



# FINAL Full Council of Governors meeting

05 October 2023 15:30hr

MS Teams

No.	Item	Paper ref.	Purpose	Presenter	Time
	<b>Welcome</b> 1.1 Introductions & Welcome 1.2 Apologies	Verbal	For noting	Chair	15:30
	<b>Council Meeting</b> 2.1 Declaration of interests 2.2 Quoracy 2.3 Announcements	Verbal	For noting	Chair	
	<b>Previous meeting</b> 22 <sup>nd</sup> June 2023 – Full Council 3.1 Minutes 3.2 Matters arising 3.3 Update on actions	Enclosure 1	For approval	Chair	
 <b>To be a brilliant place to work and thrive</b> Reduce the vacancy rate   Improve the staff survey results					15:35
<b>Staff / Patient Story</b> – an opportunity to hear from frontline staff about an improvement journey benefiting staff and patients. Family Hubs introduced by Claire MacDiarmid.  Introduced by Clare Inglis, Staff Elected Governor, Allied Health Professionals					
	<b>Remuneration &amp; Appointments Committee</b>	Enclosure 2	For approval	Sir David Nicholson, Committee Chair	
<b>Governance</b>					15:55
	<b>Chief Executive's update</b>	Enclosure 3 / verbal	For information & discussion	Diane Wake Chief Executive	
	<b>Chairs update</b> <ul style="list-style-type: none"> <li>Board of Directors held in July and September 2023</li> <li>Trust integrated Performance report on and note position in respect of Trust targets</li> <li>Non-executive committee chair feedback</li> </ul>	Enclosure 4 Enclosure 5 Verbal	For assurance & discussion	Chair & non-executive committee chairs	
	<b>Lead Governor update</b>	Verbal		Alex Giles Lead Governor	
	<b>Trust Quarterly Strategy Report and forward planning update</b>	Enclosure 6 / verbal	For assurance	Ian Chadwell Deputy Director of Strategy & Partnerships	
	<b>Board Secretary update</b> <ul style="list-style-type: none"> <li>Council Elections 2023</li> <li>Fit and Proper Person update</li> </ul>	Enclosure 7	For approval/ assurance	Helen Board Board Secretary	

10.	 <b>Build Innovative relationships in Dudley &amp; beyond</b> 17:10 Increase the proportion of local people employed   Increase the number of services jointly delivered across the Black Country			
10.1	<b>Experience &amp; Engagement Committee update</b>	Enclosure 8	For assurance	Yvonne Peers, Deputy Lead Governor
11.	<b>Any Other Business</b> (to be notified to the Chair)	Verbal	For noting	Chair
12.	<b>Close of meeting and forward</b> meeting dates 2023/24: 07 December, 28 March 2024			Chair
13.	Reflections on the meeting			All
14.	<b>Quoracy:</b> 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.  <b>Items marked*:</b> 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.			17:20

**UNCONFIRMED Minutes of the Full Council of Governors meeting**  
**Thursday 22<sup>nd</sup> June 2023, 15:40 hrs**  
**held on Microsoft Teams**

<b>Present:</b>	<b>Status</b>	<b>Representing</b>
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
Mr Mushtaq Hussain	Public Elected Governor	Central Dudley
Ms Clare Inglis	Staff Elected Governor	Allied Health Professionals & Health Care Scientists
Mrs Catherine Lane	Staff Elected Governor	Nursing and Midwifery
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
Cllr Alan Taylor	Appointed Governor	Dudley MBC
Mrs Mary Turner	Appointed Governor	Dudley CVS

**In Attendance:**

Mr Julian Atkins	Non-executive Director	DG NHS FT
Mrs Helen Board	Board Secretary	DG NHS FT
Professor Gary Crowe	Non-executive Director	DG NHS FT
Mr Alan Duffell	Interim Chief People Officer	DG NHS FT
Ms Jacqui Elson-Whittaker	Lead Nurse – Dudley Heart Failure Team	DG NHS FT
Miss Ninette Harris	Sustainability Lead	DG NHS FT
Dr Julian Hobbs	Medical Director	DG NHS FT
Professor Liz Hughes	Non-executive Director	DG NHS FT
Mrs Karen Kelly	Chief Operating Officer	DG NHS FT
Mrs Madhuri Mascarenhas	Administration Coordinator	DG NHS FT
Sir David Nicholson	Trust Chair – <b>Chair of meeting</b>	DG NHS FT
Ms Claire Phillips	Lead Nurse – Dudley Heart Failure Team	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
Mr Kevin Stringer	Interim Director of Finance	DG NHS FT
Mr Adam Thomas	Chief Information Officer	DG NHS FT
Ms Diane Wake	Chief Executive	DG NHS FT

**Apologies:**

Mrs Liz Abbis	Director of Communications	DG NHS FT
Dr Gurjit Bhogal	Non-executive Director	DG NHS FT
Mrs Joanne Hanley	Non-executive Director	DG NHS FT
Mrs Sandra Harris	Public Elected Governor	Central Dudley
Mr Mike Heaton	Public Elected Governor	Brierley Hill
Ms Catherine Holland	Non-executive Director	DG NHS FT
Mrs Vicky Homer	Public Elected Governor	South Staffordshire & Wyre Forest
Mrs Maria Lodge-Smith	Public Elected Governor	Brierley Hill
Dr Atef Michael	Staff Elected Governor	Medical and Dental
Mrs Elizabeth Naylor	Public Elected Governor	North Dudley
Ms Joanne Williams	Public Elected Governor	Halesowen
Mr Lowell Williams	Non-executive Director	DG NHS FT

**Not In Attendance:**

Dr Thuva Amuthalingam	Associate Non-executive Director	DG NHS FT
Mrs Emily Butler	Public Elected Governor	Halesowen
Ms Kerry Cope	Staff Elected Governor	Nursing and Midwifery
Miss Chauntelle Madondo	Public Elected Governor	Rest of England
Mrs Mary Sexton	Chief Nurse	DG NHS FT
Ms Louise Smith	Staff Elected Governor	Nursing and Midwifery

<b>COG 23/19.0</b> 15.40	<b>Welcome</b>
<b>COG 23/19.1</b>	<b>Introductions &amp; Welcome</b> <p>The Chair welcomed all to the meeting. He welcomed Governor Jill Faulkner, who had been returned for a second term for the non-clinical staff constituency, and newly elected Governor Joanne Williams to the public constituency of Halesowen.</p>
<b>COG 23/19.2</b>	<b>Apologies</b> <p>Apologies have been received as above.</p>
<b>COG 23/20.1</b>	<b>Declarations of interest</b> <p>The Chair declared that other than being the chair of The Dudley Group NHS Foundation Trust, he was also the chair of Sandwell and West Birmingham NHS Trust, The Royal Wolverhampton and Walsall Healthcare NHS Trusts.</p> <p>He requested everyone to ensure that their Declarations of Interest were always kept up to date.</p> <p>The Chair asked those present to indicate if there were any items to declare in respect of the published agenda.</p> <p>There were none.</p>
<b>COG 23/20.2</b>	<b>Quoracy</b> <p>The meeting was declared quorate.</p>
<b>COG 23/20.3</b>	<b>Announcements</b> <p>No announcements were made.</p>
<b>COG 23/21.0</b>	<b>Previous meeting</b>
<b>COG 23/21.1</b>	<b>Previous Full Council of Governors meetings held on 5<sup>th</sup> April 2023</b> (Enclosure 1) <p>The minutes from the previous meetings were given as enclosure one for the full Council of Governors meeting held on 5<sup>th</sup> April 2023.</p> <p>It was <b>Resolved</b> to</p> <ul style="list-style-type: none"> <li>Approve the minutes as an accurate record of the meeting held as given above.</li> </ul>
<b>COG 23/21.2</b>	<b>Matters arising</b> <p>There were none.</p>
<b>COG 23/21.3</b>	<b>Update on actions</b>

	All actions have been completed.
<b>COG 23/22</b>	<b>To be a brilliant place to work and thrive</b>
<b>COG 23/22.1</b>	<p><b>Staff Voice (Verbal)</b></p> <p>The Chair informed the Council of Governors that Catherine Lane, staff-elected governor for Nursing and Midwifery, would introduce the staff members for this month's staff voice.</p> <p>Ms Lane briefly introduced herself and stated that she was a staff governor and the Inpatient Falls Lead. She introduced and welcomed Ms Jacqui Elson-Whittaker and Ms Claire Phillips, lead nurses from the Dudley Heart Failure team, to come forward and provide a brief synopsis of their work.</p> <p>Ms Elson-Whittaker gave a brief overview of her role and noted the amazing achievements made by the Dudley Heart Failure Team during her short time with them. She explained the signs and symptoms of heart failure and the referral process to the team. The team received approximately 90 – 100 referrals a month, which was increasing yearly. Patients referred to the team need to be seen within 14 days of the referral being made, whilst patients on the virtual ward must be seen within 24 hours of the referral being raised.</p> <p>The Dudley Heart Failure team works with the IV Therapy team to give IV diuretics in the community, which helped to reduce unnecessary hospital admissions. She informed the group that the team would require more staff on the acute heart failure nursing service to continue providing this service in the Dudley community. On a monthly basis, the Dudley Heart Failure team prevents about 400 hospital admissions from their service within the community.</p> <p>The team was also currently part of a research study being done by the research team on cardiac rehabilitation for patients with heart failure with preserved ejection fraction.</p> <p>The Chair noted Ms Elson-Whittaker's passion for the service provided by her team. He requested that she share the paper with the members of the Board for their review and to ensure that they can support the team where necessary.</p> <p>Dr Mandiratta thanked the Dudley Heart Failure team from a GP perspective for their hard work within the community. He was especially thankful that they had introduced the QOF (Quality Outcome Framework) code on the letters to the GPs as that helped them to ensure that patients were correctly registered on their files.</p> <p>Dr Hobbs commended the team for their forward-thinking service in the community and how they ensured that heart failure patients spent as little time as possible in the hospital through their hard work via the virtual ward. He also noted the team's innovative work to rehabilitate patients with heart failure with preserved ejection fraction. He informed the group about the positive feedback provided by the patients regarding this service.</p> <p>Ms Elson-Whittaker thanked everyone for their kind words and would relay the positive feedback to the team.</p> <p>Mr Giles asked if there was any information that the team would like to share with the governors to raise awareness of heart failure within their respective networks. Ms Phillips highlighted the signs and symptoms of heart failure, e.g. swollen legs and breathlessness, which the governors could promote in the community to raise awareness of this condition.</p>

	<p>Ms Elson-Whittaker gave a brief synopsis of the information that they have posted at different clinics within the community to promote awareness of the signs and symptoms that people need to keep a watch for to diagnose/treat the condition early.</p> <p>Ms Elson-Whittaker informed Professor Crowe that the virtual ward was in the pilot stage. The team were asked to provide a seven-day service and were allocated three staff members to monitor the virtual ward. This was not a feasible option. Currently, two members were being trained on the new equipment and procedures, and they were hoping to develop the service a little later in the year when the restrictions on recruitment were waived.</p> <p>Professor Crowe further queried if the team was collaborating with the British Heart Foundation to increase awareness about heart failure. Ms Elson-Whittaker informed him that the British Heart Foundation wasn't as involved as before. The information on the British Heart Foundation website was up to date, but the leaflets they distributed were last updated around five years ago.</p> <p>The Chair once again thanked the team for all their hard work and dedication and requested them to ensure that they shared the paper with the Board of Directors.</p> <p><b>Action: The paper presented by Ms Jacqui Elson-Whittaker about the Dudley Heart Failure team will be circulated to the Board of Directors.</b></p> <p>There were no further comments or questions.</p>
<b>COG 23/22.2</b>	<p><b>Appointments &amp; Remuneration Committee</b> (Enclosure 2)</p> <p>The Chair presented the outcomes of the Appointments and Remuneration Committee Meeting given as enclosure two.</p> <p>The Council of Governors <b>endorsed</b> the amendments suggested in the Terms of Reference as outlined in the enclosure.</p> <p>The Council of Governors <b>resolved</b> to</p> <ul style="list-style-type: none"> <li>- note the process for appointment of the non-executive director</li> <li>- note the process for appointment of the associate non-executive director</li> <li>- note the process for the appointment of deputy chair</li> <li>- endorse the remuneration for Professor Anthony Hilton of £13,190 per annum based on the minimum time commitment of at least three days a month</li> <li>- endorse the remuneration of Professor Gary Crowe of £25,000 per annum based on a minimum time commitment of 1.5 days per week (one day on site)</li> <li>- note the proposed 2022/23 non-executive directors and chair appraisal process</li> <li>- note that all non-executive directors have completed the self-assessment against the Fit and Proper Persons test, and there were no issues of non-compliance to report</li> <li>- note that non-executive directors maintain an up-to-date record of interests as required</li> </ul> <p>There were no comments or questions raised.</p>
<b>COG 23/23</b>	<b>Governance</b>
<b>COG 23/23.1</b>	<p><b>Chief Executive's update</b> (Enclosure 3/verbal)</p> <p>Ms Wake summarised the May 2023 report given as enclosure three.</p> <p>She provided an update on the recent Care Quality Commission (CQC) inspections. There had been an unannounced inspection of the Paediatric Emergency Department on the 22<sup>nd</sup> of February to review the safeguarding procedures of the department. This</p>

inspection did not have an impact on their service rating. The main areas of improvement were around safeguarding and professional curiosity. The improvement work carried out by the team had yielded good progress in those areas.

There had also been an unannounced CQC inspection of the Emergency Department. The inspection had been triggered subsequent to an attempted suicide in the Trusts emergency department and noted that the patient had been treated in intensive care after being resuscitated, however, she sadly passed away. The CQC focussed their inspection on the department's procedures for managing patients with mental health problems. The main recommendation put forward by CQC was to strengthen the relationship with our Mental Health Provider and to align the priorities between the two organisations. The Trust was working towards this goal by holding regular meetings to review the processes between our organisations.

The CQC carried out an announced inspection of the maternity department on the 27<sup>th</sup> of April. A formal report on the inspection would be published on the 29<sup>th</sup> of June showing a great improvement in our ratings for maternity services. The overall rating for maternity has now changed from 'requires improvement' to 'good'. Ms Wake extended her gratitude to everyone who played their part in improving the overall rating for maternity services.

The CQC carried out an instant-announced full inspection of the Emergency Department on the 17<sup>th</sup> and the 18<sup>th</sup> of May. The Trust still has to receive a draft report of the inspection, but the feedback received has been positive. CQC found the department safe and was happy with the work carried out in managing the deteriorating patient pathway.

The CQC had undertaken an unannounced inspection of our Children and Young People services on the 8<sup>th</sup> of June. They had requested data reports on the service, and the Trust was awaiting to hear back on the outcome of the investigation.

Ms Wake briefly touched on the operational performance of the Trust. There was good progress being made in managing the waiting time for patients to be seen. The current focus was to not have patients wait longer than 78 weeks by the end of June 2023. The next focus would be on managing patients waiting for 65 weeks and then 52 weeks. There was fantastic work being done on reducing the number of patients waiting for cancer treatment and diagnosis.

Ms Wake thanked all the staff members who worked extremely hard to manage and mitigate the impact on the Trust from the junior doctors' recent industrial action. She commended the clinicians for acting down into different roles to keep the organisation and patients safe.

The superhero fun run, which took place on the 11<sup>th</sup> of June, helped raise in excess of £3000 for the hospital charity.

Ms Wake thanked all the staff members involved in organising the Awards event and stated that it was well attended and received by all the staff.

Ms Wake briefly touched on the Leadership conference and informed the Council of Governors that this would be an annual event. The focus of the conference would be one of the Trust's priorities 'being a brilliant place to work and thrive' and 'building innovative partnerships in Dudley and beyond'. She thanked Ms Kat Rose and the team for organising the event.

Mr Stringer clarified that the deficit amount of £151 million mentioned in the minutes of the last meeting was regarding a planning discussion that took place at that time. The whole Black Country System, including the ICB (Integrated Care Board), submitted a deficit of £68 million on the 4<sup>th</sup> of May. The Trust's component to that deficit amount was £19.3 million.

	<p>Mr Hussain queried if the recent rise in interest rates would impact the overall amount that the Trust has to pay. Mr Stringer assured him that the funds for the NHS did not work on a commercial loan basis as they were directly funded from the Treasury and hence they do not have an interest rate applied to the loan amount. The Trust's main aim was to reduce the deficit and breakeven in the coming years.</p> <p>Mr Giles thanked Ms Wake and the wider trust teams for the commendable work done with managing the CQC inspections and for keeping the Council of Governors updated at all times.</p> <p>The Chair commended the maternity team on their CQC rating. He was amazed at the commitment and dedication of the staff at the awards ceremony. He noted the NHS 75th special award which was given to the international nurses team.</p> <p>He mentioned the Trusts activities in celebrating Windrush Day today and commemorating the people who came to the United Kingdom after the Second World War and helped build the NHS to its current stature. He thanked the international nurses who come from different parts of the world to help the NHS deliver better service to our patients.</p> <p>There were no further comments or questions.</p>
<b>COG 23/23.2</b>	<p><b>Chair's Update</b> (Enclosure 4)</p> <p>The Chair summarised the May 2023 report given as enclosure four.</p> <p>He noted the current financial challenge faced by the Trust and the hard work of executive colleagues led by Ms Wake to ensure that clinical standards are maintained and improved whilst trying to save money. He informed the Council of Governors that the Board of Directors had recently approved the three-year digital plan and had noted good performance in relation to cyber security.</p> <p>The Chair had been appointed as the Chair of Royal Wolverhampton NHS Trust and Walsall Healthcare NHS Trust. As Chair of the four trusts in the Black Country, he shared his aspiration that groups of governors and other staff members would work together to align the governance procedures between the trusts.</p> <p>He described that the aim is to create a joint committee between the four organisations to deliver the best service to the people of Dudley and improve the overall service in the Black Country.</p> <p>Ms Rose informed the Council of Governors that the Trust was looking at integrating the services between the organisations by focusing on developing the Community services within Dudley.</p> <p><b>Trust Integrated Performance report on and note position in respect of Trust targets</b> (Enclosure 5)</p> <p>Mrs Kelly presented the Integrated Performance Report for March 2023 given as enclosure 5.</p> <p>There has been an increase in patients waiting to be seen in the Emergency Department. This increase in number was attributed to GP referrals and walk-ins. March had been the busiest month in the Emergency Department since November 2022. There was good improvement shown with the ambulance handover in March; however, it still did not meet the 4-hour performance standard.</p> <p>Cancer two-week wait saw a marked improvement in February, with the Trust attaining the 93% standard.</p>

National focus remained on reducing long waits to routine treatment. The Trust had 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.

The operational divisions have developed plans to meet the next national target of reducing 65+ week breaches. Key to this would be a series of productivity gains being led through the Theatre Improvement Group. Everyone was working in collaboration to ensure that the target set by the system was achieved.

#### **Non-executive committee chair feedback (Verbal)**

#### **Quality and Safety Committee update**

Professor Hughes provided a verbal update on the Quality and Safety Committee.

The committee held an extraordinary meeting on the 13<sup>th</sup> of June to review a series of annual reports. She noted all the incredibly good things being done at the Trust with innovation and improvement in the quality of care for patients. Professor Hughes was particularly impressed with the End-of-Life service which she believed was one of the best in the country.

The only area of concern was with achieving the target for the mandatory training. The topic was currently under review with the Workforce Committee to find the best possible solution for staff to complete the training.

The Chair asked the Council of Governors who attended the Quality and Safety Committee meeting to provide feedback on their performance. Mr Rowbottom – public governor for Tipon and Rowley Regis commended the committee on carrying out good scrutiny with the reports that were presented to them.

#### **Workforce and Staff Engagement Committee update**

Mr Atkins provided a brief update on the Workforce and Staff Engagement Committee meeting that took place on the 25<sup>th</sup> of April.

There was a 49% decrease in the number of staff that had completed the staff survey this year. This was 10% less compared to last year; however, it was significantly above average when compared to other organisations within the region.

Mr Atkins was pleased to note that there was an improvement in terms of individual questions which were a focus for the last two years particularly with Equality and Diversity, Wellbeing and Effective Managers.

There was good improvement seen with sickness absence. The committee was particularly pleased with the significant improvement in achieving the mandatory training target, which was over 91% compliance.

There were some concerns raised around resuscitation training, mainly with paediatric resuscitation. The committee had approved a draft of the Dudley People Plan, an umbrella document for several different work streams.

A culture task and finish group has been established to review the culture of the Trust that would report back to the Workforce and Staff Engagement Committee.

The Committee received a document called the Public Sector Equality Duty Annual Report that summarised all that the Trust had done on equality, diversity and inclusion. For e.g., the race equality standard, the diversity equality standard and the gender pay

	<p>gap. The Trust was the only Midlands Trust to be awarded a Gold Kite mark by the employer's network for Equality and Inclusion.</p> <p>Mr Rowbottom commended Mr Julian's chairing abilities and noted his passion for the work he does with the Workforce and Staff Engagement Committee.</p> <p><b>Finance and Performance Committee Update</b></p> <p>Mr Atkins provided a brief update on the Finance and Performance Committee on behalf of Mr Lowell who had sent apologies for this meeting.</p> <p>The Finance and Performance Committee were pleased that the Trust was able to break even at the end of the financial quarter. The main financial concern at the moment was to achieve the Continuous Improvement Plan (CIP) for the current year.</p> <p>Ms Rose informed the Council of Governors that the Finance and Performance Committee had undertaken a deep dive to review the productivity and focus areas within the Trust. The Finance Improvement Group was working with the divisions to identify other areas for opportunities that can be financed and costed.</p> <p><b>Digital Technology Committee Update</b></p> <p>A lot of hard work has recently been undertaken to upgrade the cyber security measures of the Trust. The hardware equipment needs constant upgrading, which the team was diligent on maintaining.</p> <p>The main focus of the Digital Technology Committee was delivery of the 3-year digital plan. The plan would help fund the upgrading of the hardware equipment and cyber security programmes. Some improvements had been made to support the efficiency and productivity of the clinical teams, which in turn helped improve the quality of care. The 3-year digital plan would help ensure a clear plan for investments that need to be made over the next three years.</p> <p>The NHS as an organisation is constantly under threat from cyber security. The Trust blocked around 72,000 cyber attacks a month, approximately equivalent to 2500 cyber attacks a day.</p> <p>There were no further comments.</p>
<p><b>COG 23/23.3</b></p>	<p><b>Lead Governor Update (Verbal)</b></p> <p>Mr Giles provided a verbal update on the governor's activities for the last quarter.</p> <p>He welcomed Governor Jill Faulkner who had been returned for a second term and newly appointed Governor Joanne William to the council.</p> <p>He expressed his appreciation on behalf of the governors who attended last week's awards ceremony. He noted that the awards ceremony highlighted all the innovation and hard work the staff and teams put in to ensure that the Dudley population was well taken care of.</p> <p>He thanked the governors for participating in the volunteer week celebrations to recognise the volunteers' daily hard work.</p> <p>The governors were very pleased with the regular training sessions organised by the Foundation Trust office as part of the governor development programme. Mr Giles noted the amazing delivery of the last training session on Finance by Mr Richard Price and the auditors. He informed the council of governors about the upcoming joint governor training sessions with Black Country Healthcare NHS Foundation Trust on the 18<sup>th</sup> July.</p>

	<p>He encouraged all the governors to attend the joint training session as it would help develop relationships to work together with our system partners.</p> <p>Mr Giles thanked the governors for their regular attendance at the Board Committee meetings.</p> <p>Mr Giles indicated he would be catching up with all the governors on a one-to-one basis to help improve and continue the council's good work.</p> <p>There were no comments or questions.</p>
<b>COG 23/23.4</b>	<p><b>Trust Quarterly Strategy Report and forward planning update</b> (Enclosure 6)</p> <p>Ms Rose summarised the quarter four report for 2022/23 given as enclosure six.</p> <p>She highlighted the achievements of the last quarter:</p> <ul style="list-style-type: none"> <li>- Sustained improvement in the vacancy rate during quarter four with the target of 7% being achieved ahead of schedule.</li> <li>- Overall stable staff survey results with improvement observed in some dimensions against a difficult picture nationally.</li> <li>- Sustainability training run in conjunction with Dudley College and annual staff travel survey completed.</li> <li>- Successful event with four local academy schools run to promote NHS career opportunities.</li> <li>- Strong elective recovery with mutual aid offered to system partners.</li> </ul> <p>One of the challenges faced during quarter four was a small shortfall with the Cost Improvement Programme for the current financial year. The challenge remained in delivering a long-term sustainable financial plan, including identifying recurrent savings for the Cost Improvement Programme in 2023/24.</p> <p>The annual business plan for 2023/24 was submitted to the Board in March and April. However, due to the current financial position, the annual business plan would be updated and reviewed at the next Finance and Performance Committee meeting before being submitted to the Board for approval.</p> <p>Mrs Board informed the governors that the Board and the Council of Governors jointly developed the priorities set out in the annual business plan. She assured the governors that the Trust had consistently worked with the Council of Governors to ensure their views were taken into account.</p> <p>Ms Rose confirmed to Ms Inglis that the Allied Health Professional vacancy rate was included in the Trust-wide target. A paper would be submitted to the Board shortly which would provide a breakdown around the various recruitment needs. She acknowledged to Ms Inglis that whilst the overall vacancy rate had shown an improvement, further work still needed to be done in that area.</p> <p>Mr Atkins reaffirmed to the Council of Governors that there was a good improvement in the overall staff vacancy turnover rate. The Workforce and Performance Committee was aware of the high vacancy rate in the Allied Health Professional division and was working with Karen Lewis, Chief Allied Health Professional, to resolve this issue.</p> <p>The Chair noted the good work being done by the Workforce and Performance Committee to address the vacancy rates in the different areas. He stated that NHS England was shortly to publish a workforce strategy and the Trust would have to think of different ways to attract people to come and work for them.</p> <p>There were no further comments or questions.</p>
<b>COG 23/23.5</b>	<p><b>Board Secretary Update</b> (Enclosure 7)</p>

	<p>Mrs Board provided a brief update on the Board Secretary report given as enclosure seven.</p> <p>She noted that the Council of Governors had been notified of the outcome of the elections, which was concluded on the 8<sup>th</sup> of June 2023.</p> <p>The Council of Governors were asked to:</p> <ul style="list-style-type: none"> <li>- <b>Endorse</b> the final version of the NHS Provider License Self-Certification document ahead of its publication by 30<sup>th</sup> June 2023.</li> <li>- <b>Note</b> the Annual Report preparation process and arrangements for receiving the Auditors report before it is laid before Parliament.</li> <li>- <b>Endorse</b> the final version of the governor's comment 2022/23 Quality Accounts ahead of its publication by 30<sup>th</sup> June 2023.</li> </ul> <p>The council resolved to note/endorse all of the above.</p> <p>There were no comments.</p>
<b>COG 23/24</b>	<b>Drive sustainability financial and environment</b>
<b>COG 23/24.1</b>	<p><b>Green Plan Update</b> (Verbal)</p> <p>Ninette Harris, Trust Sustainability Lead, provided a brief presentation on the Green Plan. The Green Plan was approved in 2020 and formed part of the five-year strategy plan implemented by the Green Plan Working Group and Mitie.</p> <p>She provided a detailed overview of the work the Green Team was involved with. The main focus of the Green Team was to reduce the carbon footprint of the Trust. She encouraged everyone present to do their bit to reduce their individual carbon footprint.</p> <p>Ms Rose thanked Miss Harris for her hard work and dedication to the Green Plan Programme. She noted the massive amount of work and change in relation to sustainability that Miss Harris had brought to the Trust in the short time that she had been employed.</p> <p>Mrs Board thanked Miss Harris for the amazing tips on how every individual can help reduce their carbon footprint. She requested Miss Harris to share her PowerPoint presentation with the Foundation Trust office for onward circulation to the Council of Governors.</p> <p>Mr Proctor thanked Miss Harris for a good presentation and for highlighting how small changes adopted by the Trust could positively impact the environment.</p> <p>Dr Hobbs highlighted to the Council of Governors that one of the KPIs for the Paediatric Virtual Ward was the positive carbon footprint impact it would have on the environment.</p> <p><b>Action: Miss Harris to share the PowerPoint presentation on the Green Plan Update with the Foundation Trust Office.</b></p> <p>There were no further comments.</p>
<b>COG 23/25</b>	<b>Build Innovative relationships in Dudley &amp; beyond</b>
<b>COG 23/25.1</b>	<p><b>Experience &amp; Engagement Committee Update</b> (Enclosure 8)</p> <p>Mr Giles summarised the Experience and Engagement Committee update given as enclosure eight.</p>

	<p>Following the last Experience and Engagement Committee meeting in May, governors have started accompanying the staff members from the Patient Experience Team on the 'Talk to Us' trolley. Positive feedback had been received from those governors who have attended these sessions.</p> <p>Mr Giles referenced the addendum to the governor's statutory duties and how it was important for governors to work together within the System. The Experience and Engagement Committee had recently reviewed and approved the governor and membership engagement plan. Governors were encouraged to take part in activities to promote membership.</p> <p>Mr Giles encouraged governors to actively participate in PLACE audits and Quality and Safety reviews as governor feedback was valuable to the Trust.</p> <p>Mrs Board thanked the governors who were a part of the Task and Finish Group for their time and contribution in developing the Governor and Membership Engagement plan for 2023-25.</p> <p>Mr Giles informed the Council of Governors that Ms Jill Faulkner offered to Chair the Experience and Engagement Committee if no other governors were interested in putting their names forward for the position. This position could not be offered to Ms Faulkner at the last meeting as she wasn't a voting governor at that time. The position for Chair would be finalised at the next committee meeting.</p> <p>Sir David Nicholson thanked Ms Falkner for putting forward her name to chair the Experience and Engagement Committee.</p> <p>There were no further comments or questions.</p>
<b>COG 23/26</b>	<p><b>Any other Business</b> (Verbal)</p> <p>At the start of the meeting, Mr Hussain asked for clarification if the deficit amount of 151 million pounds mentioned in the minutes under the Finance and Performance Committee Upward report (COG23/10) was relevant to The Dudley Group NHS Foundation Trust or the whole system. The Chair clarified that the deficit amount was relevant to all the system partners in the Black Country.</p>
<b>COG 23/27</b>	<p><b>Reflections on the meeting</b> (Verbal)</p> <p>There were none noted.</p>
<b>COG 23/28</b>	<p><b>Close of meeting and forward Council of Governor meeting dates: 2023/24</b></p> <p>The next meeting dates are as follows: 5<sup>th</sup> of October, 21<sup>st</sup> of December and 28<sup>th</sup> of March 2024</p> <p>Mrs Board informed the Council of Governors that the Annual Members Meeting will be held on the 21<sup>st</sup> of September as a face-to-face meeting followed by a behind-the-scenes event. The governors will formally receive the annual report and accounts at the Annual Members Meeting and are encouraged to attend.</p> <p>The meeting closed at 18:20 hrs.</p>

Sir David Nicholson, Chair of the meeting

Signed..... Dated .....

Outstanding	Item to be addressed
To be updated	Item to be updated
Complete	Item complete

#### Council of Governors meeting held 22<sup>nd</sup> June 2023

Item No	Subject	Action	Responsible	Due Date	Comments
COG 23/22.1	Staff Voice	The paper presented by Ms Jacqui Elson-Whittaker about the Dudley Heart Failure team will be circulated to the Board of Directors. <b>Update:</b>	Board Secretary	June 2023	Complete
COG 23/24.1	Green Plan update	The PowerPoint presentation on the Green Plan Update presented by Ninette Harris will be circulated to the Governors.	Foundation Trust Office	June 2023	Complete

**Paper for submission to the Full Council of Governors on  
5<sup>th</sup> October 2023**

<b>Report title</b>	<b>Remuneration and Appointments Committee update to Council</b>
<b>Sponsoring executive</b>	Diane Wake, Chief Executive
<b>Report author / Presenter</b>	Helen Board, Board Secretary Sir David Nicholson, Chair, Catherine Holland, SID

## 1. Suggested discussion points

The summary given below reflects matters considered at the meeting of the Remuneration and Appointments Committee on 22<sup>nd</sup> September 2023.

### Background

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 appraisals process for the full year 2022/23 has concluded and followed the process outlined below as agreed with Council of Governors.

#### non-executive director

- Gather 360 degree feedback survey based on NHS England framework to reveal perceived strength and development needs
- 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 considered by the Council of Governors Remuneration and Appointments Committee members prior to submission to NHS England by 31<sup>st</sup> 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.

### 1. Chair appraisal 2023

The annual appraisal for Sir David Nicholson, chairman has been carried out by Catherine Holland, the Senior Independent Director (SID). The framework for the appraisal follows that issued by NHSE and covers the period from September 2022 to August 2023. A summary is provided below:

The Chair's annual appraisal considered the performance of the Chair for the period September 2022 to August 2023. The objectives for 2022/23 have been met in full. In addition, the appraisal has drawn on the 360 feedback process based on the criterion proposed by NHSE that had been in the appraisal period (June/July 2023). The objectives set for that period have been met in full.

Additional feedback was also sought from a range of stakeholders by the Senior Independent Director (SID) – NEDs, Lead Governor, CEO and representatives of NHSE and ICB.

Earlier in the year, the Chair also completed an annual self- declaration against the Fit and Proper persons requirements applicable to all NHS Directors. No issues have been reported that require referral to the Committee.

The senior independent director has worked with the chair to set objectives for 2023/24.

The Chairs ongoing development and support needs are being met through his existing network within the NHS, and support from the Deputy Chair and SID.

In line with NHS England requirements, a completed NHS provider chair appraisal reporting template has been submitted with an overall assessment rating of satisfactory confirming that the chair has met their formal expectations.

### **Recommendation**

The Council is asked to endorse the appraisal outcome of the chair, Sir David Nicholson for the period September 2022 to August 2023.

## **2. Non-executive director full year appraisal 2022/23**

This report summarises the individual appraisal findings that were considered by the Remuneration and Appointments Committee for each non-executive director in post in an associate non-voting role and substantive voting role.

The principal corporate objectives have been fully met by all. Each have received an overall assessment of their performance using rating issued by NHS England: strong performance, fully competent, needs development or poor performance. All non-executive directors have been assigned an overall rating of fully competent with the exception of Julian Atkins and Catherine Holland who have been assigned an overall assessment of strong performance. See appendix 1

Additional considerations:

- Mr Vij Randeniya assumed the role of Committee chair of the newly established Integration Committee that met in shadow for the first time in June 2023. There is a recommendation for the extension of the term of office for Vij Randeniya to November 2026. The rationale is to ensure continuity as we move through the next couple of years.
- There is a recommendation for the extension of the term of office for Catherine Holland up until August 2026. The rationale is to draw on her experience and ensure continuity as we move through the next couple of years.
- Joanne Hanley was appointed as non-executive director for a three year term in June 2023. Joanne has received a structured induction and has met with the deputy chair with objectives set for the current financial year.
- Professor Anthony Hilton was appointed as an associate non-executive director in July 2023 for a one year term. Anthony has received a structured induction and has met with the deputy chair with objectives set for the current financial year.
- The Committee considered the non-executive director's portfolios where most non-executive directors have responsibility for a number of committees as well as leading on specific portfolio areas.
- To ensure continuity and stability of the Board at a time of recovering backlogs post covid, financial constraints and integration activity across the local system with the emergent provider collaborative agenda, there is a phasing of those NEDs who will reach their end of terms of office. A clear succession and development plan for the non-executive members of Board is subject to regular review of the skills and experience of the Board and this was last reported to the Council of Governors in October 2022.

## Recommendation

The Council is asked to endorse the appraisal outcomes of the non-executive directors for the period 2022/23.

### 3. Non-executive recruitment 2023/24

During 2023, the Council of Governors appointed one non-executive director, Joanne Hanley, and one associate non-executive director, Professor Anthony Hilton.

The current non-executive director skill mix remains largely unchanged and is reflective of the requirements of the board in respect of skills and experience required to deliver the Trusts Strategic Goals:

- Business/Commercial/Entrepreneurial
- Clinical Experience
- Community / Voluntary
- Financial Experience
- Governance Experience
- Health Sector Knowledge
- Patient / Public Engagement
- Politics / Stakeholders / Partnerships
- Regulation / Legal
- Stakeholder management
- Strategy and Planning
- Workforce /HR

The mix of skills and experience will be kept under review.

### Current composition and succession planning






The Trust has eleven non-executive directors including the Chair (9 x voting and 2 x non-voting). The Trust has continued to successfully appoint associate non-executive directors that has broadened the skills and experience of the Board to encompass primary care, support the Trusts ambition to attain University Hospital status and has improved the diversity of the Board.

### Terms of office and recruitment 2023/24

There are five non-executive colleagues scheduled to reach their end of term in the period 2023/24:

- **Julian Atkins** – reaching his end of term of office with no option for further extension. In May 2024, Julian has served on the board since 2016. The NHS Code of Governance provides guidance for extension of terms beyond six years advising that they should be subject to rigorous review. In the case of Julian, the Council agreed to extend his term in 2022 for a further two years with a rationale of ensuring continuity during a period of significant changes to the membership of the Board.
- **Catherine Holland** - recommendation to extend her term for a further two years until August 2026
- **Vij Randeniya** – recommendation to extend his term until November 2026
- **Thuva Amuthalingam** – due to reach his end of term of office in May 2024 and as an associate non-executive director will review his options early in the new year.
- **Professor Anthony Hilton** – newly appointed associate non-executive director. Review of options to extend his term to take place spring 2024.

## 2. Alignment to our Vision

Deliver right care every time 	Be a brilliant place to work and thrive 	X	Drive sustainability (financial and environmental) 	Build innovative partnerships in Dudley and beyond 	Improve health and wellbeing 
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<b>2. Report journey</b>
Council of Governors October 2023

<b>3. Recommendation(s)</b>
The Council of Governors is asked to:
<b>a. Endorse</b> the appraisal outcome of the chair, Sir David Nicholson for the period September 2023 to August 2023
<b>b. Endorse</b> the appraisal outcomes of the non-executive directors for the period 2022/2023
<b>c. Approve</b> the extension to the term of office for Catherine Holland for a further two years until August 2026
<b>d. Approve</b> the extension to the term of office for Vij Randeniya, non-executive director until November 2026

4.	Impact							
Board Assurance Framework Risk 1.2		X	Achieve outstanding CQC rating.					
Board Assurance Framework Risk 6.0		X	Deliver on its ambition to building innovative partnerships in Dudley and beyond					
Corporate Risk Register		N						
Equality Impact Assessment		Is this required?	Y		N	X	If 'Y' date completed	
Quality Impact Assessment		Is this required?	Y		N	X	If 'Y' date completed	

## Non-executive team - Appraisal summary 2022/23






<b>Organisation</b>	The Dudley Group NHS Foundation Trust
<b>Chair</b>	Sir David Nicholson

<b>Name of NED</b>	<b>Overall score (Strong performance/ Fully competent/Needs development/Poor performance)</b>	<b>Learning &amp; development needs identified</b>	<b>Any issues that might affect suitability for appointment</b>	<b>Does the NED demonstrate your Trusts values and behaviours?</b>
<b>Julian Atkins</b>	Strong Performance	Nothing identified at this time but will keep his development needs under review.	none	yes
<b>Thuva Amuthalingam</b>	Fully competent		none	yes
<b>Gurjit Bhogal</b>	Fully competent		none	yes
<b>Gary Crowe</b>	Fully competent		none	yes
<b>Joanne Hanley</b>	n/a	New in post - Objectives set for 23/24	none	yes
<b>Anthony Hilton</b>	n/a	New in post - Objectives set for 23/24	none	yes
<b>Catherine Holland</b>	Strong Performance		none	yes
<b>Elizabeth Hughes</b>	Strong Performance		none	yes
<b>Vij Randeniya</b>	Fully competent		none	yes
<b>Lowell Williams</b>	Fully competent		none	yes

**Paper for submission to the Full Council of Governors on  
05<sup>th</sup> October 2023**

<b>Report title</b>	Chief Executive's Report
<b>Sponsoring executive</b>	Diane Wake, Chief Executive
<b>Report author</b>	Diane Wake, Chief Executive

<b>1. Suggested discussion points</b>
<ul style="list-style-type: none"> <li>Operational Performance</li> <li>Black Country Provider Collaboration</li> <li>GMC National Training Survey</li> <li>Lucy Letby Trial Outcome</li> <li>Reinforced Autoclaved Aerated Concrete (RAAC)</li> <li>National Cancer Waiting Times Standards</li> <li>Charity Update</li> <li>Healthcare Heroes</li> <li>Patient Feedback</li> <li>Awards</li> <li>Visits and Events</li> </ul>

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

<b>2. Report journey</b>
Public Board of Directors Meeting – 14/09/2023
Full Council of Governors Meeting – 05/10/2023

<b>3. Recommendation(s)</b>
The Council of Governors is asked to:
<b>a.</b> Note and comment on the contents of the report.

4. Impact							
Board Assurance Framework Risk 1.1	X	Deliver high quality, safe person centred care and treatment					
Board Assurance Framework Risk 1.2	X	Achieve outstanding CQC rating.					
Board Assurance Framework Risk 3.0	X	Improve and sustain staff satisfaction and morale					
Board Assurance Framework Risk 4.0	X	Remain financially sustainable in 2023/24 and beyond					
Board Assurance Framework Risk 6.0	X	Deliver on its ambition to building innovative partnerships in Dudley and beyond					
Board Assurance Framework Risk 7.0	X	Achieve operational performance requirements					
Corporate Risk Register							
Equality Impact Assessment	Is this required?	Y		N	x	If 'Y' date completed	
Quality Impact Assessment	Is this required?	Y		N	x	If 'Y' date completed	

### Operational Performance

The National focus remains on reducing long waits to routine treatment. The Trust continues to provide mutual aid to other Trusts within the Black Country to support a system-wide reduction in the elective backlog. The Trust is focusing on the next national requirement of reducing waits beyond 65 weeks. The Trust is participating in the National, Getting It Right First Time-led 'Faster Further' Outpatient project aimed at increasing the number of first new outpatient appointments delivered in order to reduce the risk to the 65 week target. Central to this is improving the number of patients on Patient Initiated Follow Up pathways, reducing the Did Not Attend rate and improving clinic throughput and productivity.

### Black Country Provider Collaboration

#### Key Messages on the Provider Collaborative Executive – August 2023

The following are the key messages from the BC Provider Collaborative meeting on the 7<sup>th</sup> August 2023.

#### 1) Clinical Improvement Programme

##### a. 'Further Faster' Outpatient Initiative

An update on progress with the 'Further Faster' outpatients initiative. Positive progress is being made with further actions to validate demand and establish 'Super clinics' now being focused on for progression during the latter stages of the initiatives.

##### b. Black Country Provider Collaboration Get It Right First Time Quarterly Report

Get It Right First Time (GIRFT) quarterly data was presented showing minimal progress in attaining target performance. Key challenge is the 'lag time' in data reporting centrally (currently between 3 to 6 months behind). Local work is being progressed to identify more frequent data is available on a monthly basis to enable Clinical Networks to proactively manage progress on delivery.

#### 2) Corporate Improvement Programme

The Collaborative Executive (CE) received further updates on two of the Phase 1a priorities for Corporate 'support service' functional reviews. These are summarised as follows:

- a. **Payroll** – the responsible officer presented a detailed Priority Initiation Document (PID) identifying and outlining the milestones and delivery dates to ensure delivery of the agreed option by the end of the 23/24 financial year.
- b. **HR (Mandatory Training)** – the responsible officer provided a verbal update on the recent Expression of Interest (EOI) which was progressed. Of the 5 organisations invited to submit an EOI, only two submitted an offer which are currently being reviewed with one dropping out subsequently. The remaining bidder (Royal Wolverhampton NHS Trust) will be asked to present their proposal at a future Collaborative Executive

#### 3) Draft Black Country Provider Collaboration Annual Report

The Black Country Provider Collaboration Managing Director presented a draft Black Country Provider Collaboration Annual Report to the Collaborative Executive. This covered a period between April 2022 to August 2023, focusing on the progress made within the Clinical & Corporate Improvement Programmes, together with system transformation and enabling priorities during this period. A full and final version will be published online in September, with an Executive Summary available for the Board Development Day in early September.

#### **4) Black CPC 23-24 Budget**

The Black Country Provider Collaboration Managing Director presented a short paper on 2022/23 budget out-turn, and budget requirement for 2023/24 aligned to commitments identified in the annual work plan outlined in schedule 3 of the Collaboration Agreement. The Collaborative Executive agreed to a four-way split of the shortfall.

#### **5) Planning for 2024/25**

Dave Baker, Chief Strategy Officer from Sandwell and West Birmingham NHS Trust, presented an initial proposal paper on planning for 2024/25. Principles and concepts were discussed, setting the scene in advance of the first development session scheduled for the next face to face Collaborative Executive meeting on the 4<sup>th</sup> September. As we continue our journey of closer working, our desire and intent is to reduce duplication and work towards a single Annual Plan for all four partners and the BCPC.

#### **6) Joint Board Development Session**

The Collaborative Executive received a brief from Alan Duffell on the Joint Board Development session planned for the 12<sup>th</sup> September 2023. This will be the first of several sessions planned to encourage closer working at the Board level across the four partner organisations.

#### **7) Governance**

A brief update was provided by the Black Country Provider Collaboration Managing Director on the progress with the Collaboration Agreement and the establishment of the Joint Provider Committee.

A consistent Board paper together with the Collaboration Agreement, and the terms of reference for the Joint Provider Committee (JPC) is now being reviewed by each partner's Board, with clear instructions on the ask.

A shadow Joint Provider Committee met on the 4<sup>th</sup> August to review and discuss the proposals with clarity provided on any legal issues from the legal team at Hill Dickinson. All partner Boards will have reviewed and hope to confirm approval of the documents by mid-August, with a launch planned to coincide with the forthcoming Board Development session in early September.

A short update on some wider governance issues was also provided by Simon Evans, highlighting key progress being made to converge Trust Board meeting cycles, and the focus and functions of Trust Board sub-committees over the course of the remainder of this financial year.

#### **8) Workforce**

The Black Country Provider Collaboration workforce programme lead provided a brief update on a key range of priorities being progressed, as follows

- a. **International recruitment** - A proposal to progress a single Black Country Provider Collaboration wide International Recruitment campaign for 2024/25 was discussed and agreed, subject to a review determining that there was sufficient merit in doing so. Mr Alan Duffell to meet with Chief Nurse Officers' and agree any need and identify the appropriate way forward.
- b. **E-Rostering** - Work will commence to reduce the variation across the four partners on E-rostering, led by the Chief Information Officer with support from the Chief People Officer. It is hoped and anticipated that by utilising common systems and approaches across the four partners, that a range of productivity and efficiency savings will be identified. It was agreed

that no significant changes to any e-rostering systems would be progressed without discussion as the system looks to converge on its use and approach.

- c. **Seamless Movement of Staff** – An analysis of the current position at each partner for car parking and identification cards was presented with a potential way forward over a short-, medium- and long-term timeline. A working group is to be established to continue this work to progress the short-term priorities and bring back solutions for approval in due course.

## 9) Strategic Developments

- a. **North-Hub** – Work continues to engage on the 'North Hub proposal with three of the four partner Trusts and the Black Country Integrated Care Board currently taking the North Hub Full Business Case through their Boards for review and approval. Dialogue continues with NHSE to ensure support remains, with the NHSE Service Assurance process and public engagement to commence shortly.
- b. **Productivity & Value Group** - The Collaborative Executive were informed of the selection of a Productivity & Improvement Partner who has now commenced a focused period of work with the system to support financial recovery. They will be reaching out to meet teams and key people from across the system shortly.

## 10) Clinical Summit

The next Clinical Summit is being planned for October (hoping to confirm for Friday 27<sup>th</sup>), and it will be a joint summit with the Primary Care Collaborative. Date and venue will be confirmed shortly, together with an outline programme for the day. Instructions for registration will be announced by mid-August.

## GMC National Training Survey

Following the publication of the recent GMC National Training Survey, the Trust has been informed that the **Internal Medicine Training (IMT) Stage 1** at Russell's Hall Hospital has been recognised as a centre of excellent training for IMT Stage 1 postgraduate doctors in training.

Providing excellent training requires huge effort and dedication. The hospital particularly excelled in providing a good experience, induction, and a supportive environment for IMT postgraduate doctors in training. Of note is the significant improvement that was made from the 2022 GMC National Training Survey.

Dr Burbridge, Training Programme Director at NHSE has expressed their appreciation to all the teams delivering excellent IMT Stage 1 training and the outstanding work that is being done at Russell's Hall Hospital.

## Lucy Letby Trial Verdict

Following the outcome of the trial of Lucy Letby, the NHS have announced measures to strengthen patient safety monitoring to do everything possible to prevent anything like this happening again. The Trust has reviewed the letter and actions have been taken to ensure the Trust fully complies with its recommendations/requests. The full letter from NHS England can be found in the reading pack.

## Reinforced Autoclaved Aerated Concrete (RAAC) in Russells Hall Hospital

### RAAC in Russells Hall Hospital

Summit have confirmed to the Trust that there are RAAC planks installed to areas of the B Block/West Wing Roof.

This area is the original hospital built in the early 1980's which was subsequently refurbished and extended as part of the PFI construction in early 2000's. This was confirmed in a commissioned survey by BRE which was issued in draft format to Summit in March 2023.

## **Next Steps**

Summit have established a project team which includes multiple stakeholders from within Russells Hall Hospital. The team will primarily manage a short-term project that will:

1. Carry out a full survey of the hospital to ensure that the assessments of RAAC made to date have been sufficiently thorough and covered all the buildings and areas on the Russells Hall site (including plant/works, education facilities and other non-clinical areas/buildings).
2. Carry out surveys in line with NHSE advised guidance to ensure that the management plans in place for RAAC incidence are sufficiently robust and being implemented. This to include appropriate testing of RAAC slabs, review of maintenance records and ensuring ongoing management are in place going forward.
3. To ensure both Summit and the Trust are familiar with the learning from other NHS RAAC hospitals and that this is incorporated into standard business continuity planning as a matter of good practice.

## **National Cancer Waiting Times Standards**

NHS England and the Department of Health and Social Care have announced changes to the cancer waiting times standards from 1 October 2023.

There are currently 10 different waiting times standards applied to NHS cancer diagnosis and treatment.

The changes announced include the removal of the two-week wait standard in favour of a focus on the Faster Diagnosis Standard, and the rationalisation of those standards into three core measures for the NHS:

- The 28-day Faster Diagnosis Standard (75%)
- One headline 62-day referral to treatment standard (85%)
- One headline 31-day decision to treat to treatment standard (96%)

All three of these performance standards are key measures of performance, and we remain committed to all three.

Importantly, these changes also provide the NHS with the opportunity to pivot back to focusing on the core constitutional standards, and to ensure we are collectively focused on supporting services to improve cancer waiting times performance against these. Alongside this update to cancer waiting times standards, we are therefore also confirming that:

1. The Faster Diagnosis Standard, currently set at 75%, will be rising to be set at 80% in 2025/26.

NHS England set out its intent to set a higher threshold for this standard over time when it was first introduced, and with the target being met for the first time since its inception in February 2023, together with £2.3bn of investment in extra diagnostic capacity over the current spending review period, it is the right time to set a clear timeframe for these changes.

Trusts should ensure diagnostic capacity investment is suitably prioritised for cancer pathways in anticipation of these changes, and an interim target for 2024/25 will be confirmed in next year's planning guidance.

In most trusts performance against all tumour types will need to improve to meet these standards, and we would expect performance against breast and skin specifically to need to be above 90%.

2. Where services have reduced their backlogs to manageable levels, focus should now be shifted back onto improving performance against the headline 62-day standard.

Nationally we are expecting to achieve 70% by March 2024, although we understand the impact ongoing industrial action could have on this, and NHS England will confirm further levels of improvement towards pre-pandemic levels in the 2024/25 Planning Guidance.

Individual provider trajectories for 2024/25 will be agreed as part of this process, and systems and providers with outlying performance levels within 2023/24 will be supported and overseen via the existing NHS England tiering system.

## **Charity Update**

### **Hospital patient raises money for Trust Charity to thank them for her care**

A Russells Hall Hospital patient raised £1,550 for the hospital's Rheumatology Department as a way of saying thank you for the care she received after two knee replacements and a diagnosis of rheumatoid arthritis. Margaret Tranter who is aged 81 spent the last five months walking the fields in her local area for thirty minutes nearly every day and, in that time, she has walked over 100 miles.

Margaret started walking regularly to help with her recovery which, after the excellent care she received, led to her beginning her fundraising journey. She walked over the fields near Corbett Outpatient Centre where she worked as a nurse before retiring in 2009. The journey is a full circle moment for Margaret, giving back to the organisation she used to work for.

### **The Great Bostin' Charity Bake Off**

Departments across the Trust held a charity bake sale to become our Bostin' Black Country Baker.

Cakes sales are a great way to raise funds for individual department charitable funds. Staff submitted their best cakes in our Bake Off Showstopper competition on Wednesday 6th September and our Directors absolutely loved judging them. I can confirm the cakes were absolutely delicious and a great way to bring staff together while raising charity funds.

### **Waldrons Will Fortnight**

So far Waldrons Solicitors have raised over £50,000 for the Dudley Group NHS Charity by writing wills for their clients free of charge who, in turn, donate to our charity. Waldrons Will Week returned from the 4th to 8th September and we were delighted to see so many staff taking advantage of the offer.

### **Glitter Ball 'Charity Dinner and Dance' Event**

The Glitter Ball Charity Dinner and Dance event returns this year celebrating 75 years of the NHS on Thursday 16th November at the Copthorne Hotel, Merry Hill, Dudley. The event will bring together local businesses across The Black Country to show support for our Trust Charity and network with other like-minded Black Country businesses. We are looking for any suppliers, businesses and

connections that would be interested in sponsoring or attending our event, if interested please drop Nithee our Head of Fundraising an email on [nithee.patel@nhs.net](mailto:nithee.patel@nhs.net).

## Healthcare Heroes



**June's individual Healthcare Hero individual award went to Harry Patel.** Harry started at the Trust in 1993 as a respiratory technician and 30 year later leads the same team he started with as a junior. Incredibly Harry has not had a single day of sickness absence in 30 years!! He has improved and developed the service to include a long-term nebuliser service, specialist sleep assessments, full detailed pulmonary function testing, exercise testing, specialised GI testing and much, much more.



**June's Healthcare Heroes team award went to the Emergency Department.** They were recognised for their continuous hard work and for the exceptional patient care they provide despite the growing number of patients and reduced amount of capacity. This is not forgetting all the smaller but vital tasks that they carry out on a daily basis that makes a huge difference to patient care.



**July's Healthcare Heroes individual award went to pharmacist Stephen Payne.** On his way to a family holiday, Stephen helped a gentleman on his flight who suffered from a prolonged epileptic fit. The assurance and care that he provided to Alan and his wife Rose was described as 'outstanding' by their daughter. Stephen liaised with a newly qualified junior doctor who was also on the plane and was able to offer specialist advice on the medications they had available. On landing, Stephen stayed with them to explain the situation to the waiting

ambulance crew. He took their contact number and kept in regular contact with them to check on his condition. It was especially wonderful to have Alan and Rose at Stephen's award presentation too.



**The July Healthcare heroes team award went to the Dudley Heart Failure team** for their dedication and enthusiasm to bring the benefits of modern heart failure medication to the population of the Black Country. They were also nominated for their commitment to ensuring the implementation of complex treatment regimes, providing patient education and their remarkable end of life support. Not only has the team introduced new treatment pathways, but they have also introduced weekly and palliative multidisciplinary teams, a virtual ward and electronic

referrals to name a few of their accomplishments.

### **Patient Feedback**

**Ward C8** - It was excellent. All staff were knowledgeable caring and helpful. At a very difficult time personally I felt I could not be in better hands.

**Accident & Emergency** - From booking at reception, to leaving after treatment, my experience was of being treated with respect and kindness from all personal I met, thank you.

**Leg Ulcer** - The staff are always polite and know all about my health problems and always kept informed about my treatment.

**Minor Procedures Room** - Everyone was really helpful, cheerful and do minor procedures proud from nurses to doctors.

**Ophthalmology** - My husband, has had a variety of appointments at five different places, all relating to possible glaucoma. Corbett Hospital was his sixth different venue. We wish to let you know how incredibly sensitive, efficient, and professional both Ophthalmic Technicians were.

**B2 (Trauma)** - Staff very attentive & listen to my needs, nothing to much trouble om has utmost respect for very well done. Please keep up good work.

**Colorectal Surgery** - everything was explained to me clearly what would be done when having my procedure, which really helped ,specialist was very caring,

**Dietitians** - Always positive conversations with the dietitian, great advice and always felt understood.

**Ward B4** - Staff were lovely and work really hard. Ward was clean. They made me feel better consultant was brilliant and I felt that I was extremely well cared for.

### **Awards**

#### **Dudley specialist midwife honoured**

Dudley's very own Holly Haden, was honoured by Their Royal Highnesses The Prince and Princess of Wales at a very special NHS Big Tea party, marking the 75th anniversary of the NHS.

Holly is a bereavement specialist midwife and cares for families who lose their baby during



pregnancy or shortly after birth. She was nominated for her incredible work in the health service, including promoting her local NHS charity's baby bereavement campaign, which raised over £100,000 to create a dedicated baby bereavement suite at Russells Hall Hospital in Dudley.

Hosted by NHS Charities Together the event was attended by members of the workforce and patients representing achievements of the NHS and NHS charities over the last 75 years.

### **Pharmacy Awards**

Our annual pharmacy staff recognition awards took place to celebrate our colleagues in Pharmacy and the hard and often challenging work they undertake each day – each and every one of them are valued for their contributions to the successful running of our service.

This year I had the pleasure of presenting the awards as well as several members of the Trust's executive team. Winners included Adam Bheekooa, Beth Middleton, Isabelle Jones, Steven Shanu, Sarah Kinnersley, Bethany Davies, Lyndsey Nicoll, Charlotte Walton, Jahmal Patterson, Gabriella Henson and Alan Gerrard

### **Gold Standards Framework (GSF)**

The Gold Standards Framework aims to enable a 'gold standard' of care for everyone, with any condition, in any setting, given by any care provider, at any time in a person's last years of life.

We had the brilliant news that our C3/Forget Me Not Unit, C8 and Critical Care Unit wards have achieved Gold Standards Framework re-accreditation and Critical Care and Rapid Response EOLC community team have achieved GSF accreditation.

For Critical Care and Rapid Response they are incredibly the first of their teams in the country to achieve GSF accreditation. They will receive their awards at a ceremony at the end of September.

### **Visits and Events**

6 July 2023	Dudley Integrated Healthcare Project Board
11 July 2023	West Midlands Cancer Alliance Board
11 July 2023	NHS England Midlands Leadership Roadshow
13 July 2023	Public and Private Dudley Group NHS Foundation Trust Boards
18 July 2023	NHS Providers Trust-wide Improvement: Learning for Leaders from VMI-NHS Partnership Evaluation
19 July 2023	Dudley Integrated Healthcare Board
20 July 2023	Black Country Quarterly System Review
24 July 2023	Integrated Care System Cancer Board
25 July 2023	Productivity and Value Group
26 July 2023	Black Country & West Birmingham Diagnostic Strategic Board
27 July 2023	Dudley Group Finance and Performance Committee

27 July 2023	Black Country Integrated Card Public and Private Boards
28 July 2023	Dudley Group Integrated Committee
1 August 2023	Aston University Visit of Russells Hall Hospital
1 August 2023	Black Country System Chief Executive's Meeting
2 August 2023	Dudley Group Extra-ordinary Finance and Performance Committee
3 August 2023	Black Country Integrated Care Board Development Session
4 August 2023	Shadow Joint Provider Committee
7 August 2023	Black Country Provider Collaborative Executive
8 August 2023	Dudley Group/NHSE/ICB Oversight and Assurance Quarterly Review
9 August 2023	St Mary's University Visit of Russells Hall Hospital
10 August 2023	Dudley Group Extra-ordinary Finance and Performance Committee
10 August 2023	Dudley Group Extra-ordinary Audit Committee
10 August 2023	Dudley Group Private Board
15 August 2023	Black Country System Chief Executive's meeting
21 August 2023	Integrated Care System Cancer Board
21 August 2023	Extra-ordinary Integrated Care Board
22 August 2023	NHSE Diagnostic Deep Dive – Black Country Integrated Care Board
23 August 2023	NHSE Midlands Update call with Chief Executives/Dale Bywater

**Paper for submission to the Full Council of Governors on  
05<sup>th</sup> October 2023**






<b>Report title</b>	<b>Chairs update - Board of Directors meetings (public session) held July &amp; September 2023</b>
<b>Sponsoring executive</b>	<b>Sir David Nicholson, Trust chair</b>
<b>Report author</b>	Helen Board, Board Secretary

### 1. Suggested discussion points

Summary report from the Board of Directors meeting held July and September 2023 highlighting items of assurance, concern, action or decision that governors may wish to discuss further to establish any triangulation and assurance.

All governors and members receive a direct invitation to attend the Bi-monthly Board of Directors meetings and receive the full meeting pack of documents.

### 2. Alignment to our Vision

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

Council of Governors 05/10/2023

### 3. Recommendation(s)

The Council of Governors is asked to:

- a.** Note and discuss the contents of the report.

### 4. Impact

Board Assurance Framework Risk 1.1	X	Deliver high quality, safe person centred care and treatment
Board Assurance Framework Risk 1.2	X	Achieve outstanding CQC rating.
Board Assurance Framework Risk 2.0	X	Address critical shortage of workforce capacity
Board Assurance Framework Risk 3.0	X	Improve and sustain staff satisfaction and morale
Board Assurance Framework Risk 4.0	X	Remain financially sustainable in 2023/24 and beyond
Board Assurance Framework Risk 5.0	X	Achieve carbon reduction ambitions in line with NHS England Net Zero targets
Board Assurance Framework Risk 6.0	X	Deliver on its ambition to building innovative partnerships in Dudley and beyond
Board Assurance Framework Risk 7.0	X	Achieve operational performance requirements
Board Assurance Framework Risk 8.0	X	Establish, invest and sustain the infrastructures, applications and end-user devices for digital innovation
Corporate Risk Register	N	
Equality Impact Assessment	Is this required?	Y <input type="checkbox"/> N <input checked="" type="checkbox"/> If 'Y' date completed
Quality Impact Assessment	Is this required?	Y <input type="checkbox"/> N <input checked="" type="checkbox"/> If 'Y' date completed

## CHAIRS LOG UPWARD ASSURANCE REPORT FROM BOARD OF DIRECTORS (public session)

Date Board last met: 13<sup>th</sup> July, 14<sup>th</sup> September 2023

<p><b>MATTERS OF CONCERN OR KEY RISKS TO ESCALATE</b></p> <ul style="list-style-type: none"> <li>Financial situation remains challenging with month 4 position £133k worse than the phased plan submitted to NHSE. There was a £52m System CIP to be delivered this year which was being incrementally identified.</li> <li>Industrial action by junior doctors and nurses had impacted on some delivery of elective work. Use the learning to improve the Trusts management of future instance of industrial action.</li> <li>Emergency and urgent care remained an area of pressure with 73% of patients seen within 4 hours of arrival in ED which was slightly short of the 76% target.</li> <li>Paediatric Resuscitation training compliance remained a focus area for improvement and noted recent deterioration had been attributed to the industrial action.</li> <li>Digital Trust 3 year digital plan subject to delays and requiring rephrasing.</li> </ul>	<p><b>MAJOR ACTIONS COMMISSIONED/WORK UNDERWAY</b></p> <ul style="list-style-type: none"> <li>The board has established an Integration Committee that held its inaugural meeting in June 2023. The work of the Committee would be split into phases and would view partnership working across the organisation and system to ensure that work was not duplicated.</li> <li>RAAC (reinforced autoclaved aerated concrete – Trust responds to central NHE England communications highlighting the potential risk to Trust estate. Summit have confirmed that there are RAAC planks installed in areas of the B Block/West Wing Roof. Next steps agreed to manage situation with establishment of project team to carry out surveys in line with NHSE advised guidance to ensure that the management plans in place for RAAC incidence are sufficiently robust and being implemented. This to include appropriate testing of RAAC slabs, review of maintenance records and ensuring ongoing management plans are in place going forward. Ensure both Summit and the Trust are familiar with the learning from other NHS RAAC hospitals and that this is incorporated into standard business continuity planning as a matter of good practice.</li> </ul>
<p><b>POSITIVE ASSURANCES TO PROVIDE</b></p> <ul style="list-style-type: none"> <li>Patient Story – Dudley Improvement Practice/Dudley Clinical Hub/District Nursing Team. Patient story video featuring who explained why the St James District Nursing Team were essential to ongoing treatment in her own home and overall quality of life.</li> <li>Chief Nurse report confirmed that the maternity workforce had been fully appointed to and noted good progress in respect of meeting the Trusts CNST requirements.</li> <li>Learning from Deaths presentation noted good performance with 100% of deaths reviewed by the medical examiner team and</li> </ul>	<p><b>DECISIONS MADE</b></p> <ul style="list-style-type: none"> <li>Approval of the Emergency Preparedness, Resilience and Response (EPRR) Annual Report for 2022/23.</li> <li>Approval of final version of the Trust Annual Business Plan following the various iterations that had taken place since the submission at the end of March 2023.</li> <li>Approval of the Board Assurance Framework summary report for July and August 2023</li> <li>Approval of the scope, workplan and terms of reference for the Joint Provider Committee that met in shadow form in August 2023.</li> </ul>

<p>receiving Structured Judgement Reviews and the associated reduction in the number of inquests</p> <ul style="list-style-type: none"> <li>• Trust had seen a reduction in long term sickness absence with focused work to reduce short term sickness underway</li> <li>• There had been a significant shift in statutory and mandatory training compliance.</li> <li>• The Freedom to Speak up Strategy was received along with the annual report that reflected positively on improving the culture of the organisation</li> <li>• Performance against the 28 day faster diagnosis target was performing above standard and noted that the Trust ranked 8th out of 22 Trusts for Referral to Treatment Times (RTT). The Trust continued to provide mutual aid across the system.</li> </ul>	<ul style="list-style-type: none"> <li>• Approval of the annual review of effectiveness of the Board of Directors and its Committee 2022/23</li> <li>• Approval of the External Auditor's Annual Report 2022/23 and of the Audit Committee recommendation that Board approve the laying of the 2022/23 Trust Annual Accounts and Annual Report before Parliament. Noted Positive overall conclusion of work carried out by Grant Thornton in respect of the External Audit</li> </ul>
<p><b>Chair's comments on the effectiveness of the meeting:</b></p> <ul style="list-style-type: none"> <li>• Commended the quality of the papers and robust discussion held. Commended ongoing commitment of all staff to maintain performance standards</li> </ul>	

## Paper for submission to the Full Council of Governors on 05<sup>th</sup> October 2023

<b>Report title</b>	Integrated Performance Report for July 2023
<b>Sponsoring executive / Presenter</b>	Karen Kelly, Chief Operating Officer
<b>Report author</b>	Jonathan Boulter, Associate Director of Performance

### 1. Suggested discussion points

#### 1. Urgent and Emergency Care

Most EAS standards remained challenged last month and largely below target. Although front door pressures remain high, the average time to be admitted fell in July and realised improvements on both May and June. As reported in previous reports, Emergency Department attendance volumes have been sustained at high levels compared to historical volumes with attendances in recent months eclipsing those seen during the winter of 2022/23. July however saw a decrease in attendances by circa 200, the first reduction since the spring. Ambulance handover delays of over 60 minutes increased to 257 in July, an increase of 36 on June and 57 compared to May.

Although still below the required standard, average Emergency Department triage performance improved in July rising by 5% to 75.2%. Notably, improvements were realised in all triage areas. Clinician and nurse led pathway redesign is being undertaken with a particular focus on reducing ECG diagnostics at triage while space utilisation strategies are being explored to maximise triage capacity.

Emergency Department 4 hour performance in July was broadly similar to that delivered in June at 74.5%. 12 Hour Decision to Admit breaches increased in July.



#### 2. Cancer (Validated Data to June 2023)

Cancer 2 week wait performance in June remained below standard largely as a result of a deterioration in the skin tumour site. Medical workforce challenges (at consultant and junior doctor

level) are the key drivers of this reduction in performance. Intensive support has been provided to the skin team which has resulted in unvalidated data for July showing the Trust achieving the 93% standard once more. Furthermore, the skin team are, at the time of writing (mid-August), now seeing patients at days 5-7.

Having stabilised for a number of months, 62 day performance reduced to 52.9% in June. The number of treatments remained consistent with past months but fewer were achieved within target, with productivity remaining steady rather than decreasing. Urgent histology turnaround times remain a significant challenge to attaining cancer targets, particularly the 62 day standard. The Trust continues to work with partners at BCPS to address histology turnaround times. 28 Day Faster Diagnosis recovered in June having fallen to below the required standard in May.








### 3. Elective Restoration and Recovery

National focus remains on reducing long waits to routine treatment. The Trust continues to provide mutual aid to other Trusts within the Black Country to support a system-wide reduction in the elective backlog, with particular focus on assisting partner Trusts with treating patients at 78+ weeks wait. The Trust is focusing on the next national requirement of reducing waits beyond 65 weeks. The Trust has maintained a steady position over the last circa 6 weeks.

The Trust is participating in the national, GIRFT-led 'Faster Further' project aimed at increasing the number of first new outpatient appointments delivered in order to reduce the risk to the 65 week target. Central to this is improving the number of patients on Patient Initiated Follow Up pathways, reducing the Did Not Attend rate and improving clinic throughput and productivity. Through the Outpatient Improvement Group, clinic throughput has significantly improved in Gynaecology and Pain through the introduction of virtual sessions aimed at reducing long waits to first outpatient appointment. Following a successful trial, 40% of all patients reviewed in Gynae have been offered alternative appropriate pathways to traditional face to face clinics, thereby releasing this in-person capacity. Throughput in these sessions has increased from 10-12 patients to 45 per clinic. Pain and Gastroenterology have also launched similar pilots with others to follow. All specialities now have robust Patient Initiated Follow Up trajectories in place.

*The full data pack for the Integrated Performance Report was shared with the governors in the September meeting pack of the Public Board of Directors meeting*

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

2. Report journey
Finance and Performance Committee – 31/08/2023 Public Board of Directors Meeting – 14/09/2023 Full Council of Governors Meeting – 05/10/2023

3. Recommendation(s)
The Council of Governors is asked to:
<b>a.</b> Note the Trust's performance against national standards and local recovery plans for the month of July 2023 (June 2023 for Cancer and VTE)

4. Impact							
Board Assurance Framework Risk 7.0	x	Achieve operational performance requirements					
Corporate Risk Register	x	15					
Equality Impact Assessment	Is this required?	Y		N	x	If 'Y' date completed	
Quality Impact Assessment	Is this required?	Y		N	x	If 'Y' date completed	

**Paper for submission to the Full Council of Governors on  
05<sup>th</sup> October 2023**






<b>Report title</b>	Trust Strategy progress report – Q1 2023/24
<b>Sponsoring executive / Presenter</b>	Ian Chadwell, Deputy Director of Strategy
<b>Report author</b>	Ian Chadwell, Deputy Director of Strategy

## 1. Suggested discussion points

This report summarises progress against the goals and measures of success in the Trust's strategic plan 'Shaping #OurFuture'. Detailed progress updates were made to Executive Directors and the relevant Board sub-committees during July. Following the formation of the Integration Committee in June, progress on goals 'Build innovative partnerships' and 'Improve health & wellbeing' are now being reported to this committee. The revised schedule of which components of the strategy are reported where is included in this report. The committees received the reports as being a comprehensive reflection.

No changes to RAG ratings were proposed for Q1. 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.

## 2. Alignment to our Vision

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

Public Board of Directors Meeting – 14/09/2023  
Full Council of Governors Meeting – 05/10/2023

## 3. Recommendation(s):

The Council of Governors is asked to:

- a.** Note the strategy progress report for Q1 2023/24

## 4. Impact

Board Assurance Framework Risk 1.1	X	Deliver high quality, safe person centred care and treatment
Board Assurance Framework Risk 1.2	X	Achieve outstanding CQC rating.
Board Assurance Framework Risk 2.0	X	Address critical shortage of workforce capacity
Board Assurance Framework Risk 3.0	X	Improve and sustain staff satisfaction and morale
Board Assurance Framework Risk 4.0	X	Remain financially sustainable in 2023/24 and beyond
Board Assurance Framework Risk 5.0	X	Achieve carbon reduction ambitions in line with NHS England Net Zero targets
Board Assurance Framework Risk 6.0	X	Deliver on its ambition to building innovative partnerships in Dudley and beyond
Board Assurance Framework Risk 7.0	X	Achieve operational performance requirements
Board Assurance Framework Risk 8.0	X	Establish, invest and sustain the infrastructures, applications and end-user devices for digital innovation
Corporate Risk Register		
Equality Impact Assessment	Is this required?	Y <input type="checkbox"/> N <input checked="" type="checkbox"/> If 'Y' date completed
Quality Impact Assessment	Is this required?	Y <input type="checkbox"/> N <input checked="" type="checkbox"/> If 'Y' date completed

## REPORTS FOR ASSURANCE

### STRATEGY PROGRESS REPORT – Q1 2023/24

Report to Board of Directors on 14<sup>th</sup> September 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 were made to Executive Directors and the relevant Board sub-committees during July. Following the formation of the Integration Committee in June, progress on goals 'Build innovative partnerships' and 'Improve health & wellbeing' are now being reported to this committee. The revised schedule of which components of the strategy are reported where is included in this report. The committees received the reports as being a comprehensive reflection.

No changes to RAG ratings were proposed for Q1. 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	Integration Committee
Improve health & wellbeing	Integration Committee

The committees have received the detailed reports in July as being a comprehensive reflection with no changes requested. Appendix 1 contains the summary of status against each measure of success. No changes in RAG ratings were proposed between Q4 and Q1.

#### Progress to highlight from quarter 1 2023/24

- Maternity services CQC rating upgraded to 'good' following inspection report. Inspection reports for other services are pending.
- Sustained improvement in the vacancy rate during quarter 1 (6%) thereby meeting the target of 7%.
- Leadership Conference held in April and culture workgroup established with recommended approach presented to Directors in July.
- Events held to celebrate Big Green week to promote awareness of environmental sustainability.
- High volume digital outpatient clinics piloted in gynaecology and pain management with positive results.

#### Areas of challenge during quarter 1 2023/24

- Publication of latest operational productivity metrics in Model Hospital showed that for 2021/22, the Trust had costs per weighted activity unit in the highest quartile nationally. Services with the highest productivity opportunity have been conducting deep dives and presented outcomes and next steps to the Trust Finance Improvement Group.
- Challenges remain in delivering a long-term sustainable financial plan including identification of recurrent savings for the Cost Improvement Programme in 2023/24. Divisional Challenge meetings have been scheduled at the end of August and divisions are working toward the deadline of the end of September for the £26.2m CIP target to be fully identified with clear understanding of what is non-recurrent and a plan to be produced to detail timetable to achieve recurrent CIP delivery by year end.
- Trust faced pressures around urgent & emergency care although there was an improvement in handover delays this quarter compared to winter.

#### 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](#)).

## **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 Q1 2023/24.

Ian Chadwell  
Deputy Director of Strategy  
9<sup>th</sup> August 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	Maternity services rated good following recent inspection with further ratings for ED and children's services awaited		
	Improve the patient experience results	Target: top quartile performance (England) by 2025	Results of the national inpatient survey are embargoed until August. No change in results from Family & Friends Test		
Be a brilliant place to work and thrive	Reduce the vacancy rate	Target: achieve 7% by Jun-2023 and sustain	Current vacancy rate is 6% which is a further improvement on the previous quarter (7%). Continuing progress with recruitment with a focus on AHP and community roles		
	Improve the staff survey results	Target: better than England average by 2024/25	Culture Workgroup established with recommended approach to Directors in July. Leadership conference held and ways to share learning across the organisation being developed		
Drive sustainability	Reduce cost per weighted activity	Target: better than England average for overall, medical and nursing costs by 2024/25	Latest productivity metrics published by Model Hospital showing Trust was in highest quartile in 21/22. Work to identify remaining efficiencies ongoing		
	Reduce carbon emissions	Target: year-on-year decrease achieving net zero by 2040 (NHS carbon footprint) and 2045 (NHS Carbon footprint plus)	Trust approved a Climate Change Adaptation Plan and played key role in ICS sustainability network event in May		
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%; Dudley Group ambassadors engaged with local schools		
	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 progressed		

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. Plans for how to implement targeted lung health checks being developed		
	Increased planned care and screening for the most disadvantaged groups	Target: Breast screening uptake - Acceptable level: greater than or equal to 70.0% - Achievable level: greater than or equal to 80.0%	Proactive actions being taken by breast screening service to improve uptake by disadvantaged groups in collaboration with Dudley public health		

**Paper for submission to the Full Council of Governors on  
5<sup>th</sup> October 2023**

<b>Report title</b>	<b>Board Secretary update</b>
<b>Sponsoring executive</b>	Diane Wake, Chief Executive
<b>Report author &amp; Presenter</b>	Helen Board, Board Secretary

**1. Suggested discussion points**

**Council of Governors elections November 2023**

The Trust has commenced a round of elections overseen by Civica Elections Services, for vacancies arising in the following Constituencies owing to existing governors reaching their end of term of office. Elections are scheduled to conclude on 29<sup>th</sup> November 2023:

**Public Constituency**

Brierley Hill x 1 vacancy  
Central Dudley x 1 vacancy  
Rest of England x 1 vacancy  
Stourbridge x 1 vacancy  
Tipton & Rowley Regis x 1 vacancy

**Staff Constituency**

Nursing & Midwifery x 1 vacancy  
Partner Organisations x 1 vacancy (*election process managed locally*)

There is one appointment sought in the following:

**Appointed Governors**

Institute of Health, University of Wolverhampton – awaiting appointee to advise

**Annual Member Meeting September 2023**

Following the laying of the Trusts report before parliament on Tuesday 19<sup>th</sup> September 2023, the Annual Members Meeting was held on Thursday 21<sup>st</sup> September where the Annual Report and Accounts were presented along with the Auditors report upon them.

The auditors, Grant Thornton, confirmed that the audit had been completed in accordance with all relevant law. In respect of the financial statements being 'true and fair' – an unmodified Audit Opinion on the 2022/23 financial statements was issued by Grant Thornton in June 2023. On the question of the Trust having appropriate arrangements in place to secure value for money, Grant Thornton noted there were no significant weaknesses identified for governance or improving economy, efficiency and effectiveness. For financial sustainability, one risk of significant weakness was identified, which related to the 23/24 deficit plan and on-going financial recovery.

A copy of the annual report and accounts can be accessed on the Trust website [Annual Reports - The Dudley Group NHS Foundation Trust \(dgft.nhs.uk\)](#) Hard copies can be requested from the Foundation Trust office.

**Fit and Proper Person Test – new framework issued**

**1. Introduction**

In August 2023, NHS England published a revised Fit and Proper Person Test (FPPT) Framework in response to the recommendations made by Tom Kark KC in his 2019 Review of the FPPT as it applies under Regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. The review highlighted areas that needed improvement to strengthen the existing regime.

The new Framework is effective from 30 September 2023, and NHS organisations are expected to use it for all new board level appointments or promotions and for annual assessments for all board members going forward from that date. The Council is asked to note the introduction of the new framework.

## 2. Purpose

The purpose of the new Framework is to strengthen individual accountability and transparency for board members, thereby enhancing the quality of leadership within the NHS. It is a core element of a broader programme of board development, effective appraisals and values-based (as well as competency-based) appointments – all of which are part of the good practice required to build a ‘healthy’ board. The Framework will help board members build a portfolio to support and provide assurance that they are fit and proper, while demonstrably unfit board members will be prevented from moving between NHS organisations.

## 3. Application

The Framework applies to executive and non-executive directors of integrated care boards (ICBs), NHS trusts and foundation trusts, NHS England and the CQC, interim as well as permanent appointments where greater than six weeks and those who are called “directors” within Regulation 5. If they wish, trusts can extend the Framework to cover other senior managerial positions, for example, to those who regularly attend board meetings or otherwise have significant influence on board decisions. The annual submission to NHS England requirement is, however, limited to board members only.






## 4. What it means for the Council of Governors

In relation to foundation trusts, there are no proposed changes to the Council of Governors’ responsibilities in relation to the chair’s FPPT assessment as it is not within the scope of the Framework to do so. However, as the chairs’ annual appraisals are presented to the Council of Governors for information, the same should be the case for a summary of the outcome of the FPPT for non-executive board members.

This information can be retained by the Council of Governors as part of future considerations for any reappointments. Similarly, the Council of Governors should be informed of a satisfactory initial FPPT assessment for new chair and NED appointments.

It is good practice for the chair to present a report on completion of the annual FPPT in accordance with local policy, to the board in a public meeting and, where applicable, to the Council of Governors for Non-Executive Directors, for information.

## 2. Alignment to our Vision

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

Council of Governors – 05/10/2023

## 3. Recommendation(s)

The Council of Governors is asked to:

- Note that governor elections commenced on Friday, 29th September and will close on Thursday, 23rd November 2023.
- Note that the Annual Report and Accounts and the Auditors report upon them were presented at an Annual Members Meeting on Thursday, 21<sup>st</sup> September 2023
- Note that new guidance has been issued in respect of the Fit and Proper Person Test

<b>4. Impact</b>							
Board Assurance Framework Risk 1.1	X	Deliver high quality, safe person centred care and treatment					
Board Assurance Framework Risk 1.2	X	Achieve outstanding CQC rating.					
Corporate Risk Register	N						
Equality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed	
Quality Impact Assessment	Is this required?	Y		N	X	If 'Y' date completed	

**Paper for submission to the Full Council of Governors on  
5<sup>th</sup> October 2023**






<b>Report title</b>	Update from the Experience & Engagement Committee
<b>Sponsor / Presenter</b>	Yvonne Peers – Deputy Lead Governor
<b>Report author</b>	Madhuri Mascarenhas – Governance Administration Lead

### 1. Suggested discussion points

Summary report from the Experience & Engagement Committee that met on 19th September 2023 highlighting:

- Concerns with respect to Foundation Trust public membership numbers could potentially dip below the 13,000 required as per the conditions of the license.
- The position of Chair for the Experience and Engagement Committee has now been finalised.
- Governor training and development continues to develop and is provided internally to new and existing governors.
- In July, the Trust hosted the joint governor development session with Black Country Healthcare NHS Foundation Trust, which was well-received by the governors from both organisations.
- The Governor and Membership Engagement Plan for 2023-25 has now been finalised.

### 2. Alignment to our Vision

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 	X	Improve health and wellbeing 
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### 2. Report journey

Full Council of Governors Meeting – 05/10/2023

### 3. Recommendation (s)

The Council of Governors is asked to:

- a.** Note the contents of the report.

### 4. Impact

Board Assurance Framework Risk 6.0	x	Deliver on its ambition to building innovative partnerships in Dudley and beyond					
Corporate Risk Register	N						
Equality Impact Assessment	Is this required?	Y		N	x	If 'Y' date completed	
Quality Impact Assessment	Is this required?	Y		N	x	If 'Y' date completed	

## CHAIRS LOG

### UPWARD REPORT FROM THE EXPERIENCE AND ENGAGEMENT COMMITTEE

Date Committee last met: 19<sup>th</sup> September 2023

<p><b>MATTERS OF CONCERN OR KEY RISKS TO ESCALATE</b></p> <ul style="list-style-type: none"> <li>• Whilst the Trust remains compliant with its terms of licence regarding its public membership and is well represented by constituency, age, and gender, the current public membership figure of 13,296 is close to the required membership of 13,000.</li> <li>• Governors are requested to increase engagement and participate in at least one governor activity initiated by the Trust or by them over the next three months.</li> </ul>	<p><b>MAJOR ACTIONS COMMISSIONED/WORK UNDERWAY</b></p> <ul style="list-style-type: none"> <li>• During quarter two, all governors were polled to gather interest in activities they would like to participate in. Out of 23 governors in the post, responses were received from nine governors. The three activities which received the highest interest were Quality and Safety review, Feedback sessions with patients and relatives around the Dudley borough – by Healthwatch and sessions with Dudley Integrated Health and Care.</li> <li>• Plan underway for Lead Governor Alex Giles and Dr Mohit Mandiratta to do a special feature on Black Country Radio to promote membership and the governor's role to the broader community.</li> </ul>
<p><b>POSITIVE ASSURANCES TO PROVIDE</b></p> <ul style="list-style-type: none"> <li>• Good attendance at Board Committee meetings.</li> <li>• Governors actively participated in the 75<sup>th</sup> NHS celebrations and volunteer week.</li> <li>• The joint governor development session with Black Country Healthcare NHS Foundation Trust on the 18<sup>th</sup> of July was well received by the governors from both organisations. The plan is to host similar joint sessions periodically to promote system working.</li> </ul>	<p><b>DECISIONS MADE</b></p> <ul style="list-style-type: none"> <li>• The Governor and Membership Engagement Plan 2023 – 25 has been finalised, and a list of activities that governors would like to participate in over the coming months has been added to the planner.</li> <li>• Mushtaq Hussain – Public Governor of Central Dudley, has been appointed Chair of the Experience and Engagement Committee.</li> </ul>
<p><b>Chair's comments on the effectiveness of the meeting:</b></p> <ul style="list-style-type: none"> <li>• Good attendance and positive discussions. Papers received on time with good and precise information.</li> </ul>	