A bouquet of flowers to be sent to Karen Kelly to wish her a speedy recovery on behalf of the Council of Governors. This action had now been completed <p>COG 22/104.1 – A Task and Finish Group to meet in January 2023 to discuss the membership programme. This action has now been completed. The Task and Finish Group held its first meeting in January.</p>
COG 23/4	To be a brilliant place to work and thrive
COG 23/4.1	<p>Staff Voice (Verbal)</p> <p>The Chair informed the Council of Governors that a new item that had been added to the agenda to give staff an opportunity to talk about their roles, highlight the challenges they face, and note the positives about their roles.</p> <p>Clare Inglis, Lead for Allied Health Professionals, introduced the team. She provided a brief overview of the Allied Health Professional role and the different professions in this group. She stated that the Allied Health Professional workforce was the third largest after nurses and medics.</p> <p>Ruth Hopper, Team Leader for the Dudley Continence Service, provided a brief overview of her role. The Dudley Continence Service helped to treat both men and women adults with the pelvic floor and bowel and bladder functions. The team was passionate about improving the quality of life for their patients through assessments, advice and education. The current challenge faced by the team was with their staffing numbers. Their staff-to-patient ratio is less than what it should be.</p> <p>Layla Morris, Orthoptist at Russells Hall Hospital, provided a brief overview of her role and the number of staff within the Orthoptics team. She stated that an orthoptist specialises in children's visual development and investigating, diagnosing and managing eye movement and binocular vision disorders. The age range of these patients varies from babies to older adults with reduced vision in one or both eyes, referred to as amblyopia. Patients are referred to the orthoptists via referrals from health visitors, GPs and within the Trust from the paediatric and stroke unit. The team visits schools within the Dudley region and screens reception-age children for reduced vision. The current challenge faced by the team is with their staffing numbers.</p> <p>Natalie Bagley, Therapy Assistant Practitioner, based at Dudley Rehabilitation Centre (DRS) in Stourbridge Health and Social Care Centre, works within the Community Stroke team. The team cares for patients sent home following a hospital admission or a step-down bed in a care home or another facility to help them regain their quality of life following a stroke. She provided a brief overview of the challenges faced by the team with referring patients to the Psychology department, which was currently understaffed. This team could also benefit from more staff like the above two departments. Natalie Bagley also highlighted that the team could benefit from electronic notes, a more up-to-date mobile phone (smartphone) and extra support from the GPs.</p> <p>Gary Crowe commended the presenters for their presentations and acknowledged the passion that each one of them showed for their respective job roles. He asked them to share their career aspirations and developments that motivated them to work for The Dudley Group NHS Foundation Trust. Ruth Hopper stated that she had recently attended the in-house training 'Developing Leaders Course', which she found very useful in carrying out her team administration duties having been recently promoted to a Team Leader position. She also found the Continuous Professional Development aid beneficial as she put a number of her team members on clinical courses to help them progress within their roles. The drawback to the Continuous Professional Development aid is that it did not cover accommodation, resulting in a few staff members finding it financially difficult to attend the course.</p>

	<p>Layla Morris also highlighted the various courses she could attend through the programmes provided by the Trust, which has helped in her personal and professional development. Natalie Bagley highlighted the multiple opportunities that were provided to her by the Trust through the apprenticeship programme, which has enabled her to enhance her skills. She stated that the support workers could benefit from progressing to a higher band within their clinical roles instead of looking for progression in non-clinical roles.</p> <p>Julian Hobbs acknowledged the excellent work done by the Allied Health Professional teams in providing a close and long-standing relationship with the patients. He queried if they felt the Trust supported them in progressing within their roles and if they felt they needed more support from the Trust. Ruth Hopper stated that she was provided with sufficient support in her leadership role; however, in her clinical role, she could benefit professionally from receiving more support/challenge internally or externally from staff members above her grade.</p> <p>Natalie Bagley commended her team members for identifying the strengths within the team and supporting them with job allocations. She said the team could benefit more if they could do tasks above their grade. She suggested sub-bands within the grade to help with the distribution of jobs and support growth within the team.</p> <p>Alex Giles commended the speakers for a fantastic presentation and for showcasing their passion for their work. He queried if there was any support they felt the governors could offer them within their roles. Ruth Hopper stated that she wasn't aware of what fell within the Council of Governors' remit, so she didn't know what support she could receive from them. Alex Giles acknowledged the feedback given by Ruth Hopper and stated that this was a good learning point for the governors to take on board and promote the governor's role within the Trust.</p> <p>The Chair highlighted to the group that Karen Kelly had posted a comment on the Microsoft Teams chat during the meeting for the above discussions on progression to be shared with Karen Lewis, Head of Allied Health Professionals, as she was keen to promote the role of Allied Health Professionals within the organisation.</p> <p>The Chair queried if all trusts provided a continence service. Ruth Hopper stated that all trusts provided a similar service within their acute division. The uniqueness of The Dudley Group NHS Foundation Trust was that the physiotherapists worked as part of the team within the continence service.</p> <p>The Chair queried if the team felt that the Trust was sufficiently promoting the different roles within the Allied Health Professionals to local schools and colleges. Clare Inglis stated that her colleague Jenny Glynn was responsible for promoting the role of Allied Health Professionals to the different schools and colleges and was proactive in this regard and organised various events to promote the role and help with recruitment in the future.</p> <p>Action: Karen Kelly will share the staff members' comments on the progression and equipment needed by the team with Karen Lewis, Head of Allied Health Professionals.</p> <p>There were no further comments or questions.</p>
COG 23/4.2	<p>Freedom to Speak Up service overview Q2 – Q3, 2022/23</p> <p>Becky Plant provided a brief introduction about herself and the role of the Freedom to Speak Up Guardian. She stated that the Freedom to Speak Up guardian role was created following the report by Sir Robert Francis on patient safety findings at Mid-Staffordshire NHS Foundation Trust around eight years ago. In the past year, the Freedom to Speak Up Guardians among the NHS and non-NHS organisations</p>

	<p>collectively dealt with 20,000 concerns raised by staff members. The Trust received approximately ten concerns per month.</p> <p>Becky Plant and Phillipa Brazier from the Professional Development Team are the Freedom to Speak Up Guardians for the Trust. Julian Atkins supported the team as the non-executive lead, and Diane Wake as the executive lead. The team also received support from 25 volunteer staff champions across the different areas of the Trust and was well-represented among the various professions.</p> <p>The team can be contacted through different modes of communication and in person at the library in South Block. The team also undertaken walkabouts at various locations in the Trust to promote the Freedom to Speak Up Guardian role.</p> <p>Mushtaq Hussain queried about the level of involvement of the Freedom to Speak Up Guardian in a concern/complaint received from a staff member. Becky Plant informed the group that they have a set of guidelines which they follow. The National Guardians office sets these guidelines, which is part of NHS England. The role of the Freedom to Speak Up Guardian is not to investigate or tell a manager or a member of staff what to do but to listen to the concern raised and try to understand what solution they are looking for. They encourage and support staff members to resolve the problem themselves. However, in certain situations, if the staff member was uncomfortable with raising their concern with their respective manager, then the Freedom to Speak Up Guardian would highlight the matter to the manager to initiate a conversation.</p> <p>Gary Crowe questioned the method used to measure the team's success rate. Becky Plant stated that she used different ways to try and measure their success rate, e.g., comparing statistics with the other NHS trusts in the area, conducting regular surveys to gather feedback from those staff members that had used the service as well as the wider staff network to gauge the awareness of the role.</p> <p>Alex Giles informed Becky Plant that the Council of Governors were looking forward to the training session on the Freedom to Speak Up Guardian role, which was vital for them as governors to understand.</p> <p>There were no further comments or questions.</p>
	<i>The agenda sequence was altered as Catherine Holland was facing a technical problem with her laptop connection.</i>
COG 23/5	<p>Chief Executive's update (Enclosure 3/verbal)</p> <p>Diane Wake summarised the March 2023 report given as enclosure three and highlighted the following:</p> <ul style="list-style-type: none"> - The Trust continued working hard to restore operational performance to pre-COVID-19 levels. - The Trust was under pressure to manage the long waiting time for patients due to the nursing and junior doctor strikes. - The Trust, and as a system did not achieve the target to deliver zero 78-week elective breaches by the end of March 2023 and had been given an extension until the end of April to achieve this target. - The Trust had met the two-week wait standard for cancer and has seen an improvement in the number of patients waiting longer than 62 days for their treatments. - The Trust continued to focus on urgent and emergency care and has seen an improvement in reducing ambulance handover delays. - The Trust implemented measures to ensure minimal disruption to patient care during the junior doctors' strike planned for the following week. Diane Wake assured the members of the Council that the members of the Board would be on site to assist where required, as most of them are from a clinical background.

	<ul style="list-style-type: none"> - There was an unannounced CQC inspection of the Paediatrics Emergency Department on 22 February 2023. Their primary focus was on safeguarding and highlighted that intervention in cases relating to safeguarding should be done in real-time. The CQC also highlighted their concerns regarding training on safeguarding, and the Paediatrics Emergency Department team had now achieved 100% training on this subject matter. Diane Wake informed the Council of Governors that the CQC report would be published the following day. Andy Proctor provided positive assurance on the feedback received from CQC. He stated that three events would be coming up shortly to share the learning across the organisation, particularly around mandatory training. - The Trust was being investigated for an incident earlier this month where a baby transferred out of the hospital had sadly passed away at another hospital. The investigation was being carried out on the level of care and management that the baby received during her hospital admission with the Trust. The Trust is cooperating with the police on this investigation, and the organisation is supporting the staff on the unit. <p>Alex Giles commended the Trust for the prompt actions following the CQC investigation. He also thanked Diane Wake for updating the Council of Governors on the Serious Incident investigation that was currently being carried out.</p> <p>Action: Press release issued by the Care Quality Commission regarding their unannounced visit to the Paediatrics Emergency Department at Russells Hall Hospital to be shared with the Council of Governors.</p> <p>There were no further comments.</p>
COG 23/6	<p>Chair's Update (Enclosure 4)</p> <p>The Chair summarised the March 2023 report given as enclosure four. He informed the Council of Governors that the Trust was recruiting for a Deputy Chair position, as Sir David Nicholson is now the Chair for all four acute trusts in the Black Country System.</p> <p>He highlighted the following points in the report:</p> <ul style="list-style-type: none"> - Financial forecast for 2023/24 and beyond for both the Trust and System would be very challenging, and further work was required to address the deficit situation for both the System and the Trust. - During the staff voice session at the Board meeting in March – staff from the pharmacy team attended to talk about their role and, in their own words, say what it is like to work at the Trust. He noted the passion with which the staff spoke about their roles at the Board meeting and today. - A three-year cost Digital plan would be prepared and submitted to the board to address infrastructure and digital applications concerns. - A report has been requested to review the consequence of the ban on agency staffing and its impact on staffing and patient care. <p>Alex Giles commended the pioneering work done by the Trust in recruiting Patient Safety Champions. He noted the valuable feedback and the challenges the Patient Safety Champions demonstrated at the committee meetings. Liz Hughes pointed out that the Trust is the only one in the region to have Patient Safety Partners attend the Quality and Safety Committee meeting.</p> <p>There were no further comments.</p>
COG 23/7	<p>Lead Governor Update (Verbal)</p> <p>Lead Governor Alex Giles verbally updated the governor's activities for the last quarter.</p> <p>He noted the recent training sessions attended by the governors, especially the session related Membership and Public Engagement. He was looking forward to attending the</p>

	<p>future governor training and development activities planned for the remainder of the year. He commended Natalie Launchbury and her team on the new format of the Quality and Safety reviews. He stated that the new design was easy to follow, allowing governors to provide detailed feedback.</p> <p>He provided an update on the meeting held by the Task and Finish group set up to review the Governor and Membership Engagement Plan for 2023 – 25. He stated that the group would meet again the following month and an update would be provided at the next meeting.</p> <p>He called on the governors to provide feedback on the committee meetings they attend. Alan Rowbottom provided input on the different committee meetings that he regularly attended. He found the discussions at the committee meetings interesting as it gave him good insight into the workings of the Trust, the challenges that the Trust is currently facing, and the measures and steps put into place to counteract those challenges.</p> <p>Alex Giles assured the Council of Governors of the robust recruitment process used by the Trust to carry out the recent interviews for Deputy Chair and Associate Non-executive Director positions.</p> <p>Lastly, he provided an update on the preparation of the governor comment for inclusion in the Quality Account. A Task and Finish Group would be arranged next month to compile the comment for the Quality Report 2022/23.</p> <p>Andy Proctor invited the Council of Governors to attend the Board Committee meetings and encouraged them to participate during the meetings as their input/insight into matters was valued by the Board members.</p> <p>There were no comments or questions.</p>
COG 23/8	<p>Trust Quarterly Strategy Report and forward planning update (Enclosure 5)</p> <p>Kat Rose summarised the quarter three report given as enclosure five. She informed the Council of Governors that detailed information on progress was submitted to the sub-committees, and governors that attend those meetings would be aware of that.</p> <p>She informed the council that the focus in the last quarter was on the Workforce Committee around vacancies, and she was happy to note that the Trust had met its target of 7%. The focus would now be on retention and keeping it at that level.</p> <p>The team was working on the quarter four report, which reinforced a positive trend in maintaining the vacancy level. The challenge for the team in the next quarter would be the financial element and the pressures related to urgent and emergency care services.</p> <p>Ian Chadwell provided the Council of Governors with an update on the forward plan for the next financial year. The clinical emphasis would continue to be on elective recovery. He informed the group that Teledermatology was being rolled out across the Black Country, showing a transformation in how service was delivered to the patients. The initiative would provide extra capacity to see new patients and maximise the use of clinics. The focus for recruitment was on training the international nurses to get the relevant local registrations and retaining staff to reduce agency hire.</p> <p>He also provided a brief update on the financial challenges being faced by the Trust and the whole system. He informed the Council of Governors that they could not share the budget plan for the next financial year at this meeting as it was still pending approval.</p> <p>Action: Annual Business Plan 2023-24 summary report to be shared with the Council of Governors.</p> <p>There were no comments or questions.</p>

	<i>Agenda moved back to the normal sequence</i>
COG 23/4.3	<p>Appointments & Remuneration Committee (Enclosure 2)</p> <p>The Chair informed the members of the Council that he would be stepping out of the meeting during the discussion of this section as one of the items in this enclosure pertained to his role as a Non-executive Director. He handed over the chairing of this item to Mrs Board and Lead Governor Alex Giles as Non-executive Director Catherine Holland was still facing a technical problem and could not join the meeting.</p> <p>Non-executive directors Gary Crowe and Lowell Williams were also requested to leave the meeting for this item.</p> <p>At a meeting held earlier in the day, the Council of Governors Remuneration and Appointments Committee was asked to consider a recommendation to be made to the full Council for the renewal of the Terms of Office for the following Non-executive directors:</p> <ul style="list-style-type: none"> - Thuvarahan Amuthalingam – brought a wealth of primary care and leadership experience to the Board. He is an associate NED in his second year with the Trust. The recommendation made to the Council was to renew his term of office until the end of May 2024. - Julian Atkins – was in his seventh year with the Trust as a Non-executive Director. Usually, a Non-executive Director would serve a maximum term of six years, and any extension beyond that point would undergo rigorous scrutiny. Julian Atkins chaired the Workforce Committee and Charitable Funds Committee. He also actively supported the development of the Trust equality, diversity and inclusion network. The recommendation to the Council was to renew his term of office until the end of May 2024. - Lowell Williams – was a substantive Non-executive Director and chaired the Finance and Performance Committee. The recommendation made to the Council was to extend his term of office for another three years until the end of March 2026. <p>The Council of Governors agreed to endorse all of the above recommendations.</p> <p>Alex Giles informed the Council of Governors that the selection process for the Deputy Chair position had been paused due to unforeseen circumstances. A process has been put in place to endorse this appointment online, and the Council of Governors would be advised on the next steps for this endorsement.</p> <p>Helen Board provided a brief update on the interview selection process followed by the Trust. The Council of Governors were requested to endorse the appointment of Joanne Hanley as a Non-executive Director who brought a wealth of knowledge in finance. She also had strong ties with the local community and would be an asset to the cohort of non-executive directors.</p> <p>The Council of Governors agreed to endorse the appointment of Joanne Hanley as a Non-executive Director.</p> <p>There were no further comments.</p>
COG 23/9	<p>Board Secretary Update (Enclosure 6)</p> <p>Helen Board provided a brief update on the Board Secretary report given as enclosure six and noted the following two items:</p> <ul style="list-style-type: none"> - Governor elections were underway for the Public constituency in Halesowen and the staff constituency for Non-clinical. Nominations for these two positions would close on 26 April 2023. - Addendum to the Council of Governors' statutory duties – no change to the statutory role and responsibilities of the Council of Governors. NHS England has

	<p>amended a minor change to the statutory duties for governors, which is to move to a wider system working.</p> <p>Helen Board sought approval from the Council for the following two items:</p> <ul style="list-style-type: none"> - The Trust Constitution had undergone an intermediate review and was presented for approval. A new code of governance has been issued, effective from the 1st of April 2023 and would be reflected in the Trust Constitution. A full review of the Trust Constitution will take place in late summer/early autumn. - Governors to endorse the Terms of Reference for the Council of Governors. One minor change was proposed to the Terms of Reference in relation to the addendum to the Governor's statutory duties. <p>The above two items were approved by the Council of Governors.</p> <p>There were no comments.</p>
COG 23/10	<p>Financial & Performance Committee upward report and update on financial planning 2023-24 (Enclosure 7/Verbal)</p> <p>Lowell Williams provided a brief presentation of the Finance & Performance Committee upward report given as enclosure seven. He stated that the extraordinary aspects that the Finance and Performance Committee was currently dealing with were related to the budget for the next financial year. He noted the excellent work done by the Trust last year in managing the finances by reducing the reliance on agency staff without compromising patient experience.</p> <p>He stated that the trusts were moving into a new model of managing their resources collectively within their respective system this year. The trusts in the Black Country were an outlier, as the current forecast deficit was one of the worst in the country. All the trusts within our system must work together through the challenges to identify ways to reduce this deficit. He assured the Council of Governors that the current financial position in which the Trust finds itself is not through a lack of trying/effort but was a genuine problem for which they need to find a solution and overcome.</p> <p>Diane Wake agreed with Lowell Williams and stated that the trusts in the area need to learn to work together financially as system partners as they do operationally. She noted that the system has managed to reduce the deficit to 151 million. She supported having a multi-year financial plan for individual organisations and the System to come together to a balanced position in the next three to five years. Reducing the deficit further this year would potentially compromise quality and safety across the system.</p> <p>Kevin Stringer agreed with Diane Wake and Lowell Williams on the system's financial position. He stated that we need to prove to the regulators that we have a good action plan to address the financial deficit without causing harm to our patients to prevent regulatory action from being imposed on the system. He also agreed with Diane Wake that the system would need around five years to create a credible financial plan.</p> <p>On behalf of the Council of Governors, Alex Giles extended his grateful thanks to the finance team and other members of the Trust for all the effort and time the team is putting in to find a solution to the current financial problem.</p> <p>There were no further comments.</p>
COG 23/11	<p>Integrated Performance Report (Enclosure 8)</p> <p>Karen Kelly provided a brief overview of the Integrated Performance report given as enclosure eight. She highlighted the following from the report:</p> <ul style="list-style-type: none"> - Improvement with ambulance handover; however, there is still further work around triage and overall performance against the 4-hour Emergency Department target.

	<ul style="list-style-type: none"> - The Trust met the Cancer 2-week wait time. Further work is needed throughout the cancer pathways, including diagnosis within 62 days. - The Trust continues to be on track to deliver zero 78-week+ breaches by the end of March. <p>There were no comments or questions.</p>
COG 23/12	<p>Quality and Safety Committee Upward Report (Enclosure 9)</p> <p>The Quality and Safety Committee Upward report was presented by Liz Hughes, which is given in enclosure nine.</p> <p>She felt able to assure the Council of Governors on maternity services and referenced the positive outcome of the Integrated Care Board Lead peer review in February, highlighting the robust and forward-thinking leadership of Claire MacDiarmid, Head of Midwifery. She also told the council that the Trust was gaining a good name as a place where fantastic research was being conducted.</p> <p>There were no comments or questions.</p>
COG 23/13	<p>Experience & Engagement Committee Update (Enclosure 10)</p> <p>Alex Giles summarised the Experience and Engagement Committee update given in enclosure 10. He highlighted the concern raised in the last meeting regarding the need to promote membership as the Trust was close to its required membership number of 13,000.</p> <p>He advised that an action plan has been implemented to ensure that the vacant Chair position for the Experience and Engagement Committee is filled up soon. He spoke about the excellent work being put together by the Task and Finish Group to review the Governor and Membership Engagement Plan for 2023 – 25. Governors were allowed to share their thoughts and ideas on the engagements they would like to participate in over the next year.</p> <p>There were no comments or questions.</p>
COG 23/14	<p>Digital Trust Technology Committee Update (Enclosure 11)</p> <p>Vij Randeniya highlighted the key points from the Digital Trust Technology Committee update, as Catherine Holland had a technical problem with her internet connection and was unable to re-join the meeting.</p> <p>The key concerns highlighted by Vij Randeniya were as follows:</p> <ul style="list-style-type: none"> - Several key appointee positions remained unfilled up in the Trust to ensure sufficient clinical representation at the committee meetings. - The Black Country Integrated Care Board was serviced by four IT Service Providers, including the Dudley Group NHS Foundation Trust (TeraFirma). There was a potential risk that the ICB might secure a single supplier of IT services in the future, which could result in a loss of income for the Trust should an alternative supplier to TeraFirma be selected. <p>Positive assurance was received on developing the Digital Plan with good progress on the analysis and costings.</p> <p>There were no comments or questions.</p>
COG 23/15	<p>Workforce & Staff Engagement Committee Update (Enclosure 12)</p> <p>Julian Atkins summarised the upward report given as enclosure 12. He informed the Council of Governors that the figures in March 2023 for sickness absence, turnover and</p>

	<p>mandatory training had improved compared to January 2023. Significant work was underway to develop an externally available webpage for staff to access training.</p> <p>Staff vacancy rates had continued to decrease, and the Trust has achieved its target of 7%. There were 180 WTE (Whole Time Equivalent) graduate and international nurses in post awaiting their registration or completion of their Objective Structural Clinical Examination (OSCE). On completion, this would provide a nursing vacancy figure of 87.01 WTE.</p> <p>The Dudley People Plan was developed in 2019 and is currently being reviewed. The Dudley People Plan 2023-25 will be aligned to the Trust Strategy and include five key workforce journeys (Recruitment & Retention, Development Opportunities, Health & Wellbeing, Equality, Diversity & Inclusion and Continuous Improvement), providing clear priorities and objectives around the employee lifecycle.</p> <p>Alex Giles commented on the progress made over the last few months with mandatory training and the appraisal process.</p> <p>There were no further comments or questions.</p>
COG 23/16	<p>Any other Business (Verbal)</p> <p>There was none raised.</p>
COG 23/17	<p>Reflections on the meeting (Verbal)</p> <p>The Chair commended the staff for their excellent presentations at the start of the meeting and also the Chairs from the various committees for their updates. Diane Wake also praised the team from the Allied Health Professionals for their excellent presentations and noted their enthusiasm and energy when they spoke about their roles. She also assured the Council of Governors that the Trust would review the things requested by the staff members to help them with their daily work. Alex Giles and Alan Rowbottom also commended the staff members for their excellent presentations on behalf of the Council of Governors.</p>
COG 23/18	<p>Close of meeting and forward Council of Governor meeting dates: 2023/24</p> <p>The next meeting will be held on the 22nd of June.</p> <p>The meeting closed at 18:20 hrs.</p>

Mr Julian Atkins, Chair of the meeting

Signed..... Dated

Outstanding
To be updated
Complete

Item to be addressed

Item to be updated

Item complete

Council of Governors meeting held 05th April 2023

Item No	Subject	Action	Responsible	Due Date	Comments
COG 23/4.1	Staff Voice	Karen Kelly will share the staff members' comments on the progression and equipment needed by the team with Karen Lewis, Head of Allied Health Professionals. Update: The Trust has agreed trust wide career framework in place that covers AHP's the Black County AHP faculty are also developing further support / development opportunities	Karen Kelly	April 2023	Complete
COG 23/8	Trust Quarterly Strategy Report and forward planning update	Annual Business Plan 2023-24 summary report to be shared with the Council of Governors.	Board Secretary	April 2023	Complete
COG 23/5	Chief Executive's Update	Press release issued by the Care Quality Commission regarding their unannounced visit to the Paediatrics Emergency Department at Russells Hall Hospital to be shared with the Council of Governors.	Board Secretary	April 2023	Complete

Paper for submission to the Council of Governors 22nd June 2023

Title:	Appointments Committee update to Council
Author:	Helen Board, Board Secretary
Presenter:	Sir David Nicholson, Chair

Action Required of Council

Decision	Approval	Y	Discussion	Other
Recommendations: The Council is asked to: <ul style="list-style-type: none"> • Approve the Terms of Reference that have undergone an annual review • note the process for appointment of the non-executive director, associate non-executive director and deputy chair • To formally endorse the recommendation of the Remuneration and Appointments Committee to appoint Professor Gary Crowe to the role of Trust deputy chair and Professor Anthony Hilton to the role of associate non-executive director • To note the proposed 2022/2023 non-executive director and chair appraisal process 				

Summary of Key Issues:

The summary given below reflects matters considered at the meeting of the Remuneration and Appointments Committee on 15th June 2023.

1. Terms of Reference

In line with best practice, the Terms of Reference have been subject to an annual review with two minor amendments – see appendix 1

- Amendment to update 'Trust' Secretary to 'Board' secretary
- Addition of Deputy chair in section updated to reflect the chairing of the committee meeting by either the Chair or Deputy Chair.

Recommendation

The Council is asked to formally approve the updated Terms of Reference.

2. Non-executive and deputy chair recruitment

The non-executive directors provide independence, balance and challenge to the executive element of the board of directors. As of 1st April 2023, Sir David Nicholson became chair of all four trusts. This is to provide a strategic view across the collaborative with the appointment of a deputy chair at each of the providers.

The recruitment process was agreed at the Full Council of Governors meeting held 5th April 2023.

The associate and non-executive director recruitment process has involved the following key steps:

- Development of the Candidate information pack
- Appointment of a Hunter Healthcare to undertake executive search and longlisting activities during January and February 2023 for associate and non-executive director roles
- Shortlisting panel convened
- Interview panel convened
- Outcome considered by the Remuneration and Appointments Committee to agree recommendation for formal endorsement by the full Council of Governors.

The deputy chair recruitment process has involved the following key steps:

- Call for expressions of interest from existing non-executive directors at each trust
- Interview panel convened on Thursday 30th March 2023 comprising:
 - Chief Executive Officers or nominated deputies from each trust
 - Chair, Sir David Nicholson
 - Chief People Officer, Sandwell & West Birmingham NHS Trust
 - Lead governor, The Dudley Group NHS Foundation Trust
 - Non-executive director from the Integrated Care Board (external panel member)
- Outcome of the selection and interview process in respect of the Dudley role considered by the Remuneration and Appointments Committee to agree recommendation for formal endorsement by the full Council of Governors

Recommendation

The Council is asked to formally endorse the recommendation of the Remuneration and Appointments Committee to appoint:

- Professor Anthony Hilton, Associate non-executive director appointed for one year, minimum time commitment of at least three days a month with remuneration set at £13,190 per annum
- Professor Gary Crowe, appointed as deputy chair. The appointment to be for the remainder of his current term ending 30 June 2025. Minimum time commitment of 1.5 days per week (one day on site) with remuneration at £25k per annum.

3. Non-executive director full year appraisal 2022/23

The Council is advised that NHS trusts are responsible for ensuring that the chair and non-executive directors (NEDs) receive regular appraisals of their performance, at least annually. Trusts can determine the approach to appraisal that is most relevant to their local circumstances.

The proposed appraisals process for the full year 2022/23 is scheduled to conclude by 31st July 2023 to align with the Trusts appraisal window:

non-executive director

- Gather 360 degree feedback survey based on NHS England framework to reveal perceived strength and development needs See appendix 1
- Deputy chairman to complete non-executive director appraisals, set objectives and determine any development needs

Chair (part year appraisal)






- Gather 360 degree feedback survey based on NHS England framework to reveal perceived strength and development needs
- Senior Independent non-executive director to complete chair's appraisal, set objectives and determine any development needs

Reporting

- Chairs appraisal outcome to be circulated to Remuneration and Appointments Committee members prior to submission to NHS England by 31st July 2023
- Summary of chair appraisal and all non-executive director appraisals to be considered at a September meeting of the Remuneration and Appointments Committee ahead of upward reporting to the full Council in October 2023.

Fit and Proper Persons

To note that all NEDs have completed the self-assessment against the Fit and Proper Persons test and that there are no issues of non-compliance to report. To note that NEDs maintain an up to date record of interests as required.

Impact on the Strategic Goals			
	Deliver right care every time		Y
	Be a brilliant place to work and thrive		Y
	Drive sustainability (financial and environmental)		Y
	Build innovative partnerships in Dudley and beyond		Y
	Improve health and wellbeing		Y
Implications of the Paper:			
Risk		N	Risk Description:
	On Risk Register:	N	Risk Score:
Compliance and/or Lead Requirements	CQC	Y	Details: Well-led
	NHSE	Y	Details: Code of Governance
	Other	N	Details:
Report Journey/ Destination	Working / Exec Group	N	Date:
	Remuneration & Appointments Committee	Y	Date: 05/04/2023 & 15/06/2023
	Board of Directors	N	Date:
	Council of Governors	Y	Date: 05/04/2023 & 22/06/2023 Online 10 th May & 21 st April 2023

REMUNERATION and APPOINTMENTS COMMITTEE (COUNCIL OF GOVERNORS)

TERMS OF REFERENCE

1. Constitution

- 1.1 The Council of Governors' Remuneration and Appointments Committee (the Committee) is constituted as a standing committee of the Council of Governors. Its constitution and terms of reference are set out below.

2. Authority and Scope of Powers

- 2.1 The Committee is authorised by the Council of Governors to act within its terms of reference. All members of staff are requested to co-operate with any request made by the Committee.
- 2.2 The Committee is authorised by the Council of Governors to request professional advice and request the attendance of individuals and authorities from outside of the Trust with relevant experience and expertise if it considers this necessary for or expedient to the exercise of its functions.

3. Purpose

- 3.1 The Committee is responsible for advising the Council of Governors on the remuneration and appointment of the Chairman and Non-executive Directors. The Council of Governors, on the recommendation of the Remuneration and Appointments Committee, is responsible for setting the remuneration and appointment of the Chairman and Non-executive Directors at a General Meeting.

4. Membership and Chairmanship

- 4.1 The membership of this Committee will be:
- The Trust Chair;
 - The Lead Governor;
 - Minimum of five other Governors, including at least two public governors and one stakeholder governor.
- 4.2 The Trust Chair will generally chair the Committee. In the absence of the Trust Chair or Deputy Chair, if either has a conflict of interest, for example, when the Committee is considering the Chairman's appraisal, re-appointment or remuneration, the meeting shall be chaired by the Lead Governor. Matters relating to the Chair's appraisal, reappointment or remuneration will be presented by the Senior Independent non-executive director.

5. Attendance

- 5.1 Other managers/staff may be invited to attend meetings depending upon issues under discussion, in particular, it is expected that the Board Secretary and a senior representative from HR will be in attendance to offer advice and support the Committee.

- 5.2 The Board Secretary will ensure that an efficient secretariat service is provided to the Committee.

6. Quorum

- 6.1 A quorum will consist of four Governor members and the Trust Chair (or deputy chair in the absence of the Chair).

7. Frequency of meetings

- 7.1 Meetings will be called as required.
- 7.2 Ad hoc meetings can be called by the Trust Chair or as a result of a request from at least two members of the Committee. The request is to be made to the Trust Chair.
- 7.3 It is expected that members attend all meetings as much is practicably possible.

8. General duties of the Committee

- 8.1 The Committee shall have such power and be subject to such conditions (as to reporting back to the Council), as the Council shall decide and shall be in accordance with the Regulatory Framework and any guidance issued by the Independent Regulator. Such terms of reference shall have effect as if incorporated into the Standing Orders.
- 8.2 To discharge any action required of it from the Council of Governors.

9.0 Specific duties of the Remuneration and Appointments Committee will be to;

Appointments role

The Committee will:

- a) Periodically review the balance of skills, knowledge, experience and diversity of the non-executive directors and having regard to the views of the board of directors and relevant guidance on board composition, make recommendations to the Council of Governors with regard to the outcome of the review.
- b) Review the results of the board of directors' performance evaluation process that relate to the composition of the board of directors.
- c) Review annually the time commitment requirement for non-executive directors.
- d) Give consideration to succession planning for non-executive directors, taking into account the challenges and opportunities facing the Trust and the skills and expertise needed on the board of directors in the future.
- e) Make recommendations to the Council of Governors concerning plans for succession, particularly for the key role of chairman.
- f) Keep the leadership needs of the Trust under review at non-executive level to ensure the continued ability of the Trust to operate effectively in the health economy.
- g) Keep up to date and fully informed about strategic issues and commercial changes affecting the Trust and the environment in which it operates.

- h) Agree with the Council of Governors on a clear process for the nomination of a non-executive director. This process should ensure that any regulatory requirements or FT Code of Governance recommendations (such as the “Fit and Proper” test and the need to confirm the status of any non-executive required to be independent) are complied with.
- i) Take into account the views of the board of directors on the qualifications, skills and experience required for each position.
- j) For each appointment of a non-executive director, in conjunction with the Board Secretary and Director of Workforce, prepare a description of the role and capabilities and expected time commitment required.
- k) Identify and nominate suitable candidates to fill vacant posts within the Committee's remit, for appointment by the Council of Governors.
- l) Ensure that proposed non-executive directors' other significant commitments are disclosed to the Council of Governors before appointment and that any changes to their commitments are reported to the Council of Governors as they arise.
- m) Ensure that proposed appointees disclose any business interests that may result in a conflict of interest prior to appointment and that any future business interests that could result in a conflict of interest are reported.
- n) Ensure that on appointment non-executive directors receive a formal letter of appointment setting out clearly what is expected of them in terms of time commitment, committee service and involvement outside board of director meetings.
- o) Advise the Council of Governors in respect of the re-appointment of any non-executive director. Any term beyond six years must be subject to a particularly rigorous review and in line with NHSI guidance.
- p) Advise the Council of Governors in regard to any matters relating to the removal of office of a non-executive director.
- q) Make recommendations to the Council of Governors on the membership of committees as appropriate, in consultation with the chairs of those.

Remuneration role

The Committee will:

- a) Recommend to the Council of Governors a remuneration and terms of service policy for non-executive directors, taking into account the views of the Chair (except in respect of his/her own remuneration and terms of service) and the Chief Executive and any external advisers.
- b) In accordance with all relevant laws and regulations, recommend to the Council of Governors the remuneration and allowances, and the other terms and conditions of office, of the non-executive directors.
- c) Agree the process and receive and evaluate reports about the performance of individual non-executive directors and consider this evaluation output when reviewing remuneration levels.
- d) In adhering to all relevant laws and regulations establish levels of remuneration which:
 - are sufficient to attract, retain and motivate non-executive directors of the quality and with the skills and experience required to lead the Trust successfully, without paying more than is necessary for this purpose, and at a level which is affordable for the Trust;
 - reflect the time commitment and responsibilities of the roles;

- take into account appropriate benchmarking and market-testing, while ensuring that increases are not made where Trust or individual performance do not justify them; and
- are sensitive to pay and employment conditions elsewhere in the Trust.

10. Reporting

- 10.1 The Committee shall report in writing to the Council of Governors the basis for its recommendations. The Council shall use the report as the basis for their decisions, but remain accountable for taking decisions on the appointment, remuneration and terms of service of the Chair and Non-executive Directors.
- 10.2 The Committee will receive reports from the Trust as required to enable the members to fulfil the duties described above.
- 10.3 The Committee will also receive reports to support the business of the Committee commensurate with the duties requested by the Council of Governors. Any recommendations made by these committees will require ratification by the full Council of Governors.

11. Review

- 11.1 The Terms of Reference of the Council of Governors committees shall be reviewed at least annually or as part of any application to amend the Constitution of the Trust.






Date of next review: June 2024

Paper for submission to the Council of Governors on 22 June 2023

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 is asked to note and comment on the contents of the report.			

Summary of Key Issues:
<ul style="list-style-type: none"> • Operational Performance • Charity Update • Healthcare Heroes • Leadership Conference • Patient Feedback • Awards • Visits and Events

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

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	N	Details:
	Other	N	Details:

Report Journey/ Destination	Working / Exec Group	N	Date:
	Committee	N	Date:
	Board of Directors	Y	Date: 11 May 2023
	Council of Governors	Y	Date: 22 June 2023

CHIEF EXECUTIVE'S REPORT – PUBLIC BOARD – 11 MAY 2023

Operational Performance

Continued improvement against the cancer 2 week wait standard has resulted in the Trust attaining this target in February (last fully validated position). February's performance of 93.8% (against a target of 93%) is the highest since summer 2022 and follows the completion of a full demand and capacity modelling exercise that has been completed for all tumour sites through the Outpatient Improvement Group, with outputs resulting in an injection of additional baseline 2 week wait outpatient appointments and further development of 'straight to test' pathways. At the time of writing, data for March shows performance consistent with that seen in February, demonstrating two months of significant improvement and attainment of the standard.

Performance against national elective recovery targets remains in a positive position. At the end of March, the Trust reduced the backlog of patients waiting over 78 weeks to a total of 9 patients. The Trust also reported the 8th shortest median wait times across the 20 regional Trusts. Focus over coming months will centre on working towards achieving the next recovery and restoration target of zero 65 week + breaches.

Urgent and Emergency care continues to experience a challenging operating environment but is seeing some positive improvements; Emergency Department 4 hour performance remained below target at 72% during March, but is just short of the interim 76% target. March saw the busiest month since November 2022, with over 9,000 ED attendances which in part led to triage performance falling to 69.3%. The Emergency Department continues to increase the number of nurses who are ESI triage model trained, with a further training cohort having now been approved. The nursing teams have also devised new staffing rotas to provide x4 ESI trained triage nurses per shift, with this model commencing on 30th April.

Charity Update

The Superhero Fun Run is back this year with a family fun day element to the event alongside our colleagues in the Children's Department. It's taking place on Sunday 11th June 2023 at Himley Hall, with the race starting at 11am. All the funds raised will support our Children's Appeal. The event will consist of a 5km sponsored walk, run or jog and a family arena where there will be a variety of stalls and vendors including face painters, games and cake sales! All are welcome!

Healthcare Heroes

January 2023

January's team award went to our Medical Photography Department. They are a small team that caters for the entire hospital. They are highly devoted and extremely hardworking to make sure that they provide the best service possible for patients. The team play a huge role across the Trust and in the community, visually documenting the treatment of patients to aid in their treatment plans. They are an extremely specialised team, working closely with many departments and deserve for all their hard work to be appreciated.

January's individual award went to Daniel Mofina. Daniel was nominated by a colleague as they believed he deserved to be recognised for his commitment to patient care. Specifically, when he went the extra mile to care for a non-verbal patient. He knew that this patient had a love for Shakespeare so went out of his way to obtain a Shakespeare book and read to them. He has also been recently highlighted in the national AHP support worker awards by Health Education England under the category 'Supporting our People.'

February

In February, we presented a healthcare heroes team award to the Alcohol Care Team who provide invaluable service to the whole Trust. All their hard work over the last 12 months has helped reduce hospital admissions and allowed ward C7 to focus on more than just alcohol detox. The team has exceptional knowledge, helping nurses and doctors with detoxing patients and advising what to prescribe. They are a compassionate and caring team with years of experience and are extremely approachable and kind. They are an asset to our Trust.

The February individual award went to community professional development nurse April Burrows. April hasn't been in the role long; however, she has already proven to be a pillar of support to the community nursing teams, delivering key aspects of mandatory and clinical training to all staff. She has thrown herself into this role and is always there to guide any new members of staff and develop their skills. Her colleagues describe her as an advocate for student nurses and new members of staff, especially being an IT wizard! April was also recognised for her selfless support to the district nursing team, pausing her own workload to go out and visit patients in the community.

March

March's healthcare heroes individual award went to one of our midwives, Emma Oxford. Emma was nominated for her role within the Maternity Department as a professional midwifery advocate, meaning she has been providing amazing emotional support to many midwives. Emma has such a kind and compassionate nature and always makes sure to follow up with individuals for emotional wellbeing checks.

We presented another healthcare hero team award last month to the intermediate care team who are based at Tiled House. This small team was nominated for the excellent patient care they provide in the community every day. Their devotion to patient centred care, especially those who may be at the end of their life, doesn't go unnoticed. They are always there to support each other and have recently received feedback on the positive way they support student nurses joining the team.

Leadership Conference

We held our first leadership conference 26th April to support our strategic goals of 'Be a Brilliant place to work and Thrive' and 'Build innovative partnerships in Dudley and beyond'. Creating a culture of collaboration is key to the Trust and for our staff who need to thrive at work to provide excellent healthcare, improved health for all. Our leadership conference gave us some time and space to hear from experts, discuss future plans and consider how we will deliver them, and hear from some of our own shining stars who delivered amazing and insightful TedX style talks.

We were very pleased to welcome motivational speaker Paul McGee who provided insights, inspiration and practical tools to help us get the best from ourselves and others. More than 150 people attended and contributed to some fabulous ideas in our 'Dudley Ideas Den' and shared their thoughts about the culture of our organisation and how we can all help shape it. We are looking forward to sharing the content more widely across our organisation.

Patient Feedback

Accident & Emergency – We appreciated the speedy response to potential cardiac issues. All tests were done swiftly and we were in and out in three hours.

Ambulatory Emergency Care – Very good, very caring and calming towards me as I was very frightened with not being able to breathe with my COPD complaint.

District Nurses (Out of Hours) - Staff were very patient, informative and able to find out the problem I was in.

GI Unit - The staff were friendly and accommodating, highly competent and inspired a relaxed treatment atmosphere.

Leg Ulcer - Staff were extremely caring and friendly. Took good care of me.

Maternity (Birth) - All staff we encountered were fantastic, friendly and reassuring. The atmosphere made me feel more relaxed as I am nervous.

Maternity - I am extremely grateful for the care that I received during my pregnancy, c-section and recovery after the birth of my daughter. Every single member of staff on the maternity ward and neonatal team that cared for us was very professional and very caring.

Ophthalmology - Quick attention, caring staff and clear explanations of findings and future procedures.

Ward A4 - All the staff were really friendly and professional; they all cared about me and how I felt. Great experience from checking in until after operation.

Ward C2 (Children's) - All staff were friendly, respectful, and helpful. They all spoke to my child asking how he felt asking if he needed anything. Made sure I understood things and asked if I needed anything.

Ward C7 - Nurse in renal was amazing. Excellent ward, great job. Amazing, gone above and beyond, treated me like I was her own father.

Awards

Committed to Excellence

We are looking forward to celebrating the outstanding work of our staff, who work clinically and non-clinically, at our annual staff awards in June. Committed to Excellence recognises individuals and teams who have made an outstanding contribution to their ward or department and who have, in some way, helped to make a real difference to patients. The 22 award categories this year include two lifetime achievement awards and a special award to mark the NHS 75th birthday. Winners will be announced at an awards ceremony on 16th June. We wish all the finalists the very best of luck!

The Safety and Health Excellence Awards

Our corporate resilience team has received a Highly Commended award at a national health and safety awards event. The team picked up the accolade at the The Safety & Health Excellence Awards 2023 in the category of 'best use of health & safety data to lower incident rates'. This is in relation to the data that has been collated using the in-house dashboard to monitor incidents, identify trends and implement actions to mitigate and control. Well done to the team for this well deserved recognition.

Visits and Events

01/03/23	Get it Right First Time (GIRFT) Review - High Volume Low Complexity Cases
02/03/23	Get it Right First Time (GIRFT) Review – Adult orthopaedic Trauma deep dive
02/03/24	Principled of Health Command training completed






12/03/23	Integrated Care Board Development Session
16/03/23	Black Country Provider Collaborate - Executive
17/03/23	MP Briefing
20/03/23	Integrated Care System Cancer Board
21/03/23	West Midlands Cancer Alliance Board
22/03/23	Black Country & West Birmingham Diagnostic Strategic Board
23/03/23	Black Country Provider Collaborative Clinical Summit
23/03/23	Black Country Quarterly System Review
28/03/23	Integrated Care System Productivity and Value Group
30/03/23	Black Country Integrated Care Board
03/04/23	Black Country Provider Collaborative – Executive
12/04/23	Integrated Care System Productivity and Value Group
13/04/23	DGFT Board of Directors Culture development
17/04/23	Integrated Care System Cancer Board
19/04/23	Integrated Care Board and NHS Trusts - NHS Leadership Event
25/04/23	Dudley Group and Black Country Healthcare Board to Board
25/04/23	Black Country and West Birmingham Diagnostic Strategic Board
26/04/23	Get it Right First Time (GIRFT) review – Outpatients

Paper for submission to the Council of Governors on 22 June 2023

Title:	Update from the May 2023 Board of Directors meeting
Author:	Helen Board, Board Secretary
Presenter:	Sir David Nicholson, Chair

Action Required of Committee / Group			
Decision N	Approval N	Discussion Y	Other N
Recommendations:			
The Council is asked to note the contents of the report.			

Summary of Key Issues:
Summary report from the Board of Directors meeting held May 2023 highlighting items of assurance, concern, action or decision.

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	Y
 Improve health and wellbeing	

Implications of the Paper:			
Risk		N	Risk Description:
	On Risk Register:	N	Risk Score:
Compliance and/or Lead Requirements	CQC	N	Details:
	NHSE	N	Details:
	Other	N	Details:

Report Journey/ Destination	Working / Exec Group	N	Date:
	Committee	N	Date:
	Board of Directors	N	Date:
	Other	Y	Date: Full Council of Governors meeting – 22/06/2023

CHAIRS LOG

UPWARD REPORT FROM THE BOARD OF DIRECTORS (public session)

Date Board last met: 11TH May 2023

MATTERS OF CONCERN OR KEY RISKS TO ESCALATE

- A revised financial plan for 2023/24 was considered and noted the challenge in reaching an agreed position that was acceptable to the System. There remained significant levels of unidentified Cost Improvement Programme(CIP) for 2023/24 with an emphasis to improve productivity.
- Mandatory training still remains a concern with some improvement noted.
- Industrial action by junior doctors and nurses had impacted on some delivery of elective work.
- Urgent and emergency care activity remained challenging with Emergency Department 4 hour performance remained below target at 72% during March and short of the interim 76% target. March saw the busiest month since November 2022, with over 9,000 ED attendances.

MAJOR ACTIONS COMMISSIONED/WORK UNDERWAY

- The Chair has been appointed as Chair of Royal Wolverhampton NHS Trust and Walsall Healthcare NHS Trust.
- Work was underway to develop governance systems to support the Black Country Provider Collaborative process and promote good practice across the Black Country.
- A summit of the four organisation Board's would be arranged in the coming months.
- Workforce bridge assessment to be undertaken showing move from 2019/20 to 2022/23

POSITIVE ASSURANCES TO PROVIDE

- Patient Story – Own Bed Instead initiative – Excellent feedback and reflection on the hard work put in by the therapists, pre-operative assessment team and orthopaedic team working together to deliver great outcomes for patients.
- Three CQC inspections in the last six weeks; two of which had been unannounced and one scheduled visit that had been rescheduled from December the previous year. There had been no major concerns identified.
- Ongoing development of the three year digital plan and good performance in relation to cyber security.
- Positive results received by the Audit Committee from the auditors regarding the management of serious incidents and clinical effectiveness reviews.

DECISIONS MADE

- Professor Gary Crowe has been appointed as the Deputy Chair for Dudley Group NHS Foundation Trust for the remainder of his term of office ending 30th June 2025
- The Board Assurance Framework will be subject to a review and reset to reflect the roll over into the new financial year 2023/24. The BAF summary report was approved.
- It was noted that an agreement had been made to move cash around the local system to ensure that there was sufficient liquidity for all organisations.
- Terms of Reference were endorsed for Quality and Safety Committee, Charitable Funds Committee and Finance & Performance Committee.

- Positive performance was noted particularly around Cancer and Elective waiting times
- At the year-end of 2022/23, the Trust achieved a break-even position with its finances.
- Positive updates related to workforce including a refreshed KPI report, reduction in vacancies and retention rates and some improvement to training rates and appraisal rates. National staff survey – Significant improvement made in two areas 'We work flexibly' and 'We are a team'.
- Guardian of safe working and Freedom to Speak Up continue to support staff
- Integrated Performance Dashboard – where the management of our waiting list was commended on compared to our peers.

Chair's comments on the effectiveness of the meeting:

The following governors attended the Board of Directors meeting in May: Alex Giles, Arthur Brown, Dr Syed Gilani, Dr Atef Michael and Yvonne Peers. Robust positive discussions were held throughout the meeting. Papers were received in a timely manner with good and clear information.

Paper for submission to Council of Governors on 22nd June 2023

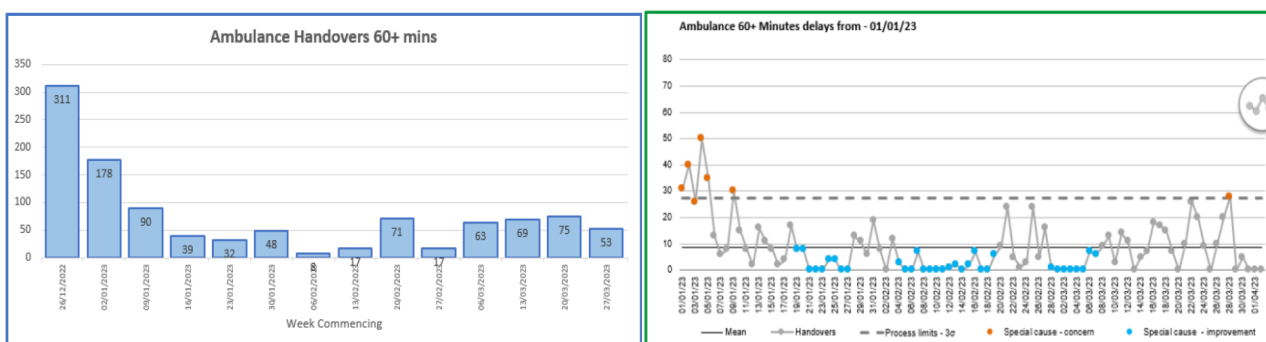
Title:	Integrated Performance Report for March 2023
Author:	Jonathan Boulter, Associate Director of Performance
Presenter:	Karen Kelly, Chief Operating Officer

Action Required of Committee / Group			
Decision	Approval	Discussion x	Other x
Recommendations: <p>This report summarises the Trust's performance against national standards and local recovery plans for the month of March 2023 (February 2023 for Cancer).</p> <p>The Council is asked to note the Trusts' performance in respect of the targets set given as dashboard on page 4.</p>			

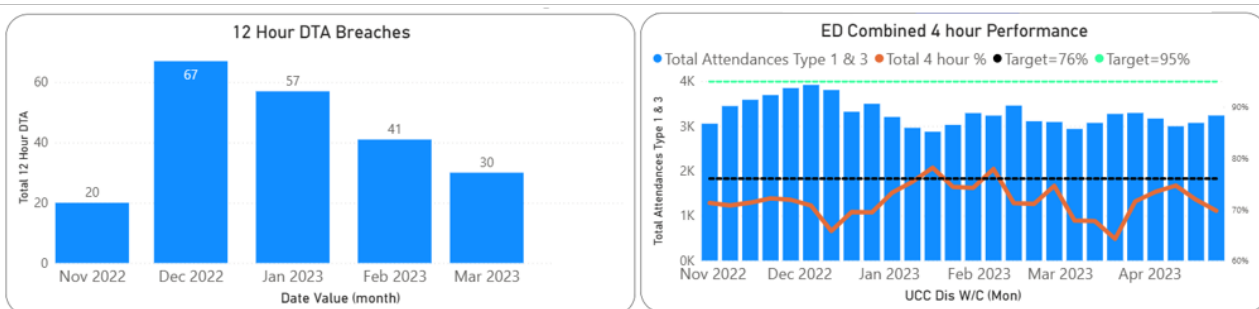
Summary of Key Issues:

1. Urgent and Emergency Care

Urgent and Emergency Care continues to experience challenges; following a noticeable reduction in the number of ambulance handover delays over 60 minutes during both late January and February, March saw a small uptick in delays in this category. This is within the context of an increase in ambulance conveyances to the Trust during the month; the Emergency Department received 3,298 ambulance arrivals in March, eclipsing volumes seen during December and January. Total ambulance delays however, remained significantly lower than those experienced in December and early January.



Emergency Department 4 hour performance remained below target at 72% during March, but is just short of the interim 76% target. March saw a decrease in the number of 12 hour Decision to Admit breaches compared to February, which represents a reduction for the third consecutive month.

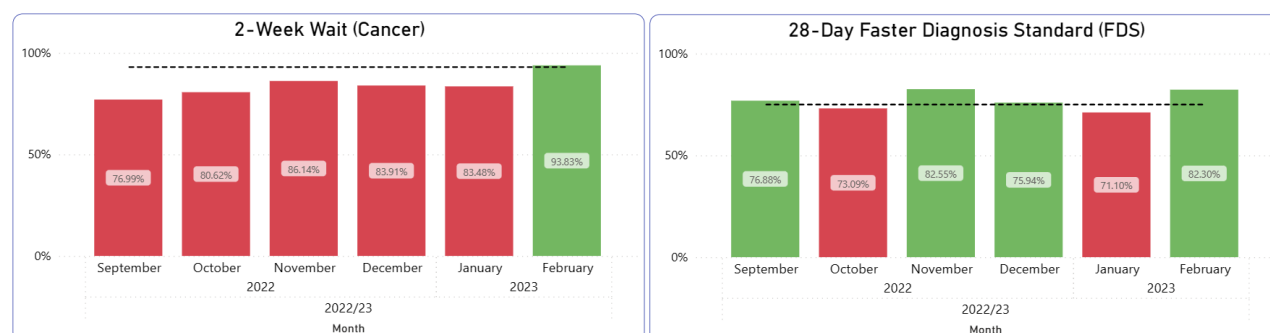


March saw the busiest month in the Emergency Department since November 2022, with over 9,000 attendances. Emergency Department triage performance fell for the third consecutive month to 69.3%. This deterioration has largely been driven by Majors and See & Treat, while Ambulance triage remains the only triage measure to perform above target. The Emergency Department continues to increase the number of nurses who are ESI triage model trained, with a further training cohort having now been approved. The nursing teams have also devised new staffing rotas to provide x4 ESI trained triage nurses per shift, with this model commencing 30th April.

2. Cancer (Validated Data to February 2023)

Cancer 2 week wait saw a marked improvement in February, with the Trust attaining the 93% standard. February's performance of 93.8% is the highest since summer 2022 and follows the completion of a full demand and capacity modelling exercise that has been completed for all tumour sites through the Outpatient Improvement Group, with outputs resulting in an injection of additional baseline 2 week wait outpatient appointments and expansion of 'straight to test' pathways. Improvement was realised across the majority of tumour sites with 7 of 9 specialties delivering 93% or above, up from 2 tumour sites in January. In addition, the number of 2 week wait appointments delivered in February was greater than in December and during January, equating to improved clinic throughput.

62 day and 31 day performance remains below standard; 31 day improved slightly in February compared to January and performance against 62 day remained consistent with January following several consecutive months of falling performance. The Trust continues to work with Primary Care partners to scale up newly implemented initiatives in Colorectal (FIT testing) and Skin (submission of photography upon GP referral) that aim to streamline and reduce pathway times that should translate into a reduction in wait times. Performance against the 28 Day Faster Diagnosis target increased to 82.3% in February, reversing January's reduction, and marking a return to above-target performance.








3. Elective Restoration and Recovery

National focus remains on reducing long waits to routine treatment. DGFT has provided mutual aid to other Trusts within the Black Country to support a system-wide reduction in the elective backlog, with particular focus on supporting Royal Wolverhampton and Walsall. At the end of March, the Trust 78 week + backlog was reduced to 9 patients.

The operational Divisions have developed plans to meet the next national target of reducing 65 week + breaches. Key to this will be a series of productivity gains that are being led through the Theatre Improvement Group. Furthermore, the Surgical Division has now implemented 'High Volume, Low Complexity' theatre lists in ENT and Urology to support improved throughput and plan to scale these up further. The Trust continues to focus on offering a timely elective service, reporting the 8th shortest median wait times of the 20 Midlands acute Trusts.

















Impact on the Strategic Goals

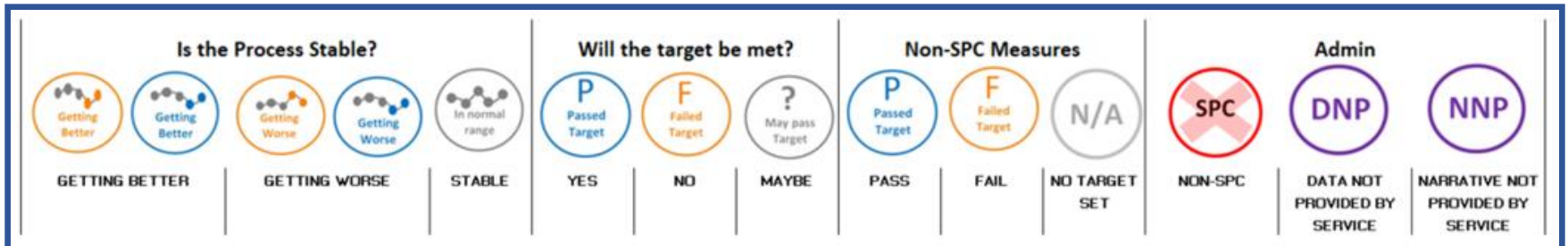
	Deliver right care every time	Y
	Be a brilliant place to work and thrive	Y
	Drive sustainability (financial and environmental)	Y
	Build innovative partnerships in Dudley and beyond	Y
	Improve health and wellbeing	Y

Implications of the Paper:

Risk		Y	Risk Description: Failure to meet access standards caused by inability to improve patient flow and work effectively with very local partners will result in an adverse outcome for the patient	
	On Risk Register:	Y	Risk Score: 15	
Compliance and/or Lead Requirements	CQC	Y	Details: Compliance with Quality Standards for safe & effective care	
	NHSE	Y	Details: Achievement of National Performance and Recovery targets	
	Other	N	Details:	
Report Journey/ Destination	Working / Exec Group	N	Date:	
	Committee	Y	Date: 27/04/2023 (F&P)	
	Board of Directors	Y	Date: 11/05/2023	
	Council of Governors	Y	Date: 22/06/2023	

Constitutional Performance

Constitutional Standard and KPI		Target	Apr-22	May-22	Jun-22	Jul-22	Aug-22	Sep-22	Oct-22	Nov-22	Dec-22	Jan-23	Feb-23	Mar-23	Status	
Emergency Access Standard (EAS)	Combined 4hr Performance	95.0%	72.1%	77.1%	74.0%	77.8%	78.2%	78.7%	76.9%	74.6%	71.3%	77.6%	76.5%	72.0%		
Triage	Triage - All	95.0%	90.1%	85.4%	84.8%	86.1%	85.5%	84.3%	83.8%	80.7%	74.2%	79.5%	71.2%	69.3%		
Cancer	Cancer 62 Day - All	85.0%	56.2%	73.9%	69.3%	69.7%	69.7%	69.7%	69.7%	69.7%	46.6%	41.2%	42.0%	N/A		
	Cancer 31 Day -	96.0%	93.0%	92.6%	93.2%	94.8%	90.1%	84.9%	90.4%	83.2%	92.7%	82.0%	88.4%	N/A		
	All Cancer 2 Week Waits	93.0%	86.9%	96.1%	93.1%	92.3%	78.7%	77.0%	80.6%	86.1%	83.9%	83.5%	93.8%	N/A		
Referral to Treatment (RTT)	RTT Incomplete	92%	73.3%	73.6%	71.0%	69.3%	67.7%	65.5%	64.5%	63.3%	60.3%	59.9%	58.9%	58.2%		
Diagnostics	DM01 - Diagnostics achieved within 6 weeks	99%	78.1%	81.8%	83.1%	84.2%	80.7%	78.1%	76.9%	76.4%	71.0%	70.4%	74.0%	72.1%		
VTE	% Assessed on Admission	95%	94.3%	94.3%	93.9%	93.0%	92.9%	93.2%	93.3%	94.5%	93.4%	93.7%	94.3%	86.6%		



Paper for submission to the Council of Governors on 22nd June 2023

Title:	Strategy progress report – Q4 2022/23
Author:	Ian Chadwell, Deputy Director of Strategy
Presenter:	Kat Rose, Director of Strategy & Integration

Action Required of Committee			
Decision	Approval	Discussion Y	Other
Recommendations:			
<ul style="list-style-type: none"> To note the strategy progress report for Q4 2022/23 			

Summary of Key Issues:
<p>This report summarises progress against the goals and measures of success in the Trust's strategic plan 'Shaping #OurFuture'. Detailed progress updates have been to Executive Directors and the relevant Board sub committees during April 2023. The committees received the reports as being a comprehensive reflection.</p> <p>There was only one change to the RAG ratings from the previous quarter, with the rating for 'reduce the vacancy rate' turning to green in recognition that the target 7% has been achieved 3 months ahead of plan. The only measure rated as red is 'reduce cost per weighted activity' given the challenges the trust faces to deliver its long-term financial plan and cost improvement programme.</p>

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

Implications of the Paper:			
Risk	Y		Risk Description: All BAF risks
	On Risk Register:	Y/N	Risk Score:
Compliance and/or Lead Requirements	CQC	Y	Details: well-led
	NHSE	N	Details:
	Other	N	Details:

Report Journey/ Destination	Working / Exec Group	N	Date:
	Committee	Y	Date: Various in April 2023
	Board of Directors	Y	Date: 11 th May 2023
	Council of Governors	Y	Date: 22 nd June 2023

STRATEGY PROGRESS REPORT – Q4 2022/23

Report to Board of Directors on 11th May 2023

EXECUTIVE SUMMARY

This report summarises progress against the goals and measures of success in the Trust's strategic plan 'Shaping #OurFuture'. Detailed progress updates have been to Executive Directors and the relevant Board sub committees during April. The committees received the reports as being a comprehensive reflection. There was only one change to the RAG ratings from the previous quarter, with the rating for 'reduce the vacancy rate' turning to green in recognition that the target 7% has been achieved 3 months ahead of plan. The only measure rated as red is 'reduce cost per weighted activity' given the challenges the trust faces to deliver its long-term financial plan and cost improvement programme.

BACKGROUND INFORMATION

The Strategic Plan 'Shaping #OurFuture' was approved by Board of Directors in September 2021. Quarterly reporting on progress against the five goals and the three transformation programmes in the strategic plan has been in place since the last quarter of 2021/22.



Current status, progress in the past quarter and actions planned for the next quarter for each workstream contributing to the delivery of the goals has been compiled. This has been presented to Executive Directors and then at the respective board committees according to the following schedule of delegation for assurance.

Goal	Committee
Deliver right care every time	Quality & Safety
Be a brilliant place to work and thrive	Workforce and Staff Engagement
Drive sustainability	Finance & Performance
Build innovative partnerships in Dudley and beyond	Finance & Performance for services delivered jointly Workforce and Staff Engagement for local people employed
Improve health & wellbeing	Quality & Safety

The committees have received the detailed reports in April 2023 as being a comprehensive reflection with no changes requested. Appendix 1 contains the summary of status against each measure of success. Only one change to RAG rating has been proposed between Q3 and Q4.

Progress to highlight from quarter 4

- Sustained improvement in the vacancy rate during quarter 4 with the target of 7% being achieved ahead of schedule
- Overall stable staff survey results with improvement observed in some dimensions against a difficult picture nationally
- Sustainability training run in conjunction with Dudley College and annual staff travel survey completed
- Successful event with four local academy schools run to promote NHS career opportunities
- Strong elective recovery with mutual aid offered to system partners
- Same day skin cancer pathway implemented on a substantive basis
- Successful research scholarship for one of our consultants and research and innovation seminar held in February

Areas of challenge during quarter 4

- Cost Improvement Programme for the current financial year delivered a small shortfall. Challenges remain in delivering a long-term sustainable financial plan including identification of recurrent savings for the Cost Improvement Programme in 2023/24
- Trust faced considerable pressures around urgent & emergency care although improvements in handover delays were realised towards the end of the quarter

Next Steps

Communications:

Communications team continue to produce a monthly staff interview that highlights how individual staff are helping the trust achieve our goals. These are published via 'In the Know' and stored on the Hub ([Strategy and Transformation - Strategy interviews](#)).

Operational planning:

Current progress against the strategy informs local priorities for the annual business plan for 2023/24. There will be a renewed focus on monitoring progress against the elective activity plan as this directly affects Trust income with monthly reporting to Financial Improvement Group and then Finance & Performance Committee.

RISKS AND MITIGATIONS

Risks and mitigations associated with delivery of the strategic plan are recorded within the Board Assurance Framework which is reported to public Board.

RECOMMENDATIONS

To note the strategy progress report for Q4 2022/23.

Ian Chadwell
Deputy Director of Strategy
2nd May 2023

APPENDICES:

Appendix 1 – Summary of status for measures of success

Appendix 1 – Summary of status for measures of success

Goal	Measure of Success	Target and timescale	Current status	RAG rating	
				this quarter	Last quarter
Deliver right care every time	CQC good or outstanding	Target: good or outstanding	No change in current rating. Inspection of maternity services is expected and data request highlighted gaps in assurance		
	Improve the patient experience results	Target: top quartile performance (England) by 2025	Results of the national maternity survey have been published and the trust has been flagged as 'much worse than expected'		
Be a brilliant place to work and thrive	Reduce the vacancy rate	Target: achieve 7% by Jun-2023 and sustain	Current vacancy rate is 7% which is a reduction from 9% in previous quarter 3. There is continuing progress with international, graduate and local recruitment		
	Improve the staff survey results	Target: better than England average by 2024/25	Staff survey results for 2022 have been published. The Trust is above or the same for five out of the nine promises/themes, with the remainder being slightly below benchmarked average. Compared to 2021 performance across the nine promises and themes has remained the same for six out of nine		
Drive sustainability	Reduce cost per weighted activity	Target: better than England average for overall, medical and nursing costs by 2024/25	Whilst agency expenditure reduced in February and March and the cost improvement programme was delivered, the predicted deficit for 23/24 has led to national escalation		
	Reduce carbon emissions	Target: year-on-year decrease achieving net zero by 2040 (NHS carbon footprint) and 2045 (NHS Carbon footprint plus)	Annual staff travel survey completed; sustainability training delivered to 10 staff in conjunction with Dudley College		
Build innovative partnerships in Dudley and beyond	Increase the proportion of local people employed	Target: 70% by Mar-2025	Current proportion of staff who live locally is 65%; successful event with local schools will be replicated to increase awareness of NHS careers		

	Increase the number of services jointly delivered across the Black Country	Target: increase maturity of collaboration as measured by maturity matrix	Leadership and active participation in Black Country provider Collaborative; implementation of integrated model of care in Dudley being progress		
Improve health & wellbeing	Improve rate of early detection of cancers	Target: 75% of cancers diagnosed at stages I,II by 2028 (NHS Long Term Plan)	Local implementation team working on lung cancer pathways. Confirmation that trust will invited to be part of the phase 4 expansion of targeted lung health programme		
	Increased planned care and screening for the most disadvantaged groups	Target: baseline to be established for breast screening	Proactive actions being taken by breast screening service to improve uptake by disadvantaged groups		

Paper for submission to the Council of Governors 22 June 2023

Title:	Board Secretary Update NHS Provider Licence Self-certification
Author:	Helen Board, Board Secretary
Presenter:	Helen Board, Board Secretary

Action Required of Committee				
Decision	Approval	Discussion	Y	Other
Recommendations: The Council of Governors is asked to: <ul style="list-style-type: none"> • Note the outcome of governor elections that concluded on Thursday 8th June 2023. • Note that the draft NHS Provider Licence Self- Certification document was considered by the Audit Committee on 20th March 2023 and Board of Directors on 11th May 2023. That the Council of Governors was consulted via email on the draft Licence Self- Certification. Request that the final document be endorsed by the Full Council of Governors ahead of its publication by 30th June 2023. • Note the Annual Report preparation process and arrangements in respect of receiving the Auditors report ahead of it being laid before Parliament • Formally endorse the governor's comment on the 2022/23 Quality Accounts ahead of its publication by 30th June 2023. 				

Summary of Key Issues:
Council of Governors elections June 2023 The Trust has concluded a round of elections overseen by Civica Elections Services, for vacancies in the following Constituencies and report the outcome with candidates successfully elected as follows: Public Constituency Joanne Williams, Halesowen Staff Constituency Jill Faulkner, Non-Clinical staff NHS Self certification The Trust is required to self-certify against a number of declarations in respect of its provider licence. The Declarations are required by NHSE but do not need to be submitted unless specifically requested by them. The declarations in respect of conditions 6 and 7 to be signed off by 31st May and the declaration in respect of condition 6 must be published by 30th June 2023. See appendix 1. The full council are asked to endorse the final version ahead of its publication by 30 June 2023. Annual Report preparation update The Trust Annual Report 2022/23 including the Annual Governance Statement has been prepared in accordance with the NHS foundation Trust annual reporting manual 2022/23. This sets out the requirements for foundation trusts' annual reports. The draft auditors report on the 2022/23 financial statement has been prepared and considered by the Audit committee and endorsed on 15 June. The final version of the annual report and account and the auditor's report upon them will be circulated to the Council of Governors, Board of Directors and submitted online to NHS England. The Annual report and Accounts (digital version) are scheduled to be laid before






Parliament before summer recess (subject to receiving auditors final report and certificate). The document will then be published on the Trust website and a summary report will be included in the Your Trust newsletter ahead of the Annual Members Meeting on Thursday 21st September 2023.

Governor comment on the Trust Quality Account 2022/23

The Trust prepares its Quality Account and the Council of Governors are invited to provide a comment on them for inclusion. It was agreed to establish a task and finish group for the purposes of the comment preparation. The draft version was circulated online to all governors for review and comment.

The full council are asked to endorse the final version given as appendix 2 ahead of its publication by 30 June 2023.

Impact on the Strategic Goals

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

Implications of the Paper:

Risk		Y	Risk Description: as described in the self-certification declaration	
	On Risk Register:	N	Risk Score:	
Compliance and/or Lead Requirements	CQC		Y	Details: Well Led
	NHSE		Y	Details: Self- Certification Guidance for NHS Foundation Trusts and NHS Trusts Foundation Trust Reporting Manual 2022/23
	Other		N	Details:
Report Journey/ Destination	Working / Exec Group		Y	Date: 07/03/23
	Audit Committee		Y	Date: 20/03/23 & 22/05/23
	Board of Directors		Y	Date: 11/05/23
	Council of Governors		Y	Date: 22/06/23

**NHS Provider Licence Self-Certification
Report to Audit Committee 22nd May 2023**

1 EXECUTIVE SUMMARY

- 1.1 The Board is required to make a number of declarations at the year-end for the period 2022/2023. In respect of its annual plan the self-certification set out below is required.
- 1.2 The Declarations are required by NHSE but do not need to be submitted unless specifically requested by them. However, the declarations in respect of conditions 6 and 7 must be signed off by the chair and chief executive 31st May and the declaration in respect of FT 4 must be published by 30th June.
- 1.3 The declarations are informed by the Annual Governance Statement, the Annual Accounts, and the Internal Audit opinion.
- 1.4 The options available are “confirmed” or “not confirmed”. If the declaration is not confirmed the Trust are invited to provide summary explanatory information.

2 BACKGROUND INFORMATION

2.1 Declaration 1&2:

General Condition 6 (G6) - Systems for compliance with license conditions (FTs and NHS trusts)

The Board is required to confirm it is compliant with the following certification or explain why it can't certify itself as compliant.

Following a review for the purpose of paragraph 2(b) of license condition G6, the Directors of the Licensee are satisfied, as the case may be that, in the Financial Year most recently ended, the Licensee took all such precautions as were necessary in order to comply with the conditions of the license, any requirements imposed on it under the NHS Acts and have had regard to the NHS Constitution.

It is recommended that a “**confirmed**” declaration is made.

Continuity of service condition 7 – Availability of Resources

The Board is required to make one of the following three declarations¹

3a. After making enquiries the Directors of the Licensee have reasonable expectations that the Licensee will have the Required Resources available to it after taking account distributions which might reasonably be expected to be declared or paid for the period of 12 months referred to in this certificate.

3b. After making enquiries the Directors of the Licensee have a reasonable expectation, subject to what is explained below, that the Licensee will have the Required Resources² available to it after taking account in particular (but without limitation) and distribution which might reasonably be expected to be declared or paid for the period of 12 months referred to in this certificate. However, they would like to draw attention to the following factors which may cast doubt on the ability of the Licensee to provide Commissioner Requested services

3c. In the opinion of the Directors of the Licensee, the Licensee will not have the Required Resources available to it for the period of 12 months referred to in this certificate.

¹ The period of 12 months, is the 12 months from the date of the certificate

² Required Resources include: management resources, financial resources and facilities, personnel, physical and relevant asset guidance.

It is recommended that ‘**confirmed**’ declaration is made against 3a. In making this declaration, the main factors which have been taken into account by the Board of Directors are as follows:

The Trust's financial operational plans, Cost Improvement Programme and working capital requirements are under continual review to ensure resources are effectively applied.

The withdrawal of central resources to deal with ongoing COVID-19 and the drive to restore and recovery activity to pre-covid levels has imposed pressures on the Trusts revenue resources throughout the financial year 2022/23. Looking forward the Trust will have a continued requirement to invest resources to meet the targeted initiatives to address the high number of patients on the waiting lists for both the Trust and the wider System.

The shift towards System working is evolving with increased emphasis on financial parity and risk share amongst providers. Based on the Trust's understanding of resource allocation for 2023/24 it will be extremely challenging to deliver a break even position for the Trust.

2.2 Declaration 2:

Condition FT4 - Corporate Governance Statement

The Board is required to indicate it is compliant with the following statements, or if not, state why it is non-compliant. In addition, the Board is invited to identify any risks and mitigating actions in relation to each of the statements.

1) The Board is satisfied that the Trust applies those principles, systems and standards of good corporate governance which reasonably would be regarded as appropriate for a supplier of health care services to the NHS.

It is recommended that a “**confirmed**” declaration is made as the Board is assured from the work of the Audit Committee, its Internal and External Auditors and their opinions received during the year. The Trust has no significant control issues, this is reflected in the Trust's Annual Governance Statement.

2) The Board has regard to such guidance on good corporate governance as may be issued by NHS Improvement from time to time.

It is recommended that a “**confirmed**” declaration is made as The Trust Secretary works closely with the Board, Audit Committee and Executives on matters of NHSE guidance and any impact / improvements to be made within Trust systems as a result.

3) The Board is satisfied that the Trust implements:

- (a) Effective board and committee structures;*
- (b) Clear responsibilities for its Board, for committees reporting to the Board and for staff reporting to the Board and those committees; and*
- (c) Clear reporting lines and accountabilities throughout its organisation.*

It is recommended that a “**confirmed**” declaration is made.

The Board has an established sub-committee system with clear responsibilities as described in the Scheme of Delegation. The work plans of each committee are reviewed during the year as part of a

comprehensive Committee Effectiveness Review. The findings from the Review are used to inform on development and improvements as required. The exception reporting introduced for each Committee up to the Board continues to work effectively.

Risks/Mitigations: The Board acknowledged the need to review the “Ward to Board” reporting arrangements and commissioned an external Well-Led developmental review that concluded during quarter 4 of the preceding year. Findings of the review have been prioritised and an action plan developed and delivered to reflect the recommendations as set out in the feedback report. The Board had received regular updates to maintain oversight of the plan.

4) The Board is satisfied that the Trust effectively implements systems and/or processes:

- (a) To ensure compliance with the Licensee’s duty to operate efficiently, economically and effectively;*
- (b) For timely and effective scrutiny and oversight by the Board of the Licensee’s operations;*
- (c) To ensure compliance with health care standards binding on the Licensee (including but not restricted to standards specified by the Secretary of State, the Care Quality Commission, the NHS Commissioning Board and statutory regulators of health care professions);*
- (d) For effective financial decision-making, management and control (including but not restricted to appropriate systems and/or processes to ensure the Licensee’s ability to continue as a going concern);*
- (e) To obtain and disseminate accurate, comprehensive, timely and up to date information for Board and Committee decision-making;*
- (f) To identify and manage (including but not restricted to manage through forward plans) material risks to compliance with the Conditions of its Licence;*
- (g) To generate and monitor delivery of business plans (including any changes to such plans) and to receive internal and where appropriate external assurance on such plans and their delivery; and*
- (h) To ensure compliance with all applicable legal requirements.*

It is recommended that a “**confirmed**” declaration is made.

The Board has both directly and through its Committee structure been assured that the Trust's designed systems of internal control have been operating effectively and as intended over the year as a going concern. Where issues have arisen during the year, for example in respect of operational or financial performance, timely actions have been implemented to improve these areas.

Assurance is routinely and regularly obtained as to the quality of the data supporting the Trust's performance reporting and decisions being taken and improvements have been introduced through the adoption of Statistical Process Control (SPC) reporting. IPR structure kept under review.

Updates on progress to delivery of the Trust's Strategic plan 2021 - 2024 is provided to the Board of Directors on a quarterly basis. The Board Assurance Framework (BAF) provides a structure and process that has been comprehensively refreshed and relaunched to focus on the key risks that might compromise the achievement of the Trust's strategic goals. Each BAF risk clearly sets out the inherent risk score, residual risk score and the target risk score. Key controls, the gaps in those key controls and the mitigating actions for those gaps are clearly articulated in each BAF risk. Each committee of Board receives their individual BAF risks scheduled throughout the year tabled by the Executive lead for that risk. The Board of Directors receive a one page summary of the BAF at its public meetings.

In the current year, the Trust has not received any regulatory notices.

The Trust adopts a robust approach to developing its Annual Plan. Key risks and associated assurance have been reported to the Audit Committee and Board during the year and the process

has been subject to Internal Audit review which concluded positively over the Trust corporate risk and assurance processes.

5) The Board is satisfied that the systems and/or processes referred to in paragraph 4 (above) should include but not be restricted to systems and/or processes to ensure:

- (a) That there is sufficient capability at Board level to provide effective organisational leadership on the quality of care provided;*
- (b) That the Board's planning and decision-making processes take timely and appropriate account of quality of care considerations;*
- (c) The collection of accurate, comprehensive, timely and up to date information on quality of care;*
- (d) That the Board receives and takes into account accurate, comprehensive, timely and up to date information on quality of care;*
- (e) That the Trust, including its Board, actively engages on quality of care with patients, staff and other relevant stakeholders and takes into account as appropriate views and information from these sources; and*
- (f) That there is clear accountability for quality of care throughout the Trust including but not restricted to systems and/or processes for escalating and resolving quality issues including escalating them to the Board where appropriate.*

It is recommended that a “**confirmed**” declaration is made as there is clear leadership and accountability for the delivery of high quality and safe services within the Trust. The Board both directly, and through its Committee structures, ensures that a focus is maintained on the delivery of quality services. The Trust's Quality Priorities are set in consultation with the Council of Governors and other stakeholders with regular reporting of the delivery against these priorities provided to the Board and the Council of Governors and our Commissioners. The patient experience strategy was refreshed during the year and relaunched with an emphasis on acting on the patient voice. There are clear initiatives designed to engage to hear the staff voice and pursue the inclusivity agenda.

6) The Board is satisfied that there are systems to ensure that the Trust has in place personnel on the Board, reporting to the Board and within the rest of the organisation who are sufficient in number and appropriately qualified to ensure compliance with the conditions of its NHS provider licence.

It is recommended that a “**confirmed**” declaration is made.

The Trust has undertaken performance reviews and 360 degree appraisals with all directors.

The Trust has developed a series of internal and externally facilitated board development activities over the year with a focus of key areas to support cohesive working in relation to the Trust Board and the wider integrated healthcare system. The Trust has an established process that ensures that all Board Members are "fit and proper" persons. The Board through its Workforce and Staff Engagement Committee has been assured over the actions being taken to mitigate the workforce risks captured on the Board Assurance framework in relation to mandatory training, recruitment and retention. Regular reporting is provided to the Board on the Trust's compliance with the nursing safer staffing levels and the revalidation of its nursing and medical workforce.

2.3 Declaration 3: Training of Governors

The Board is required to indicate it is compliant with the following statement or if not state why it is non-compliant.

The Board is satisfied that during the financial year most recently ended the Trust has provided the necessary training to its Governors, as required in s151(5) of the Health and Social Care Act, to ensure they are equipped with the skills and knowledge they need to undertake their role.

It is recommended that a “**confirmed**” declaration is made.

The governor training programme is constructed on a modular basis with the modules structured to support newly appointed and elected governors. These modules were run for the newly elected governors from the elections in quarters one and four as refresher for those returned for a further term of office and new governors who took up office in June and December 2022. One to one support is in place for all new governors and buddying is encouraged for those more experienced governors to support newly appointed governors. Annual training on fire safety and Infection Control is offered across the year allowing governors to attend at least one of these sessions. The Council of Governors Experience and Engagement Committee monitors the take up of induction and “mandatory” training, along with overseeing the content of the training programme utilising feedback from those attending the individual modules. All governors are offered an opportunity to access a national programme of training facilitated by NHS Providers.

A series of engagement events supplement the training and enable Governors to attend strategy workshops with the Board, coupled with presentations from elements of the Trust on their services. Whilst members of the Council regularly participate in review and inspection activities including PLACE and Quality & Safety Review audits, owing to COVID-19 this had been paused on occasion and has resumed once operational capacity allowed. Governors are also invited to attend Trust Board and its committees and receive regular update briefings hosted by the chair and fellow NEDs. The Trusts Council of Governors are supported to engage with governors across the wider system and periodically share joint training and development sessions.

The Trust is working with the Council of Governors to refresh its engagement plan for 2022- 2025 with the governors ‘out there’ initiative at its core supporting governors out and about in their respective constituencies. This is monitored by the Experience and Engagement Committee.

3 RISKS AND MITIGATIONS

3.1 These are contained in the body of the report

4. RECOMMENDATIONS

- ✓ That the Council receive the document for endorsement at the June 2022 meeting of the Council of Governors.

Helen Board
Board Secretary
May 2023

Governor Quality Comment

Quality Accounts are an essential way for local NHS services to report on quality and show improvements in the services they deliver to local communities and stakeholders. Each year the Trust prepares a Quality Account that reports on the quality of services offered. The report is published annually and is available to the public.

The Council of Governors is invited to review the draft report and prepare a comment. The process adopted in preparing the governor's comment on the Quality Account 2022/23 saw a copy of the draft report circulated to all governors for their review and response. Governors were then supported to collate responses and formulate the comment for inclusion as given below:

The Council of Governors has reviewed the 2022/23 Quality Account and acknowledges the Trust's focus on delivering high-quality services during another challenging year. Governors fully support the Chief Executives Statement in Section 1 of this report. The Trust has continued to deliver a robust response to the coronavirus pandemic. In line with national focus, the Trust is working hard on the restoration and recovery programme and is actively working with other trusts in the local area to address the backlog of patients awaiting treatment.

The Council of Governors has continued to adapt to new virtual working methods and participate in a wide range of review activities during the year. The governors are pleased to maintain a close working relationship, regularly attend monthly committee and board meetings, and have welcomed the resumption of face-to-face quality and safety review walkarounds. These activities provide governors with an opportunity to triangulate the information they receive and have noted the 'you said, we have' improvement initiatives.

The governors were given the opportunity to provide scrutiny and challenge the draft quality account and were content with the assurances received. The governors were also happy with the assurance provided by the quality team that the Trust would continue to focus on the targets they still hadn't achieved. The Council of Governors welcomes the continuing patient experience and discharge management as the Trust's quality priority indicators for 2023/24. It exemplifies the Trust's desire to be a listening and learning organisation, utilising a wide range of feedback channels, including Friends and Family Test responses, where it is pleasing to note that under Priority 1: Delivering a great patient experience, the Trust has achieved its target for Part A (Involving patients and their carers in care and treatment decisions) and Part C (Information around conditions and treatment is shared with patients).

It is reassuring to see that the Trust undertakes a wide range of clinical and non-clinical audits through which recommendations are made, and the actions taken to improve the quality of services are published. This is necessary to identify how issues raised are being acted upon to meet high standards. One such area is Learning from Deaths which the Trust focussed on last year and set clear learning points to improve the Trust's mortality rate. It is also assuring that the Trust's rigorous approach to infection prevention and control has resulted in solid performance compared to the national standards.

The Council is assured that the Trust is proactively supporting the Black Country Provider Collaborative to reduce health inequalities and provide access to service to all patients across the area. This initiative will evolve to ensure that all patients across the area get the best possible service.

2022/23 has been a time of restoration and recovery post-COVID-19, and the Council appreciates and applauds the commitment and dedication of staff across all areas and in all disciplines of the Trust for their adherence to reducing backlogs formed due to the pandemic. The council is pleased that the Trust has enhanced its approach to supporting staff health and wellbeing with various health and wellbeing initiatives and has continued its focus on recruitment and retention.

The governors note that the Trust is taking positive steps to support junior doctors to maintain an excellent work-life balance and has adopted several initiatives to reduce the reliance on them to fill rota gaps. The importance of listening to staff to drive improvement is exemplified by the maturity of the Trust's 'Freedom to Speak up' initiative.

The Council of Governors are proud to note some of the fantastic clinical innovations at the Trust this past year; the first kidney removal and reconstruction procedure in March 2023 using the Da Vinci Xi surgical system by Mr Syed Shahzad, consultant in Urology, the launch of a new intravitreal injection for the treatment of macular degeneration by Mr Shahzad Shafquat, consultant in Ophthalmology and the success of the virtual respiratory ward. The Same Day Emergency Care is another initiative the Trust took to improve patient care and experience, and the Council is happy to note that all the priorities set for this service were met in 2022/23.

The Council is assured that the Trust is taking steps to deliver its Green Plan with changes such as no longer using Desflurane, a high carbon emitting anaesthetic gas, to reduce its carbon footprint. The use of nitrous oxide is also being reviewed to see how emissions can be reduced.

The Council of Governors recognises the steps taken to reduce the delays in discharging patients and the work undertaken with our system partners and would like to continue to focus on this target for 2023/24 to ensure that the overall patient experience is achieved. The Governors also support the Trust's annual Committed to Excellence Awards, which celebrates the achievements of individual staff and teams across the Trust.

Paper for submission to the Full Council of Governors on 22 June 2023

Title:	Update from the Experience & Engagement Committee
Author:	Madhuri Mascarenhas, Administration Coordinator Foundation Trust Office Alex Giles, Committee Deputy Chair
Presenter:	Alex Giles, Public Elected Governor, Committee Deputy Chair

Action Required of Committee / Group			
Decision	Approval Y	Discussion Y	Other
Recommendations:			
The Council is asked to note the contents of the report.			

Summary of Key Issues:
<p>Summary report from the Experience & Engagement Committee that met on 23 May 2023 highlighting:</p> <ul style="list-style-type: none"> - Concerns in respect of Foundation Trust public membership numbers could potentially dip below the 13,000 required as per the conditions of the license. - The Governor Task and Finish Group will meet again in the first week of June to consider the activity recommendations made by the governors at the various Council of Governors' meetings and add them to the Governor and Membership Engagement Plan 2023 – 25. - Position of Experience and Engagement Committee Chair is still vacant. - Governor training and development continues to develop and be provided internally and externally to new and existing governors and is well received. - Governor feedback is used to develop sessions, e.g. holding to account, Governors 'out there'. - Joint governor session planned with Black Country Healthcare Partnership NHS Foundation Trust

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	Y
 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: Well-led
	NHSE	Y	Details: Code of Governance
	Other	N	Details:
Report Journey/ Destination	Working / Exec Group	N	Date:
	Committee	N	Date:
	Board of Directors	N	Date:
	Council of Governors	Y	Date: 22/06/23

CHAIR LOG

Upward Report from the Experience & Engagement Committee

Date Committee last met: 23 May 2023

<p>MATTERS OF CONCERN OR KEY RISKS TO ESCALATE</p> <ul style="list-style-type: none"> • Whilst the Trust remains compliant with its terms of licence in respect of its public membership and is represented by constituency, age, and gender, the current public membership figure of 13,334 is close to the required membership of 13,000. • Governors are actively encouraged to participate in Trust-organised activities and promote membership within their communities. • The position of Experience and Engagement Committee Chair is still vacant. 	<p>ACTIONS COMMISSIONED/WORK UNDERWAY</p> <ul style="list-style-type: none"> • The Task and Finish Group set up to review the governor and membership engagement plan will meet again at the beginning of June and draft a list of activities the governors can get involved in from the recommendations received at the various governor meeting. • Plan governor activities to promote membership within each constituency and aim to recruit between 24 and 36 members monthly. • The Patient Experience Team has invited governors to join them on the Talk to Us trolley, which visits different hospital areas every Tuesday and Wednesday.
<p>POSITIVE ASSURANCES TO PROVIDE</p> <ul style="list-style-type: none"> • Governor attendance at Board Committee meetings continued to be good, provided opportunities for governors to draw assurance from work undertaken, and noted the proactive nature of committee business. • Governor training and development continues to be provided internally and externally to new and existing governors and is well received. Governor feedback is used to develop sessions, e.g. holding to account, Governors 'out there'. 	<p>DECISIONS MADE</p> <ul style="list-style-type: none"> • The addendum to the Governor's statutory duties and responsibilities asks Governors to represent the views of their own community and the wider system. A joint governor, training and development session is planned for July 2023 with Black Country Healthcare Partnership NHS Foundation Trust.
<p>Chair's comments on the effectiveness of the meeting: Good attendance and positive discussions, Papers received in a timely manner with good and clear information.</p>	