

# Council of Governors - Public

Thu 18 August 2022, 14:15 - 16:00

Boardroom, Freeman Hospital and Microsoft Teams

## Agenda

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### 14:15 - 14:15 **Council of Governors' Meeting: Public Session - Agenda**

0 min

*Attached*

 0 Council of Governors Agenda PUBLIC 18 August 2022.pdf (2 pages)

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## Business items

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### 14:15 - 14:35 **1. Apologies for absence and Declarations of interest**

20 min

*Verbal*      *Sir John Burn*

### **2. Minutes of the meeting held on 16 June 2022 and Matters arising**

*Attached*      *Sir John Burn*

 2 Council of Governors Public Minutes 16 June 2022 [DRAFT] GE KJ LT.pdf (14 pages)

### **3. Meeting action log**

*Attached*      *Sir John Burn*

 3 Public CoG Action Log August 2-22 [FINAL] LT.pdf (1 pages)

### **4. Chair's report**

*Attached*      *Sir John Burn*

 4 Chairman Report GE LT KJ.pdf (6 pages)

### **5. Chief Executive's report**

*Attached*      *Dame Jackie Daniel*

 5 Chief Executive Board Report July 2022 KJ LT.pdf (10 pages)

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## Quality & Patient Safety; Performance & Delivery

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### 14:35 - 14:50 **6.(i) Integrated Board Report – Quality, People & Finance**

15 min

*Attached*      *Angela O'Brien*

 6(i) Integrated Board Report Cover Sheet July 2022 KJ LT.pdf (2 pages)

 6(i) Integrated Board Report July 2022 LT KJ.pdf (26 pages)

### **6. (ii) Performance Report**

*Attached*      *Vicky McFarlane-Reid*

- 📄 6(ii) Trust Performance Report Cover Sheet July 2022 KJ LT.pdf (3 pages)
- 📄 6(ii). Trust Performance Board Report July 2022 KJ LB.pdf (10 pages)

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**14:50 - 15:00** **Refreshment Break**  
10 min

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## Discussion Topic

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**15:00 - 15:20** **7. Annual Report and Annual Accounts Briefing**  
20 min  
*Presentation* *David Reynolds/Kelly Jupp*

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## Governor Reports

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**15:20 - 15:35** **8.1 Lead Governor Update**  
15 min

*Attached* *Pam Yanez*

📄 8.1 Lead Governor Report - Council of Governors 18 August 2022 LT KJ.pdf (4 pages)

### 8.2 Quality of Patient Experience (QPE) WG

*Attached* *Poonam Singh*

📄 8.2 QPE WG Chairs Report August 2022 LT KJ.pdf (7 pages)

### 8.3 Business and Development (B&D) WG

*Attached* *Eric Valentine*

📄 8.3 BD WG Chairs CoG Report August 2022 LT KJ.pdf (7 pages)

### 8.4 People, Engagement and Membership (PEM) WG

*Attached* *Judy Carrick*

📄 8.4 PEM Working Group 18 Aug 22 CoG Report LT KJ.pdf (5 pages)

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## Items to Approve

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**15:35 - 15:45** **9.Nominations Committee Report**  
10 min

*Attached* *Kelly Jupp*

📄 9 Nominations Committee - Council of Governors August 2022 KJ LT.pdf (13 pages)

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## Items to receive and any other business

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**15:45 - 16:00** **10.1 Updates from Committee Chairs**  
15 min

*Attached* *Committee Chairs*

## **10.2 Any other business**

*Verbal*                      *Sir John Burn*

## **10.3 Date and time of next meeting:**

*Verbal*                      *Sir John Burn*

- Public Formal Meeting – Thursday 08 December 2022, 14.15 - 16:00

**Council of Governors' Meeting: Public Session** Thursday 18 August 2022 1415 h

Venue: Boardroom, Freeman Hospital and Microsoft Teams

**Agenda**

Item	Lead	Paper	Timing	
<b>Business items</b>				
1	Apologies for absence and Declarations of interest	John Burn	Verbal	14:15 – 14:35
2	Minutes of the meeting held on 16 June 2022 and Matters arising	John Burn	Attached	
3	Meeting action log	John Burn	Attached	
4	Chair's report	John Burn	Attached	
5	Chief Executive's report	Dame Jackie Daniel	Attached	
<b>Quality &amp; Patient Safety; Performance &amp; Delivery</b>				
6(i)	Integrated Board Report – Quality, People & Finance	Angela O'Brien	Attached	14:35 – 14:50
6(ii)	Performance Report	Vicky McFarlane-Reid	Attached	
<b>Refreshment Break</b>				
<b>Discussion Topic</b>				
7	Annual Report and Annual Accounts Briefing	David Reynolds / Kelly Jupp	Presentation	15:00 – 15:20
<b>Governor Reports</b>				
8.1	Lead Governor Update	Pam Yanez	Attached	15:20 – 15:35
8.2	Quality of Patient Experience (QPE) WG	Poonam Singh	Attached	
8.3	Business and Development (B&D) WG	Eric Valentine	Attached	
8.4	People, Engagement and Membership (PEM) WG	Judy Carrick	Attached	
<b>Items to Approve</b>				
9	Nominations Committee Report	John Burn / Kelly Jupp	Attached	15:35 – 15:45
<b>Items to receive and any other business</b>				
10.1	Updates from Committee Chairs	Committee Chairs	Attached	15:45 – 15:55

10.2	Any other business	John Burn	Verbal	15:55 – 16:00
10.3	Date and time of next meeting: Formal Meeting – Thursday 08 December 2022, 14:15 – 16:00			

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*Members of the public may observe the meeting in person subject to advance booking via emailing the Corporate Governance Team on [nuth.board.committeemanagement@nhs.net](mailto:nuth.board.committeemanagement@nhs.net)*

*Professor Sir John Burn, Chairman*

*Dame Jackie Daniel, Chief Executive Officer*

*Mrs Vicky McFarlane-Reid, Director for Business, Development and Enterprise*

*Mrs Angela O'Brien, Director of Quality and Effectiveness*

*Mr David Reynolds, Deputy Finance Director - Bank*

*Mrs Pam Yanez, Lead Governor*

*Mrs Poonam Singh, Staff Governor and Chair of the Quality of Patient Experience (QPE) Working Group*

*Dr Eric Valentine, Public Governor and Chair of the Business & Development (B&D Working Group*

*Mrs Judy Carrick, Public Governor and Chair of the People, Engagement and Membership (PEM) Working Group*

*Mrs Kelly Jupp, Trust Secretary*

## COUNCIL OF GOVERNORS' MEETING: PUBLIC SESSION

### DRAFT MINUTES OF THE MEETING HELD THURSDAY 16 JUNE 2022

- Present:** Professor Sir John Burn [Chair], Chairman  
 Public Governors (Constituency 1 – see below)  
 Public Governors (Constituency 2 – see below)  
 Public Governors (Constituency 3 – see below)  
 Staff Governors (see below)  
 Appointed Governors (see below)
- In attendance:** Mr Graeme Chapman, Non-Executive Director (NED)  
 Mrs A Dragone, Finance Director (FD)  
 Mrs Angela O'Brien, Director of Quality and Clinical Effectiveness (DQE)  
 Mr Ian Joy Deputy Chief Nurse (DCN),  
 Dr Vicky McFarlane Reid, Executive Director of Business, Development & Enterprise (EDBDE)  
 Mrs Caroline Docking, Assistant Chief Executive (ACE)
- Dr Sarah Brown, Consultant Liaison Psychiatrist, CNTW and Honorary Associate Medical Director for Mental Health, NUTH (for Item 22/10(i))
- Sumiyya Bilal-Thompson (Public attendee)
- Secretary:** Mrs Gillian Elsander, Corporate Governance Officer and PA to the Chairman and Trust Secretary

*Note: The minutes of the meeting were written as per the order in which items were discussed.*

#### PUBLIC – AGENDA

#### **22/08 BUSINESS ITEMS:**

##### **i) Apologies for Absence and Declarations of Interest**

The Chairman welcomed attendees.

Apologies for absence were received from Dame Jackie Daniel, Chief Executive Officer, Mr A Welch, Medical Director and Deputy Chief Executive, Mr M Wilson, Chief Operating Officer, Ms M Cushlow, Executive Chief Nurse, Mrs Kelly Jupp, Trust Secretary, Mrs Lauren Thompson, Governor and Membership Engagement Officer and Non-Executive Directors Mr J Jowett, Mr Bill Macleod, Ms Jill Baker, Professor Kath McCourt, Mr Steven Morgan and Associate Non-Executive Director, Professor D Burn.

## Agenda item 2

There were no additional declarations of interest made at this time.

**It was resolved:** to **record** the apologies for absence and to **note** that there were no additional declarations of interest made.

**ii) Meeting of the Meeting held on 17 February 2022, and matters arising**

The minutes of the meeting held on 17 February 2022 were agreed to be an accurate record of the meeting.

**It was resolved:** to **approve** the minutes of the previous meeting.

**iii) Meeting Action Log**

The action log position was received.

**It was resolved:** to **receive** the action log.

**iv) Chair's Report**

In addition to the activities highlighted in the report the Chairman advised that Mrs Jackie Thompson, Hotel Services Manager had received an NHS lifetime achievement award. Jackie, who recently retired from the Royal Victoria Infirmary after circa 47 years' service with the NHS, was amongst a dozen winners who received NHS Parliamentary Awards at a special ceremony in Westminster.

The Chairman advised that two of the Trust staff had also been recognised in the Queen's Birthday Honours. Honorary consultant medical oncologist, Professor Ruth Plummer, and midwife, Diane Buggy, both received MBEs for the huge contributions they have made above and beyond their positions.

The Chairman reflected on the ongoing challenges faced by the Trust and more widely, including the cost-of-living crisis, rising inflation, the war in Ukraine, climate change and increasing antibiotic resistance. This was also set against a backdrop of reorganisation of the NHS in terms of the newly created Integrated Care Systems, Boards and Partnerships and the demise of Clinical Commissioning Groups.

The Chairman stressed there would be some particularly challenging times ahead and highlighted the importance of keeping abreast of such challenges, recognising at the same time that a number of conflicting demands would likely be placed upon the Executive Team and the Trust Board.

**It was resolved:** to **receive** the report.

**v) Chief Executive's Report**

The Executive Director of Business, Development & Enterprise [EDBDE] presented the Chief Executive's report in the Chief Executive's absence. The following key points were highlighted:

## Agenda item 2

- Final activity and financial plans had been submitted for 2022/23. There would be some significant challenges, but progress was being made in relation long waits. By the end of June it was anticipated that there would a reduction in long waits to 44 patients waiting for over 104 weeks.
- The Break Trough Objectives had been set and summarised against the Trust 5P's (Patients, People, Performance, Partnerships, Pioneers).
- Cognisant of the cost-of living crisis, the Executive Team had increased the mileage rates payable to staff for work related journeys and introduced a travel subsidy for staff using public transport services.
- Jackie Bilcliff has been appointed as the Trust's new Chief Financial Officer, who will join the Trust in September to replace Angela Dragone following her retirement. Jackie joins the Trust from Gateshead Health NHS Foundation Trust, where she is Group Director of Finance and Deputy Chief Executive. To provide additional support at a time of financial transition, Bill Boa joined the Trust as Interim Strategic Financial Advisor, with a particular focus on the Trust Efficiency and Productivity Programme needed to deliver this year.
- In terms of Research and Innovation, funding has been confirmed from the Academic Health Science Network for the North East and North Cumbria (AHSN NENC) to continue the work of the North East Innovation Lab in assessing and validating the next generation of diagnostic testing. The Innovation Lab was originally set up as part of the Integrated Covid Hub North East (ICHNE). The Innovation Lab is attracting national attention as a unique facility.
- Head of occupational therapy, Odeth Richardson, has been elected as the new Chair of the British Association of Occupational Therapists (BAOT)/Royal College of Occupational Therapists (RCOT). Odeth will become the 21st Chair of BAOT/RCOT Council when she takes over from Professor Diane Cox at the end of June. Odeth will be speaking at the next Trust members event in August.

**It was resolved:** to receive the report.

## 22/09 QUALITY & PATIENT SAFETY; PERFORMANCE & DELIVERY

### i) Integrated Board Report – Quality, Performance, People & Finance

The DQE presented the report on behalf of the Medical Director, which provided an integrated overview of the Trust's position across the domains of Quality, People and Finance. The following key points were highlighted:

- The May report includes data to the end of April and should be considered in the context of 'living with Covid'.
- Following the removal of legal requirement to self-isolate the Trust saw the 6<sup>th</sup> peak of COVID-19 which saw between 60 and 90 patients on any one day. Between 300 and 500 staff members were also absent in any one day due to COVID or COVID-related absence. Coupled with other absence this totalled circa 1,300 staff absent on any one day in April. This created significant pressures on staff levels.
- The 6<sup>th</sup> COVID-19 wave had a similar impact to the first wave however patients were less acutely ill. A further importance difference being that during the first wave of



the pandemic, referrals were halted, and elective procedures scaled back, however the Trust was now required to maintain/expand elective recovery.

- Activity in Accident & Emergency (A&E) remains significantly higher than pre-pandemic levels with circa 75-100 attendances daily.
- The Trust had 0 cases of MRSA bacteraemia attributed in April 2022. Therefore, no cases have been recorded since April 2020.
- The number of falls and pressure ulcers have increased due to increasing activity levels.
- There were 23 Serious Incidents (SIs) reported in April 2022. An increase in the numbers of SIs since July 2021 can be attributed to a return to pre-pandemic bed occupancy alongside the higher acuity of patients in the Trust.
- There were 2,270 responses to the Friends and Family Test from the Trust in February 2022 (published April 2022) compared to 1,815 in the previous month.
- The Trust received a total of 29 formal complaints in April 2022, a decrease of 24 on the prior month.
- Overall sickness absence (including Covid related sickness) is 6.13% which is up from the end of February 2022 position of 5.90% (% Full-Time Equivalent (FTE) Time Lost).
- Staff turnover has increased from 9.4% in April 2021 to 12% in April 2022, against a target of 8.5%.
- Retention for staff over 1 year service is 86%, an increase from 84% in February 2021. Excluding ICHNE and COVID Vaccination staff this is 87%.

Mr Evans referred to the Ockenden Report and questioned if this had been reviewed by the Trust. The DQE advised that compliance and performance against the recommendations and actions from both the interim and the final Ockenden reports was regularly reported to both the Quality Committee and the Trust Board. It was noted that an Ockenden assurance visit was scheduled the following day with the Team from NHS England/Improvement (NHSE/I).

The Trust had completed a number of the recommendations however there were still some areas that were not fully compliant. For example the Trust was scheduled to roll out an electronic record system named Badgernet which would help facilitate audits which were currently undertaken via a paper-based system. Despite staff shortages within the maternity department, the staff have continued to deliver high quality of care as noted in the Quality Report. The Chairman added that detailed Board papers in relation to Ockenden were available via the Trust website.

Mrs Yanez advised that there was a vacancy for a Governor representative on the Trust's Patient Safety Group which feeds into the Quality of Patient Experience Working Group. Expressions of interest should be directed to the Governor and Membership Engagement Officer.

Dr Wilson referred to the increase of severe harm incidents and questioned what measures were taken if the upper limits were breached. The DQE explained the process in relation to the validation process for such incidents, which can often result in incidents being re-categorised. In this case, the validation work undertaken resulted in 14 SIs as opposed to the 24 originally reported as SIs.

## Agenda item 2

In response to a question from Ms Bilal-Thompson in relation to Health Care Associated Infections (HCAIs), the DQE advised that the data was collected from the Public Health England (PHE) systems. There is also internal validation.

Professor Home referred to the compliance rate for statutory and mandatory training and questioned how this was being addressed. The DQE confirmed this was being addressed and had been escalated to the Executive Team. The Human Resources and Information Technology Teams were working together to ensure that ESR system could be accessed more simply. Whilst recognising the Trust was underperforming against the target Mr Joy added that the target of 95% was an aspirational figure and noted that some organisations within the region had lowered their aspirational target.

**It was resolved:** to **receive** the report.

**ii) Performance Report**

The EDBDE presented the report which provided assurance on the Trust's elective recovery programme as well as performance against NHSE priorities for 2022/23 and key operational indicators.

It was noted that the Trust performance data had originally been included within a section in the Integrated Board Report however due to the significant focus on performance recovery, a more detailed separate report had been produced. This separate report would continue to be produced until performance had recovered to expected levels.

The following key points were noted:

- The new report consists of three parts being:
  - NHS England (NHSE) Plan Requirements;
  - Operational Standards; and
  - Other metrics which are shared with key stakeholders e.g. commissioners.
- The NHSE operational planning guidance for 2022/23 was target focused, with Newcastle Hospitals submitting trajectories including reducing the number of >104 week-waits (WW) to 30 by the end of March 2023, the return of cancer patients waiting >62 days to February 2020 levels and promising substantial progress on the transformation of outpatients throughout 2022/23.
- Provisional data suggested Newcastle Hospitals delivered day case activity equivalent to 93% of April 2019 volumes, with overnight elective activity slightly lower at 85%. Outpatient activity as a whole was delivered at 101% of the levels recorded in April 2019. It was noted this did not achieve the 104% weighted activity requirement and therefore the Trust had not met the target for release of Elective Recovery Fund (ERF) income for April.
- No ambulance handovers greater than 60 minutes have been recorded for two months.
- Whilst the Trust was compliant with the <2% 12-hour Emergency Department (ED) waits requirement in April, the Trust did not achieve the 95% A&E 4-hour standard in March, with performance of 82.5%.

## Agenda item 2

- The 28-day Faster Diagnosis Standard (FDS) for cancer care has been comfortably exceeded in the past two months, but seven of nine cancer standards fell short of target in March 2022.
- At the end of April, the Trust still had 84 patients waiting >104 weeks, but this represented a 28% reduction from the previous month. Referral to Treatment (RTT) compliance was at 69.4%.

**It was resolved:** to **receive** the report.

*[Dr Brown joined the meeting]*

**22/10 DISCUSSION TOPIC****i) Making Mental Health Everyone's Business**

The Chairman introduced Dr Sarah Brown who had been appointed as an Honorary Associate Medical Director. Dr Brown was a consultant liaison psychiatrist for Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust and leads the psychiatric liaison team in Newcastle. She became one of the first Psychiatric Associate Medical Directors in an acute trust. It was noted that the unique appointment underlined the Trust's commitment to providing high standards of care to people who have mental health needs.

Dr Brown delivered an informative presentation, with the following points noted:

- Key publications were referenced including the Treat as One National Confidential Enquiry into Patient Outcome and Death (NCEPOD) report and the Care Quality Commission (CQC) Assessment of Mental Health Services in Acute Trusts (AMSAT) report. Dr Brown confirmed that the report recommendations had been reviewed both in CNTW and within Newcastle Hospitals, with a number of actions undertaken.
- The CQC report detailed a number of recommendations including oversight at Board level of the provision of the mental health component of care for patients.
- Evidence suggested that as a consequence of the COVID-19 pandemic a higher number of staff were absent from work with mental health issues as well as creating increased demands on services.
- A major driver of this work has recognised that people with mental health problems die approximately 20 years prematurely compared to those that do not which can also be compounded with other health inequalities.
- Recent work included:
  - The creation of a steering group.
  - Patient/carer involvement planned from the outset
  - Scoping of other organisations' strategies.
  - Raising organisational awareness, including amongst the Executive Team, Trust Board, corporate and clinical management groups, directorate leads and governors.
- Next steps will involve:
  - Consultation across the Trust, raising awareness as well as the development of a web page and materials to support the launch of the strategy.

## Agenda item 2

- A strategy coproduced with staff, patients and carers to ensure that the mental health and wellbeing needs of all groups are considered and supported.
- Whilst developing a strategy will not necessarily make an instant change on how services are delivered it will enable better alignment, greater collaboration e.g. through Collaborative Newcastle work programmes, and increase understanding.
- There were many challenges to consider, particularly the stigma associated with mental health needs.

The Chairman thanked Dr Brown for the presentation.

Being mindful of the current financial climate and increasing deprivation levels, Mrs Heslop questioned if there had been an increased demand for mental health services. Dr Brown confirmed that this was the case, with A&E seeing more footfall and generating higher numbers of mental health referrals. She highlighted the importance with being creative as to how services are delivered.

Following a question from Mr Evans in relation to her role, Dr Brown advised that she liaises with addiction services to support patients that presented with mental health and addiction problems, specific addiction services were commissioned for those with drug or alcohol dependencies.

Mr Gibson invited Dr Brown to present at the Advising on the Patient Experience (APEX) Group on mental health first aid which was welcomed by Dr Brown.

Being mindful of the resource challenges, Mr Hughes sought clarity on the timeline for implementing the strategy and questioned what metrics would be used to gauge the effectiveness. Dr Brown advised that she expected the strategy to be launched in the summer of 2024; earlier if possible, with the web page established at a similar time recognising that work was still taking place. Patient outcomes and their experiences would be used to measure the effectiveness.

Professor Home suggested that mental health in older people was becoming an increasing problem, however this had not been referred to by Dr Brown. Dr Brown advised that there was a psychiatrist working within her team that focussed solely on supporting older people with mental health needs.

*[Dr Brown left the meeting.]*

## 22/11 **GOVERNOR REPORTS**

### i) **Lead Governor Update**

Mrs Carrick presented the paper on behalf of Mrs Yanez, Lead Governor and highlighted the following key points:

- As a member of the Nominations Committee, Mrs Yanez was involved in the recruitment process for a new Non-Executive Director.

## Agenda item 2

- A Task and Finish Group had been established to review and further strengthen the working relationships between the Non-Executive Directors and Governors. The Group met in April and considered how the two groups can work together for the benefit of the Trust and its patients.
- Following the promotion of the role of the Governor in Dame Jackie's Blog, there has been some communication through the Governor email inbox and Mrs Yanez was due to meet with Dame Jackie Daniel, Chief Executive at the end of June on the Councils behalf.

**It was resolved:** to **receive** the report.

**ii) Quality of Patient Experience (QPE) Working Group (WG)**

Ms Singh, newly appointed Chair of QPE Working Group presented the report and highlighted the following key points:

- Mr Graeme Chapman, Non-Executive Director and Chair of the Trust Quality Committee Trust attended the January meeting and was very supportive of the work of the WG.
- In January Mr Ian Joy, Deputy Chief Nurse, gave a presentation on International Nursing. In March Dr Henrietta Dawson, Guardian of Safe Working gave a presentation in relation to her role as Guardian of Safe Working and working with the Junior Doctors. In April, Professor Annette Hand, Clinical Academic Professor of Nursing attended to give an update on her role. Presentations were well received with an opportunity for the members to ask questions.
- Group members have been engaging with various Trust groups such as the Complaints Panel, Clinical Audit and Guidelines Group (CAGG) and Patient Safety Group. All members bring updates to the monthly meetings.
- The Corporate office has contacted governors seeking expressions of interest to join the working group.
- Governor ward/department visits will be re-commenced following the pause undertaken during the pandemic. All visits will be coordinated through the PA to Executive Chief Nurse. Members were looking forward to the visits.

**It was resolved:** to **receive** the report.

**iii) Business and Development (B&D) WG**

Dr Valentine presented the report and highlighted key points:

- Mr Stuart Smith, Assistant Director of Finance, attended to present a report on the Trusts external audit contract extension and associated fees. A 2-year contract extension was agreed at a previous Council meeting. The process for appointing the next external auditor had begun. It was noted that previously the Council of Governors had delegated the oversight of the process to the Business and Development WG and formally requested this be noted.
- Ms Lisa Jordan, Assistant Director of Business Strategy and Planning, presented an update on the final version of the Trust activity plan.

## Agenda item 2

- Ms Balsam Ahmad, Consultant in Public Health, attended to update the Working Group on Public Health matters. It was noted that in the North East Region, circa 3 in 10 people (31%) live in the most deprived areas.
- Dr Valentine attended the recent Collaborative Newcastle event.
- The Group had developed an effectiveness review which will be continually developed.
- Dr Valentine looked forward to seeing new members at future meetings.

**It was resolved:** to **receive** the report.

The Chairman encouraged new Governors to rotate attendance through all of the groups in the first year before deciding to join any one of the groups.

**iv) People, Engagement and Membership (PEM) WG**

Mrs Carrick, Chair of the PEM Working Group presented the report and highlighted the following key points:

- The PEM group had their first meeting with representatives from the Trust's Younger Persons Advisory Group and would continue to work with them encouraging membership and increasing diversity.
- A meeting had been scheduled with the Chaplaincy Team for the first week in July to discuss engagement with the wider communities.
- The Group had been visited by a media expert from North East Social Media following which a subgroup had been created in order to develop an engagement strategy for Trust Governors.
- Consideration had been given how to encourage two-way communication with new members to improve engagement.
- The PEM had been working with the QPE to channel information from the ward visits to inform the ongoing engagement strategy.
- The Seasonal Governor update will be included in Dame Jackie's next Blog.

Mrs Carrick requested that all Governors be equipped with membership leaflets for distribution amongst their other networks.

Attention was drawn to the QPE report where the recommendations had not been discussed. As such, the Council of Governors were asked to receive the report and ratify the appointment of Poonan Singh as Chair of QPE and Alexandros Dearges-Chantler as Vice Chair.

**It was resolved:** to **receive** the report and **ratify** the appointment of Poonan Singh as Chair of QPE and Alexandros Dearges-Chantler as Vice Chair.

**22/12 ITEMS TO APPROVE**

**i) Nominations Committee Report**



## Agenda item 2

The Chairman presented the report which outlined a summary of the Nominations Committee business since the previous Council meeting held in February 2022. The following key points were highlighted:

- The appointment of Ms Liz Bromley from 1 June 2022 for her first 3-year term of office as a Trust NED and the reappointment of Ms J Baker from 1 July 2022 for her second 3-year term as a Trust NED.

Mrs Carrick suggested that for future reappointments of NEDS, a more formal process whereby Governors be appraised of the work and level of engagement undertaken by the NEDs prior to consideration of re-appointment and agreed to discuss at the next Nominations Committee meeting [**ACTION01**].

- A private paper had been presented to the Council of Governors to consider the Chair remuneration.
- Expressions of interest were sought from Staff Governors to fill the vacancy in the Staff Governor membership of the Nominations Committee.

**It was resolved:** to **receive** the report.

## 22/13 ITEMS TO RECEIVE AND ANY OTHER BUSINESS

### i) Updates from Committee Chairs

Mr Chapman provided some insights around the reports that are received at the Committees. Mr Chapman was encouraged by the challenge of the Governors during the meeting noting the importance of constructive challenge being undertaken by NEDs within Committee meetings.

Mr Chapman explained that he was Chair of the Quality Committee as well as a member of the Charity, Audit and Finance Committees. Mr Chapman referred to the previous questions regarding quality matters and advised that he felt assured from the work of the work undertaken by the Trust Clinical Governance and Risk Department.

Mr Chapman advised that additional 'deep dive' sessions had been scheduled noting that the first session would focus on Maternity. He noted that the next area for consideration on the Governors horizon would be the National Patient Safety Strategy.

In terms of Finance, Mr Chapman highlighted that the Trust should be commended on its financial performance for 2021/22 finishing the year with a small surplus. It was noted however that it would be particularly challenging moving forward. Mr Chapman commended the EDBDE and her team for the positive commercial contributions to the Trust finances which will be reinvested into patient care.

Mr Chapman referred to a recent news article noting that 'data saves lives' in terms of research however it must be noted that patients' data must be used safely and be regularly audited.

Two standout pieces of information were highlighted from the People Committee meeting which included the Sustainable Healthcare in Newcastle (SHINE) Annual Report and presentation and the Staff Survey work.

Mr Chapman advised that the Trust Charity had the lowest cost base in the country. The Charity provided funding for a number of projects however it was noted that the Charity did not fund core service provision.

Mr Chapman referred to the recent work in relation to the updating of the Board Assurance Framework and advised that he felt comfortable with the risk profile which was shared at Board and the Committees for scrutiny and assurance.

**It was resolved:** to **receive** the report.

**ii) Elections Update**

The ACE presented the report which provided an update on the outcome of the recent Council of Governors elections which concluded in May 2022.

The ACE noted previous conversations in the Private Council meeting in relation to some members not receiving voting packs. It had been identified that 16 members across the Newcastle and Northumberland, Tyne and Wear (excluding Newcastle) constituencies did not receive their voting information prior to the voting deadline. This was due to a previously unknown problem with the report used to extract the list of members eligible for voting.

Two of the sixteen had contacted UK Engage prior to the deadline and were able to cast a vote, and this alerted the Trust to the issue.

The Corporate Governance Team had investigated the matter thoroughly and confirmed that this would not have impacted the election results as a significant proportion of the 14 individuals had registered with ineligible email accounts.

The ACE encouraged new Governors to attend the Governor induction.

The Ace then referred to section 2.4 of the report where it was noted that Mrs Glenda Bestford, Staff Governor for Nursing and Midwifery and Mr John McDonald, Public Governor for Northumberland, Tyne & Wear (excluding Newcastle) were elected in February 2020 due to a higher number of vacancies in Governor seats at that time. As such their terms of office were due to conclude on 31 January 2023. The Council is asked to approve a short extension to the terms of office for both individuals to align with the usual election cycle in May. This would mean that the terms would end on 31 May 2023 and would allow the seats to be included in the May 2023 elections.

**It was resolved:** to **receive** the report and **approve** the proposal outlined in 2.4 as noted above.

**iii) Items approved at the Private Workshop on 21 April 2022:**



- **Governor Workshop Groups Terms of Reference**

The Chairman presented the report which included the updated Terms of Reference for the People, Engagement and Membership, Quality of Patient Experience and Business and Development Working Groups. It was noted that the Terms of Reference had been approved at the Private Workshop on 21 April 2022.

**It was resolved:** to **receive** the report and formally endorse **approval** of the Governor Workshop Groups Terms of Reference.

- **Membership Strategy**

The Chairman presented the report which included the renewed Membership Strategy for 2022 – 2024. The People, Engagement and Membership Working Group had considered and provided feedback on the Strategy. It was noted that the Membership Strategy was approved at the Private Workshop on 21 April 2022.

**It was resolved:** to **receive** the report and formally endorse **approval** of the Membership Strategy.

- iv) **Any other business**

Mrs Yanez informed that Council that Mr John Bedlington, who had been a Governor for many years, had been recognised in Queens' Birthday Honours list for 2022 together with his wife Joan who were both awarded an MBE. The Chairman agreed to write a letter congratulating them both on their achievement [**ACTION02**].

Mr Hughes advised that Governors had been asked for comments by 4 July on a number of consultation documents in relation to governance. The ACE provided some clarity in relation to the consultation documents and the requirements of the Governors as part of the newly formed Integrated Care System structure. She added that NHS Providers which was a network that supported Trusts had a network of Governors who would also be gathering information nationally. She suggested that the Trust Secretary provide a summary of the key points from the consultations and the resulting responses submitted [**ACTION03**].

The ACE added that Natalie Yeowart, Head of Corporate Risk & Assurance Manager was also a member of the group who was writing these new requirements.

- v) **Date and Time of Next Meeting**

The next meeting was scheduled for Thursday 18 August 2022 13:30-16:00 to be held in the Freeman Boardroom and via Teams. *[Meeting start time subsequently amended to 14.15]*

**There being no further business, the meeting closed at 16:20.**

### GOVERNORS' ATTENDANCE – 16 JUNE 2022 PUBLIC

	Name	
S	Mrs Glenda Bestford	Apologies
1	Mr David Black	Apologies
2	Mr Graham Blacker	Yes
S	Miss Genna Bulley	Yes
1	Mrs Judy Carrick	Yes
1	Ms Jill Davison	Apologies
1	Dr Alexandros Dearges Chantler	Apologies
A	Professor Justin Durham	Apologies
2	Mrs Madeleine Elliott	Yes
2	Mr David Evans	Yes
1	Mrs Aileen Fitzgerald	Apologies
1	Mr David Forrester	Yes
S	Mr Gary Gibson	Yes
S	Dr John Hanley	Apologies
2	Mrs Catherine Heslop	Yes
2	Professor Philip Home	Yes
3	Mr David Hughes	Yes
A	Professor Tom Lawson	Yes
2	Mr John McDonald	Apologies
2	Professor Pauline Pearson	Apologies
S	Mrs Kate Pine	Apologies
S	Miss Elizabeth Rowen	Yes
S	Mrs Poonam Singh	Yes
3	Mr Thomas Smith	No
A	Cllr Ian Tokell	Yes
2	Mrs Norah Turnbull	Apologies
1	Dr Eric Valentine	Yes
1	Ms Emma Vinton	Apologies
2	Mr Bob Waddell	Apologies
3	Mr Michael Warner	Apologies
2	Mrs Claire Watson	Apologies
2	Dr Ian Wilson	Yes
1	Mrs Pam Yanez	Yes

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Council of Governors Meeting Actions - Public

Agenda item: 3

Log Number	Action No	Minute Ref	Meeting date where action arose	ACTIONS	Responsibility	Notes	Status
102	ACTION04	20/06 ITEMS TO RECEIVE AND ANY OTHER BUSINESS ii) Matters arising from the Informal Governors Meeting	20-Feb-20	It was recommended that a presentation be given to the full Council from Newcastle Healthwatch following the recent presentation to the Business and Development Working Group. The Deputy Trust Secretary agreed to facilitate <b>[ACTION04]</b> .	F Darville / L Thompson	16/04/20 - Contact details requested. 09/10/20 - Response awaited. 01/12/20 - Representative contacted to arrange presentation for 2021. 07/04/21 - Presentation provisionally scheduled for April has been deferred following Governor requests to include updates on COVID-19 specific topics during the April Council meeting. Presentation deferred to October. ACTION ON HOLD. 14/10/21 - Due to continuing focus on COVID-19 and activity recovery, presentation postponed to 2022. 09/06/22 - LB emailed Rachel Wilkins from Healthwatch to arrange a time. 16/06/22 - Email received from Phill Capewell, Interim CEO for Healthwatch to advise that they do not have capacity at the moment to present updates outside of their current commitments but confirmed that any updates of interest to Governors will be forwarded on for circulation accordingly.	Green
103	ACTION01	22/02 BUSINESS ITEMS v) Chief Executive's Report	17-Feb-22	A Tour for the Governors of the Day Treatment Centre to be arranged once to building is complete <b>[ACTION01]</b> .	L Thompson	09/06/22 - The building is on track for completion/opening in August 2022 therefore the tour will be scheduled for August 2022. LB emailed to arrange slots for Governors to visit. 08/08/22 - Julie Marsh will contact LT to organise before the DTC opens.	Amber
104	ACTION01	22/12 ITEMS TO APPROVE i) Nominations Committee Report	16-Jun-22	Mrs Carrick suggested that for future reappointments of NEDS, a more formal process whereby Governors be appraised of the work and level of engagement undertaken by the NEDs prior to consideration of re-appointment and agreed to discuss at the next Nominations Committee meeting	J Carrick/ K Jupp	12/08/2022: This was discussed at the Nominations Committee on 29 July 2022.	Green
105	ACTION02	22/13 ITEMS TO RECEIVE iv) Any Other Business	16-Jun-22	The Chairman agreed to write a letter congratulating Mr John Bedlington, and his wife on their achievements who were both awarded an MBE	J Burn		Amber
106	ACTION03	22/13 ITEMS TO RECEIVE iv) Any Other Business	16-Jun-22	Governors had been asked for comments by 4 July on a number of consultation documents in relation to governance and the requirements of Governors as part of the newly formed ICB. It was suggested that the Trust Secretary provide a summary of the key points from the consultations and the resulting responses submitted	K Jupp	12/08/2022: On the agenda for CoG October Workshop.	Green

Key:

Red =	No update/Not
Amber =	In progress
Green =	Completed
Grey =	On Hold

Future presentations/discussion topics
Patient Experience - February 2022
Emergency Care System - April 2022
Ockenden Update - TBC
Command Centre - TBC
Healthwatch Newcastle - TBC
Estates Developments - TBC



### COUNCIL OF GOVERNORS

Date of meeting	18 August 2022						
Title	Chairman’s Report						
Report of	Professor Sir John Burn, Chairman						
Prepared by	Gillian Elsander, PA to Sir John Burn						
Status of Report	Public	Private	Internal				
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Purpose of Report	For Decision	For Assurance	For Information				
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
Summary	<p>The content of this report outlines a summary of the Chairman’s activity and key areas of focus since the previous Council of Governors meeting, including:</p> <ul style="list-style-type: none"> <li>• Governor Activity including: <ul style="list-style-type: none"> <li>○ Members Event 9<sup>th</sup> August 2022</li> <li>○ Governor Elections;</li> <li>○ Council of Governors;</li> <li>○ Attending a Quality of Patient Experience Working Group meeting; and</li> </ul> </li> <li>• Extraordinary Board and Board Development Session.</li> <li>• Completion of my Annual Appraisal</li> <li>• Spotlight on Services – Hub and spoke model utilised for the Children and Families Newcastle Programme.</li> <li>• Regional engagement with Foundation Trust Chairs of the North Integrated Care Partnership (ICP), Local Authority and Voluntary Sector representatives.</li> <li>• Sir Bobby Robson Foundation/Northern Centre for Cancer Care (NCCC) cheque presentation.</li> </ul>						
Recommendation	The Council of Governors is asked to note the contents of the report.						
Links to Strategic Objectives	<p>Patients – Putting patients at the heart of everything we do. Providing care of the highest standard focusing on safety and quality.</p> <p>Pioneers – Ensuring that we are at the forefront of health innovation and research.</p>						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Impact detail	Provides an update on key matters.						
Reports previously considered by	Previous reports presented at each meeting.						

## CHAIRMAN'S REPORT

### EXECUTIVE SUMMARY

The content of this report outlines a summary of the Chairman's activity and key areas of focus since the previous Council of Governors meeting, including:

- Governor Activity including:
  - Members Event 9<sup>th</sup> August 2022
  - Governor Elections;
  - Council of Governors;
  - Attending a Quality of Patient Experience Working Group meeting; and
- Extraordinary Board and Board Development Session.
- Completion of my Annual Appraisal
- Spotlight on Services – Hub and spoke model utilised for the Children and Families Newcastle Programme.
- Regional engagement with Foundation Trust Chairs of the North Integrated Care Partnership (ICP), Local Authority and Voluntary Sector representatives.
- Sir Bobby Robson Foundation/Northern Centre for Cancer Care (NCCC) cheque presentation.

The Council of Governors is asked to note the contents of the report.

## CHAIRMAN'S REPORT

On 9 August 2022, I chaired an in person members' event, the first since the relaxing of pandemic measures, supported by the Trust Secretary and our Governor and Membership Engagement Officer, and accompanied by Pam Yanez, our Lead Governor. Pam highlighted the challenges that the Trust has faced during and since the COVID-19 pandemic in relation to waiting lists, waiting times and staffing.

We enjoyed two excellent presentations:

- The Climate Emergency is a Health Emergency: Shine Update Presentation by Anna-Lisa Mills, Programme Manager – Sustainability

Anna-Lisa explained why a climate emergency is a health emergency and the importance of taking action now. She also talked through the Trusts progress against each of the priority action areas included within the Trust Sustainable Healthcare in Newcastle (SHINE) Strategy, detailing areas of good progress and challenges remaining.

- Reabling, Recycling, Researching Presentation by Odeth Richardson, Head of Service - Occupational Therapy

Odeth highlighted the journey of cleaning specific equipment in order to recycle equipment where possible, how the team worked with others to research an alternative and the resultant reduction in the Trusts carbon footprint.

Looking back at the time since our last meeting, our latest round of Governor Elections closed on Monday 30 May 2022; we held our new Governor induction on Friday 10 June 2022 which covered the roles and responsibilities of being a Governor, Governor activities, the expectations as well as the support and tools in place to assist Governors in fulfilling their role.

I am also pleased to welcome two new Appointed Governors - Ian Tokell, Newcastle City Council, and Professor Justin Durham, Newcastle University.

At our Council of Governors meeting in June we were joined by Executive colleagues who provided a comprehensive update on the Trust's current performance and delivery. We were also joined by Dr Sarah Brown, Consultant Liaison Psychiatrist, Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust (CNTW) and Honorary Associate Medical Director for Mental Health, Newcastle Hospitals, who delivered an excellent presentation on the journey so far in developing a Mental Health Strategy for the Trust.

I attended the Quality of Patient Experience Working Group, the date of which coincided with the Big Tea Event in celebration of NHS 74<sup>th</sup> Birthday. It would have been rude not to indulge in some Tea and Cake!

In terms of Board activity, I chaired an Extraordinary Board meeting on 21 June which was held to formally approve the Trust's Annual Report and Accounts and I would like to take

## Agenda Item 4

this opportunity to thank everyone involved in the preparation of these two items as the work and effort involved should not be underestimated.

I also chaired a Board Development Session in June. The aims were:

- To discuss the latest developments in system work and the impact for Newcastle Hospitals.
- To discuss the impact of the National Patient Safety Strategy.
- To receive a position update on key Directorate Developments and progress on the well-led external review.
- To consider and agree the Trust capital development priorities and how we will prioritise actions/solutions to securing funding.

My annual appraisal was undertaken by Mr Jonathan Jowett, the Trust Senior Independent Director (SID) in early June and I have also completed the annual appraisal process for the Non-Executive Directors.

We have enjoyed a “Spotlight on Services” which was a virtual session that focussed on the Hub and spoke model utilised for the Children and Families Newcastle Programme. We were joined by Jane Melvin, Directorate Manager for the Great North Children’s Hospital and Community Services and Alison Priestly from Newcastle City Council. We enjoyed a short presentation which detailed the hub and spoke model which is based around family hubs and family partner roles.

We discussed the progress to date, the several funding sources and next steps, especially the development of a Multi-Disciplinary Team to support the work of Family Partners. This was followed by an interesting discussion about several issues including the role of the Voluntary and Community Sector (VCS) and potential to increase this and the need for robust evaluation.

At a regional level, I continue to engage with both Foundation Trust Chairs and Chairs of the Integrated Care Partnership (ICP) and participated in a meeting on 6 June which was also attended by Sam Allen, the new Chief Executive of the North East and North Cumbria Integrated Care System (NENC ICS). Discussion centred on the development of the Integrated Care Board (ICB) as well as sharing initiatives from respective Trusts to ease the impacts of the current cost of living crisis.

I was delighted to be invited to join the Bubble Foundation in celebrating their 30<sup>th</sup> year where I attended a celebration with patients, parents and staff both former and present.

I was overjoyed to receive a cheque at the Newcastle United Football Club (NUFC) match at St James Park on behalf of Newcastle Hospitals Charity from Lee Perkins, who faced a shock kidney cancer diagnosis last year which resulted in the removal of his right kidney. Lee and his friend Neil, decided to fundraise for the Sir Bobby Robson Foundation and NCCC to thank the Newcastle Hospitals team who saved his life. I would like to personally thank Lee and Neil for their amazing contribution and for making it profitable to stand on the hallowed turf, much to the excitement of friends and relatives in the crowd.



**RECOMMENDATION**

The Council of Governors is asked to note the contents of the report.

**Report of Professor Sir John Burn  
Chairman  
11 August 2022**

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## COUNCIL OF GOVERNORS

Date of meeting	18 August 2022						
Title	Chief Executive's report						
Report of	Dame Jackie Daniel, Chief Executive Officer (CEO)						
Prepared by	Caroline Docking, Assistant Chief Executive Lewis Atkinson, Principal Advisor Alison Greener, Executive PA to the CEO						
Status of Report	Public	Private	Internal				
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Purpose of Report	For Decision	For Assurance	For Information				
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
Summary	<p>This report sets out the key points and activities from the Chief Executive. They include:</p> <ul style="list-style-type: none"> <li>Working with partners in a changed NHS structure with the introduction of Integrated Care Boards (ICBs);</li> <li>Renewing our high-performance culture and work as an anchor institution; and</li> <li>Headlines from other key areas, including the Chief Executive Officer's networking activities, our awards and achievements.</li> </ul>						
Recommendation	The Council of Governors are asked to note the contents of this report.						
Links to Strategic Objectives	This report is relevant to all strategic objectives and the direction of the Trust as a whole.						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Impact detail	This is a high-level report from the Chief Executive Officer covering a range of topics and activities.						
Reports previously considered by	Regular standing agenda item. This report was presented to the Trust Board on 28 July 2022.						

## CHIEF EXECUTIVE'S REPORT

### EXECUTIVE SUMMARY

The content of this report outlines a summary of Chief Executive activity and key areas of focus since the previous Council meeting, including:

- The formation of the North East and North Cumbria Integrated Care Board (ICB);
- Challenges facing the NHS during the heatwave and summer;
- Renewing our high performance culture;
- Work on Greener NHS and child poverty;
- Networking and communication activity; and
- Recognition and awards for staff.

The Council of Governors are asked to note the contents of this report.

## CHIEF EXECUTIVE'S REPORT

### 1. OVERVIEW

#### **Working together on big challenges**

The pressures that the whole NHS is facing this summer, with high levels of emergency demand exacerbated by waves of both heat and COVID, have brought into stark focus the challenge facing the new Integrated Care Boards (ICBs) which formally came into being on 1 July.

At this time of transition in organisational roles, I have found it useful to focus on the strategic aims of ICBs:

1. Improve outcomes in population health and healthcare;
2. Tackle inequalities in outcomes, experience and access;
3. Enhance productivity and value for money; and
4. Help the NHS support broader social and economic development.

The huge and complex nature of meeting these aims requires a different way of working than we have had in the past, especially across the North East and North Cumbria ICB which is the biggest in the country serving more than 3 million people. I believe we should use this opportunity to genuinely co-create an improved health and care system, and to unleash the passion and skills of our staff and communities to improve health outcomes in each place. With the NHS's budget under pressure from meeting rising demand and inflation, in my view we cannot afford to have focus and resources spent on centralising decision-making and performance-management arrangements.

I know that Sam Allen, the ICB CEO, is committed to working in a new way. As she and team continue to shape the ICB's leadership and governance, they will find allies here in Newcastle Hospitals. I continue to work every week to build and renew partnerships with ICB colleagues and others across the health and care system. I would particularly like to welcome the appointment of Joe Corrigan, appointed as the ICB's Director of Place for Newcastle. In the coming months we will be developing the arrangements to allow the ICB to delegate key parts of its decision-making down to Collaborative Newcastle, the core partnership we have between health and care organisations in the city. Joe's previous experience of working with us in the Newcastle Gateshead Clinical Commissioning Group (CCG) will be helpful in designing and implementing these delegation arrangements, and I know he will play a key role in the Collaborative Newcastle Joint Director team.

The only sustainable route to delivering better quality across the health and care system from existing resources is to further improve collaboration. That is why I was delighted this month to welcome more than 60 health and care leaders from across Collaborative Newcastle's organisations to the latest intake of the 'Learning to Lead together' joint development programme, which aims to develop collaborative leadership across organisational boundaries. Reflecting together with them and other CEOs about the challenges of system leadership renewed my optimism that, despite all challenges, we can continue to improve – together.

**Renewing our high-performance culture**

In June, NHS leaders from across the country gathered in Liverpool for the NHS Confederation Expo Conference – the first such event since 2019. In her excellent speech, NHS Chief Executive Amanda Pritchard focused on four 'r's that she wants us to have in mind as we work: recovery, reform, resilience and respect. With the Executive Team, I have been working on what these mean for us and how we can renew the high-performance culture that Newcastle Hospitals is renowned for, to ensure how we work is fit to meet the challenges of a post-pandemic world.

I continue to be proud of the resilience of our services and staff. Despite record urgent and emergency care demands, not to mention record temperatures, as an organisation we have continued to ensure that patients from arriving ambulances are received without undue delay. This means that patients get the hospital care they need, but also that ambulance crews can return to the road to respond to further emergency calls in a timely manner – an issue that has troubled significant parts of the NHS elsewhere in the country. There is a national focus on improving speed of discharge from hospital in order to create capacity for new patients to be received, and a refreshed national urgent and emergency care strategy is expected in the autumn.

We know that our services are only as resilient as our staff, and we continue to do whatever we can to support them with and the extraordinarily work they do in often difficult situations. Since the last Board meeting, our new staff bistro in the Leazes Wing at the Royal Victoria Infirmary (RVI) has opened seven days a week for staff with a range of hot foods, sandwiches, salads and cakes – ensuring there is 24/7 access to food. Thanks to the team who led that improvement, and also to the Newcastle Hospitals Charity who were fast to respond to the hottest day of the year, providing cooling ice-cream respite to staff. Providing a safe space for staff to share and talk about the personal impact of work is also an important part of supporting resilience, and this month I was honoured to join one of our programme of Schwartz Rounds to support this.

Our focus on recovery of elective waiting times also continues. I am pleased to report that we have now eliminated waits of above two years for all but a small number of specialist spinal patients, in line with national expectations. We are now focused on reducing elective waits of over 78 weeks, and on reducing the number of patients waiting more than 62 days on cancer pathways. Continued reform and improvement of services will be key to returning performance to where it was before the pandemic, so I was pleased to focus on our Newcastle Improvement learning and sharing events which showcased some of the excellent work going on.

Renewing our high-performance culture will also require us to renew our leadership and to ensure our management structures are fit for the future. It is the natural time to do this as we are expecting turnover in the Executive Team because of the retirements, in November, of Dee Fawcett (Director of Human Resources) and Angela Dragone (Finance Director), who leaves at the end of this month. As this is her last board meeting, I want to pay particular tribute to Angela for the work she has done over decades to ensure the financial strength of our organisation. Jackie Bilcliff will start with the Trust in September as Chief Finance Officer, and we are currently recruiting for the post of Chief People Officer with interviews scheduled to take place in late August. As the Executive Team changes, we will be taking

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time to develop as a team together and to plan and communicate our roadmap to a high-performance future. This will complement Board-wide work currently underway as part of our 'well-led' review, which will help assure and further improve the robustness of our governance.

**Working as an anchor institution to tackle climate change and improve life chances**

The unprecedented heatwave we have just experienced is another reminder of the climate emergency and its significant impact on health and health services.

It has now been three years since Newcastle Hospitals become the first healthcare organisation in the world to declare a climate emergency. Over the last month I have had several opportunities to reflect on the progress the trust has made and talk about the current key constraint on us making significant further cuts to our emissions – the availability of capital to spend on decarbonising our estate. At the NHS Confederation Expo Conference in June, I spoke from the main stage about these constraints and our plans to reduce emissions that could be realised with capital - including building the New Specialist Hospital ('Richardson') wing at the RVI which would not just safeguard and improve our services, but also serve as the NHS exemplar of operating a net-zero facility.

The Conference also saw James Dixon, our Associate Director for Sustainability, speaking at the launch of the new clean air toolkit for Integrated Care Systems (ICSs) that we have helped develop along with partners Global Action Plan and Boehringer Ingelheim. We are leading work to tackle the challenge of air pollution across the North East and North Cumbria as we know that dirty air is estimated to kill between 28,000 and 36,000 people a year in the UK.

An equally shocking statistic featured in the news this month that the North East has the highest estimated rate of children living in poverty in the country, and Newcastle the highest proportion of any local authority in the region – with 42% of children here living in relative poverty after housing costs are taken into account. Staff often tell me about how conscious they are of the difficulties faced by families and children they work with who struggle financially, an issue that has been exacerbated by the impact of the cost-of-living crisis. There is a clear link between poverty and poor health outcomes, so we have a professional as well as a moral responsibility to act. This involves reducing the effects of being in poverty through the way we provide services, and also working to reduce poverty directly through our economic and employment impact.

Working with partners as part of Collaborative Newcastle, we have already created 'Children & Families Newcastle', bringing together health and support services in community hubs. This month we joined our partners from across the city at the launch of 'EVERY Child Newcastle', which has an ambition to empower young people and make Newcastle a place where every child and young person can achieve a successful future. As part of this we will be offering high quality paid traineeships to young people which will help young people, especially those from areas of the city with high levels of inequality, build high-quality careers. This latest initiative builds upon our strong record of apprenticeship and work experience, which includes ten years of commitment to Project Choice – a supported internship programme for young adults aged 16-24 with learning difficulties and/or disabilities, and/ or Autism. This month I was delighted to present certificates to the latest

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intake at their graduation ceremony and to hear from the young people about how their hard work through the project has helped them become more confident and learn new work skills. Over 70% of our Project Choice graduates have gone on to achieve employment within the Trust and are contributing to caring for our patients – a fantastic example of how we can work as an anchor institution to have a positive social impact. In the coming months we will be looking for further opportunities to develop our anchor mission and I look forward to reporting progress to the Board.

## 2. NETWORKING ACTIVITIES

In the last two months, I have continued a busy programme of meeting colleagues within and outside the organisation to maximise our collective understanding, reach and influence.

### Visits

We have recently welcomed a number of national figures to the Trust and have had the opportunity to show them some of our services and discuss how we are addressing some key challenges. Visitors have included:

- Ian Trenholm, Chief Executive of the Care Quality Commission (CQC);
- Sir Chris Wormald, KCB Permanent Secretary at the Department of Health and Social Care and Dr Thomas Waite, Deputy Chief Medical Officer;
- Professor Sir Chris Whitty, Chief Medical Officer;
- Andrea Sutcliffe CBE, Chief Executive and Registrar, the Nursing and Midwifery Council.

I have also continued my programme of visits to a variety of areas across the Trust. Visiting critical care (ward 37) at the Freeman Hospital, I heard about the fundamentals of care that the team there are focused on. My visit coincided with the team finally working together again for the first time since the pandemic – a reminder of how all our staff have been required to work very differently in the last two years. They were a perfect example of how they supported each other, they could rely on each other and had a shared sense of focus to provide the best care that they could for their patients. The patients I spoke to felt that they were in safe, caring and expert hands.

I have also visited the Freeman Day Treatment Centre which is currently under construction and due to open in late Summer. I had the opportunity to go and see how the construction is progressing. It is a great example of how we are thinking differently about the future - it will create a state-of-the-art surgical hub to provide the best care and experience for our patients, as well as a fresh and inspiring work environment.

### Research and Innovation

It continues to be a priority to promote and develop our research and innovation work.

In June, I spoke at the second anniversary celebration of our Academic Health Science Centre, Newcastle Health Innovation Partners (NHIP). As well as reflecting on the work done so far, I was delighted that we announced the appointment of Hannah Powell as NHIP's new Chief Operating Officer. Hannah has been working as our Directorate Manager for Clinical



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Research and has been instrumental in delivering our research strategy. I know she will be equally effective in her new role, and I look forward to working closely with her as we look to further develop NHIP's impact.

We continue to work closely with our University partners through NHIP and other collaborative projects, and it was an honour earlier this month to attend the joyful inauguration of the new Chancellor of Newcastle University, Imtiaz Dhaker.

Last month's Shelford Group CEO meeting focused on life sciences, and we were pleased to be joined by Roz Champion, Director of the Office for Life Sciences, Lord David Prior and Sir Jonathan Symonds, Non-Executive Chair of GlaxoSmithKline plc. Our Executive Director of Business, Development and Enterprise, Victoria McFarlane-Reid presented a case study on the work of Diagnostics North East during the pandemic and the opportunity to play a leading role in the development of the diagnostic approaches needed to tackle future health challenges.

I am pleased to also report on work to lift the national ambitions around health research being undertaken by the Office for the Strategic Coordination of Health Research (OSCHR). I attended its steering group meeting which the new Chairman, Lord Ajay Kakkar, is effectively developing as an independent forum to link strategic partners together and to inform government policy and spending priorities.

### **Policy influencing**

In a time of political uncertainty and change, I have participated in a number of formal and informal meetings with a range of health policy makers to help ensure Newcastle Hospitals' experience informs national decision-making. These events have included:

- A discussion on 'performance management in an age of integration' at the NHS Confederation Conference;
- A presentation to the Health Devolution Commission, chaired by Andy Burnham, on the role of Shelford Group organisations as anchor institutions;
- Roundtable events with NHS Providers and NHS England to inform work on refreshing the NHS Long Term Plan;
- The NHS Assembly, including discussion of the long-term workforce plan; and
- A joint event on reducing health inequalities with North of Tyne Combined Authority and Legal & General with Sir Michael Marmot.

I continue to maintain relationships across the national health and care policy-making community. When a new Prime Minister is in place in September, I expect there will be significant further activity to ensure our priorities and perspectives are heard.

### **3. RECOGNITION AND ACHIEVEMENTS**

Our staff continue to provide the very best services for our patients, with many innovations and examples of excellence recognised at regional and national level.

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**Jubilee Honours** – Two of our staff were included in the Queen’s Platinum Jubilee Honour’s List, becoming Members of the British Empire (MBEs) in recognition of the huge contributions they have made beyond their already demanding day jobs. Congratulations to community midwife Diane Buggy and honorary consultant medical oncologist Ruth Plummer.

**Lifetime Achievement Award** – Huge congratulations to our recently retired hotel services manager, Jackie Thompson, who won an NHS Parliamentary Award for Lifetime Achievement and contribution. Jackie has been a real asset to Newcastle Hospitals and dedicated over 47 years to us – a truly remarkable achievement.

**Celebrating Excellence Awards** – At the end of May, nominations opened for our Celebrating Excellence Awards which were put on hold for the last couple of years due to the pandemic. The standard of entries has been extremely high, and our judging panel now has the difficult task of going through more than 350 of them in 14 categories! The awards will be held at Newcastle’s Civic Centre on 30 September, and we are grateful to our sponsors who are supporting this event.

**Nursing Times Awards** – I’m delighted to share we have a number of finalists shortlisted in the following categories in the 2022 Nursing Times Awards. The winners will be announced on 26 October.

- Clinical research nursing – using patient and public involvement to improve the clinical pathway for cancer patients in clinical trials during the pandemic.
- Continence promotion and care – RUG: reducing urinary gram-negative blood stream infections.
- Theatre and surgical nursing – student theatre workshop project.

**Digital champion** – Consultant anaesthetist Dr Adnaan Querishi was also a finalist in this year’s National BAME Health and Care Awards, which celebrate the unsung heroes of the NHS and specialist BAME services. He was recognised in the ‘Digital Champion’ category for his work on creating Newcastle PROMs – a custom online platform to collect, analyse and report patient-reported outcomes following surgery.

**NHS Blood and Transplant (NHSBT)** – Newcastle University is receiving almost £2million from NHSBT for a cutting-edge research unit focused on organ donation to help improve the outcomes for patients waiting for and receiving transplants. Collaboration between the University and the Trust will be a key part of delivering the unit’s aims to increase the number of organs available, improve long-term outcomes and enhance quality of life after transplant.

**Sarcoma research** – Clinicians and researchers at the North of England Bone and Soft Tissue Tumour Service, which is part of the trust, secured £1.4million from the National Institute for Health and Care Research (NIHR), to trial a method that uses a harmless green dye to illuminate tumours under a special infrared camera. Consultant orthopaedic surgeon Mr Kenny Rankin is leading this research which, ultimately, could reduce the impact of sarcoma surgery on patients.

## Agenda item 5

**Community event** – Our community teams recently joined together at a special event promoting staff wellbeing, inclusion and engagement. It was organised after staff highlighted, they wanted to feel more connected in their staff survey, with other teams in their directorate and their *'What Matters to You'* work and the event provided plenty of opportunities to share information, proud achievements and quality improvements.

**Recognising our healthcare support workers** – In June, we celebrated our healthcare support workers with a very special event to say thank you for all that they do and show how much they are valued. Staff were asked to nominate their colleagues for an award with five categories to choose from and you can find out more about the winners <https://www.newcastle-hospitals.nhs.uk/news/celebrating-our-healthcare-support-workers/>.

**Patient milestone** – North East and Cumbria's lifesaving 'Blood last on Board' service - a collaboration between the trust, Great North Air Ambulance and volunteers from Blood Bikes Cumbria and Northumbria Blood Bike – held a special reception at the RVI to celebrate treating 500 patients. The event was held for patients who have received blood and their loved ones.

**Three decades and counting** – Congratulations to the Bubble Foundation who marked their 30th anniversary of becoming a registered charity and thank you for your tireless support to our specialist 'bubble unit' on ward 3 at The Great North Children's Hospital.

#### 4. **RECOMMENDATION**

The Council of Governors are asked to note the contents of this report.

**Report of Dame Jackie Daniel**

**Chief Executive**

19 July 2022

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The Newcastle upon Tyne Hospitals  
NHS Foundation Trust

### COUNCIL OF GOVERNORS

Date of meeting	18 August 2022						
Title	Integrated Board Report						
Report of	Martin Wilson – Chief Operating Officer, Angela O’Brien- Director of Quality and Effectiveness.						
Prepared by	Louise Hall- Deputy Director of Quality and Safety, Peta Le Roux- Business Analysis.						
Status of Report	Public	Private	Internal				
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Purpose of Report	For Decision	For Assurance	For Information				
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>				
Summary	This paper is to provide assurance to the Council of Governors on the Trust’s performance against key indicators relating to Quality, People and Finance.						
Recommendation	For assurance.						
Links to Strategic Objectives	Putting patients at the heart of everything we do. Providing care of the highest standard focusing on safety and quality. Supported by flourish, our cornerstone programme, we will ensure that each member of staff is able to liberate their potential. Performance – Being outstanding now and in the future.						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impact detail	Details compliance against national access standards which are written into the NHS standard contract. Details compliance against key quality targets.						
Reports previously considered by	Regular standing agenda item. This report was presented to the Trust Board on 28 July 2022.						

## INTEGRATED BOARD REPORT

### EXECUTIVE SUMMARY

This report provides an integrated overview of the Trust's position across the domains of Quality, People and Finance.

1. The Trust has had **no cases of MRSA bacteraemia in June 2022**.
2. There were **23 Serious Incidents (SIs) reported in June 2022**. This is a reduction from May and now within common cause variation. The Trust reported **one Never Event in June**.
3. There was **one maternal death in May**. It was reported to the Coroner, MBRRACE-UK and Healthcare Safety Investigation Branch (HSIB).
4. The Trust has received a total of 117 (114 with identified patient activity) formal complaints up to June 22, an increase of 38 on last month's opened complaints.
5. There were 2,266 responses to the Friends and Family Test from the Trust in May 2022 (published July 2022) compared to 1,346 in the previous month.
6. Overall sickness absence (including COVID-19 related sickness) is 6.13%, which is down from end of Apr 2022 position of 7.02% (% FTE Time Lost).
7. The Trust submitted a financial Plan to NHSE for 2022/23 in April, for a deficit of £5.5m for the year. However, there has been agreed additional funding made available and a revised plan was submitted in June with plan surplus of £10.7 million.

The Council of Governors are asked to receive the report.

# Integrated Board Report

Quality, People and Finance

July 2022



Healthcare at its best  
with people at our heart

# Executive Summary

## Purpose

This report provides an integrated overview of the Trust's position across the domains of Quality, People and Finance.

## Current Operating Environment

The Trust has experienced an increase in patients in hospital with COVID-19. The proportion of these patients being admitted for treatment of COVID-19 has increased steadily over the last two weeks and currently stands at 40%. The numbers of staff testing positive has been increasing for the last few weeks from the lowest number since summer 2020 to 1.4% of the total workforce. There are still significant pressures being placed on the Trust's bed base due to the increase in emergency admissions and delayed discharges due to pressures in Social Care. We have more beds open now since before the pandemic due to better staffing levels reduced COVID-19 outbreaks and IPC requirements. The overall position of the Trust remains challenged while balancing the focused effort of recovery, increased emergency activity ongoing COVID-19 cases along with the potential increase in Monkey pox cases. This will impact further on medical beds and staffing as we will need to respond as part of the national incident escalation plan as a specialist commissioned Highly Infectious Diseases Unit.

## The Newcastle Plan

- In light of the COVID-19 pandemic and the commitment to address extended waits the Trust has developed The Newcastle Plan, and an overarching Delivery Board chaired by the Chief Executive.

## Report Highlights

1. The Trust has had **no cases of MRSA bacteraemia in June 2022**.
2. There were **23 Serious Incidents (SIs) reported in June 2022**. This is a reduction from May and now within common cause variation. The Trust reported **one Never Event in June**.
3. There was **one maternal death in May**. It was reported to the Coroner, MBRRACE-UK and HSIB.
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# Contents: July 2022

## Quality

- Healthcare Associated Infections
- Harm Free Care – Pressure Damage
- Harm Free Care - Falls
- Incident Reporting
- Serious Incidents & Never Events
- Mortality
- Friends and Family Test and Complaints
- Health and Safety
- Maternity
- Clinical Audit

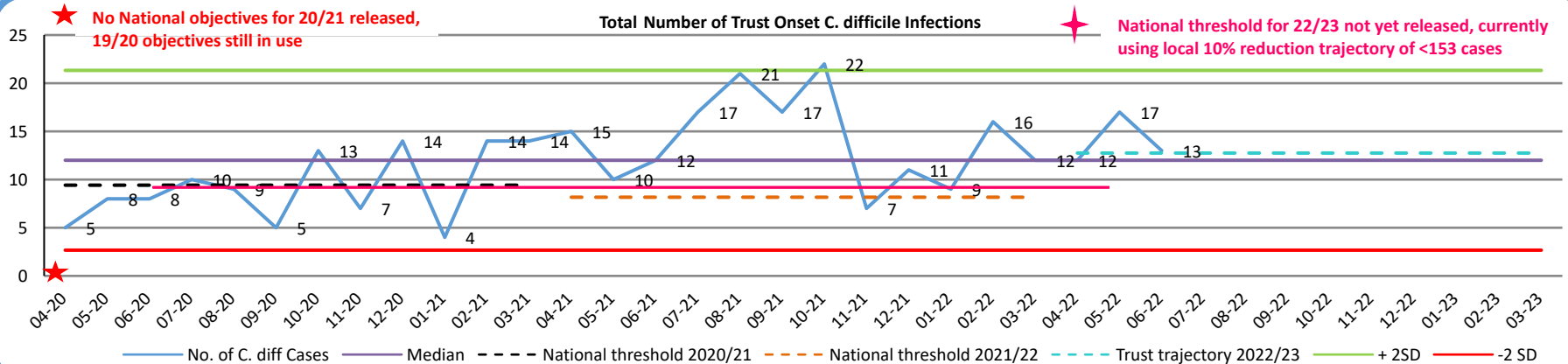
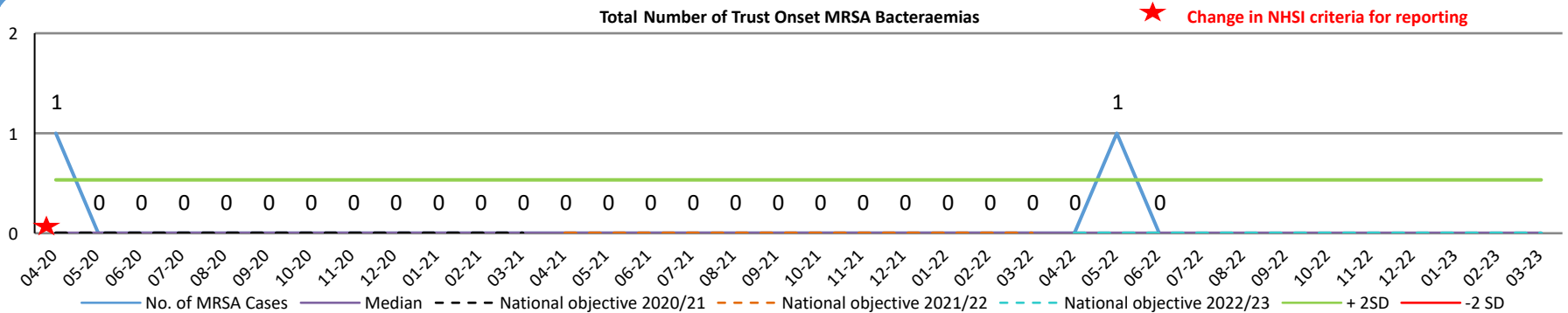
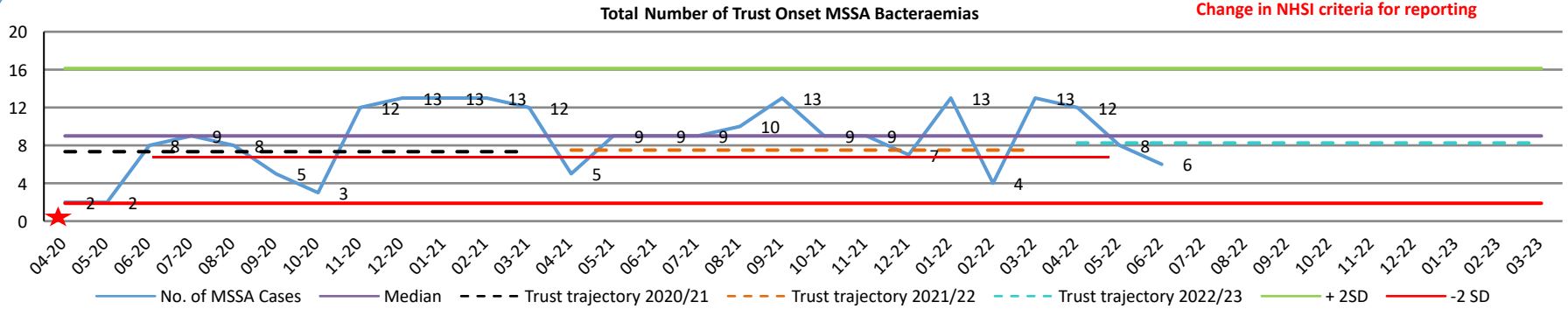
## People

- COVID-19
- Well Workforce
- Sustainable Workforce Planning
- Excellence in Training and Education
- Equality and Diversity

## Finance

- Overall Financial Position

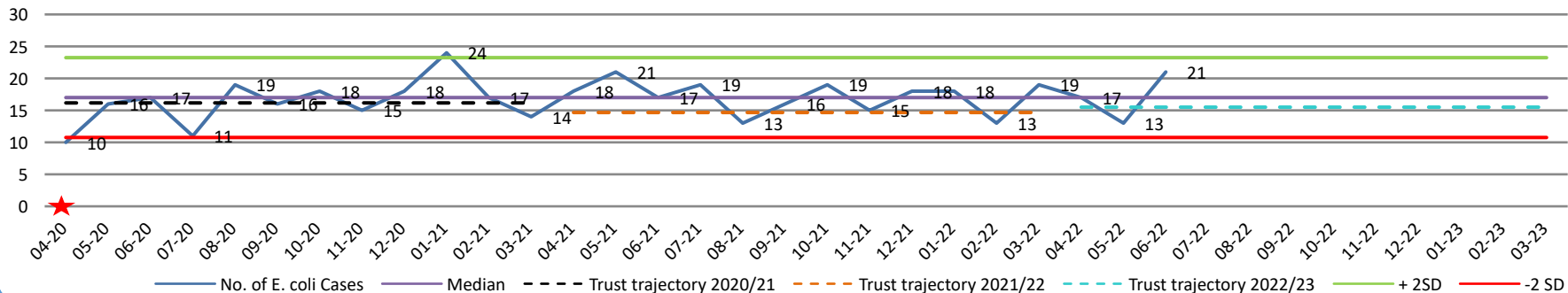
# Quality: Healthcare Associated Infections 1/2



# Quality: Healthcare Associated Infections 2/2

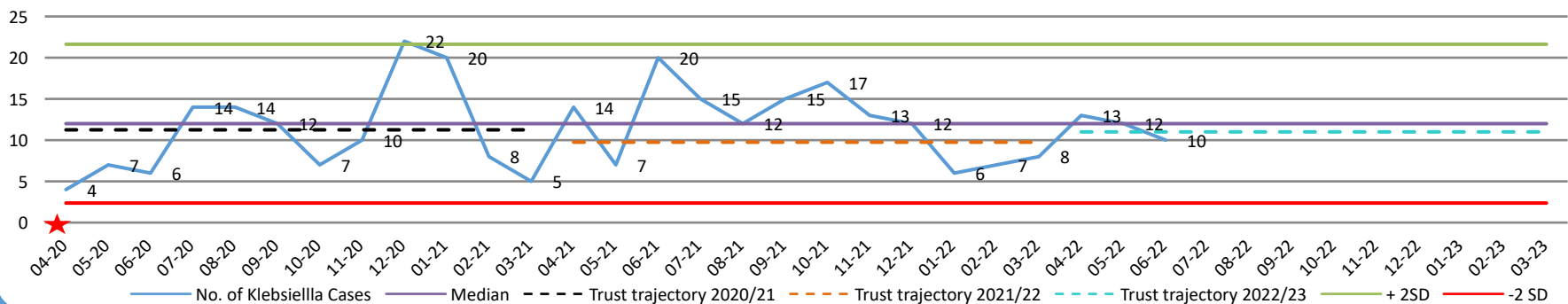
Total Number of Trust Onset E. coli Bacteraemias

★ Change in NHSI criteria for reporting



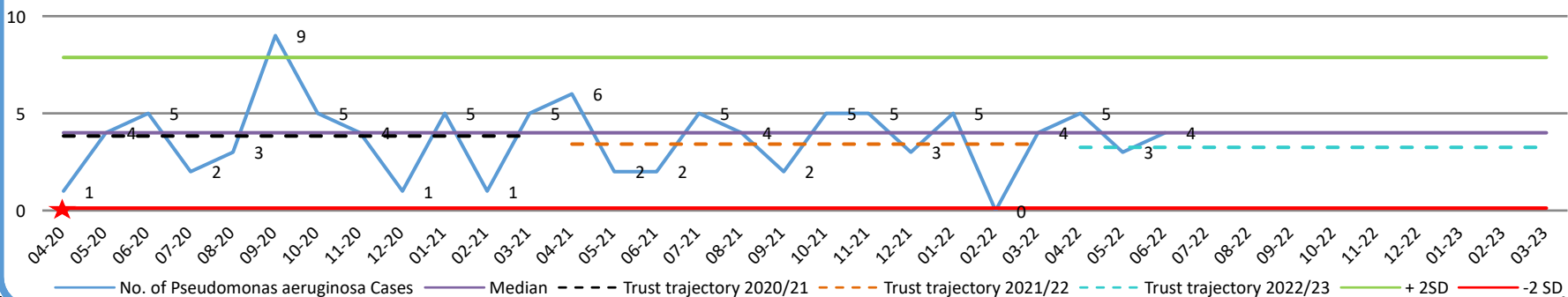
Total Number of Trust Onset Klebsiella Bacteraemias

★ Change in NHSI criteria for reporting



Total Number of Trust Onset Pseudomonas Aeruginosa Bacteraemias

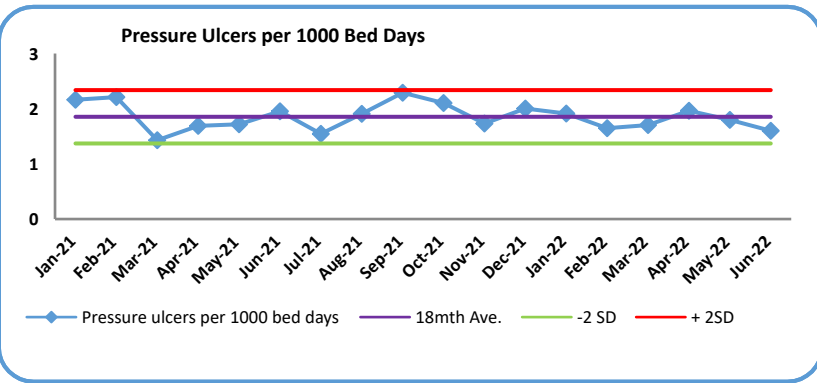
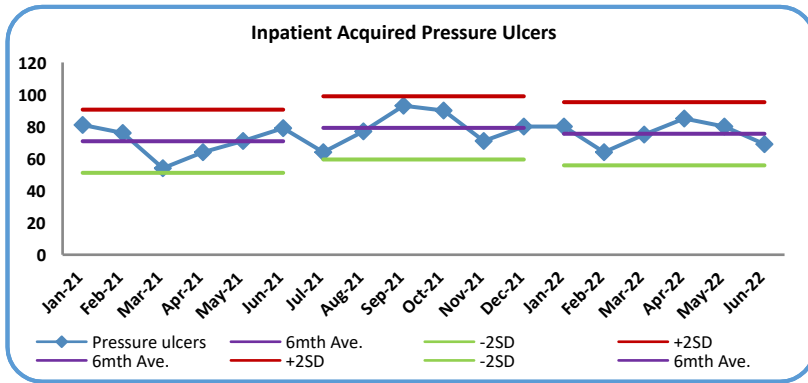
★ Change in NHSI criteria for reporting



# Quality: Harm Free Care – Pressure Damage

The graphs below indicates a slight reduction in overall incidence of pressure ulcers in the last 6 months, however overall rates remained higher than pre-pandemic levels in the month of June there has been a significant decrease.

From August through to October 2021 a steep increase is evident, this directly correlates with surges in COVID-19 activity. This is also apparent in October 2020 through to February 2021, whereby waves two and three occurred. The Trust safe care data illustrates the acuity of patients is significantly higher than pre-pandemic levels. In addition, there has been an increase in patients presenting to the Trust with significant existing damage, or at risk of skin deterioration. This is consistent in both other Trusts in the Shelford group and indeed the National picture.

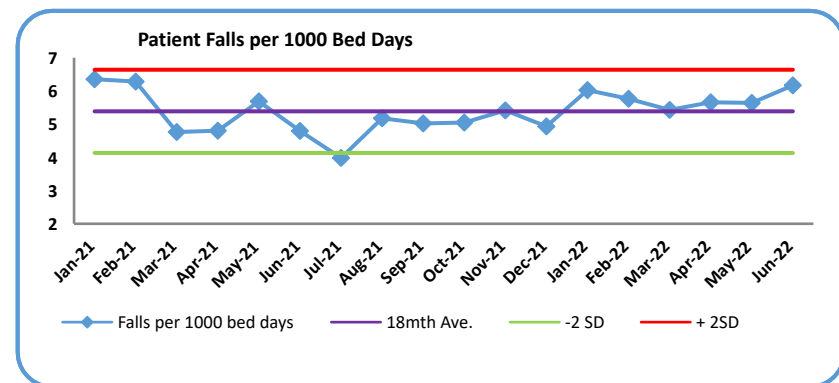
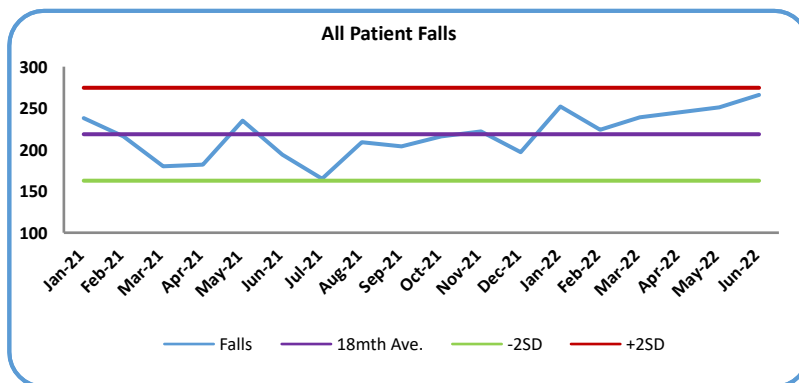


# Quality: Harm Free Care - Falls

There has been a peak in falls this month carrying on the upward trend since February 2022. However overall there has been a reduction in inpatient falls over the past 18 months, with the exception of peaks in December 2020 through to February 2021, then again in May and November 2021. This has however remained consistent with the 18 month average per 1000 bed days, and falls with harm remain low and consistent. This reflects previous years, however also draws a parallel with periods of a surge in COVID-19 activity.

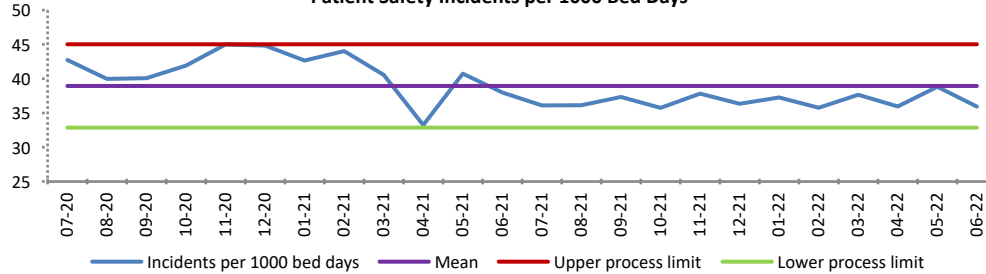
This year the Trust has experienced significant pressures, particularly in relation to bed occupancy levels, which have remained high throughout. Significant increases in the cohort of medical patients, particularly those over 65 are evident and did lead to the requirement to convert many surgical wards to medicine, and have remained so for the last two years. Evidence produced by the National Falls Audit (2021) illustrates rates of deconditioning in our elderly population as a result of periods of lockdowns and COVID-19 infection, has led to significant increases in both levels of patients at risk and incidents of falls. Incidents within the Trust reflect this, whereby a high proportion of falls occur in our patients who are over 65.

The Falls Coordinator has commenced work identifying, on a monthly basis, the wards with the highest incidence of falls, identifying causes and looking at solutions with the aim to reduce numbers. There has been a sustained success in relation to reducing serious harm from falls, as the Trust continues to report less incidents resulting in serious injury.



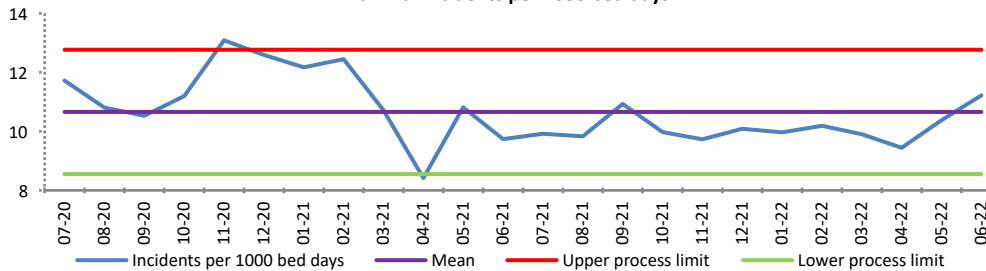
# Quality: Incident Reporting

### Patient Safety Incidents per 1000 Bed Days



**All patient incidents:** There has been a slight decrease in the rate of patient incidents reported between June 2021 – June 2022, demonstrating a continued shift below the mean. This however remains within the expected common cause variation.

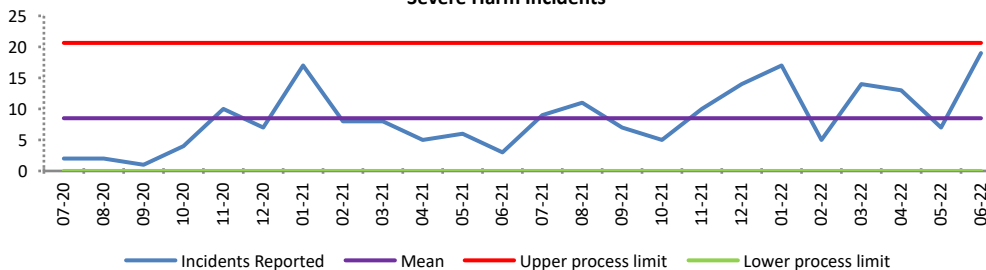
### Harmful Incidents per 1000 bed days



**Harmful incidents:** There has been a slight increase, above the mean, in the number of \*harmful patient safety incidents per 1000 bed days. This remains within the common cause variation expected.

*\*includes all levels of harm from minor to catastrophic. Excludes patient safety incidents that resulted in no patient harm.*

### Severe Harm Incidents

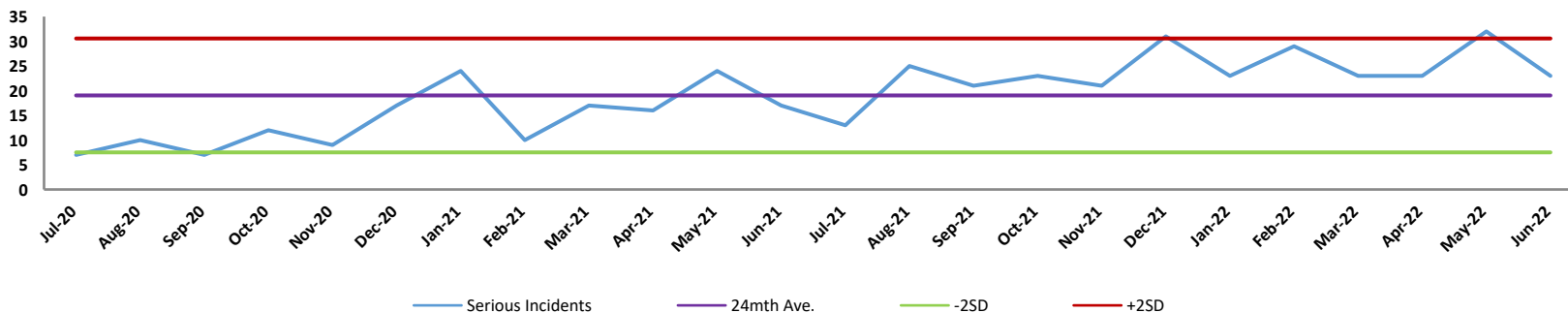


**Severe harm incidents:** There were 19 patient safety incidents reported which resulted in severe harm in June 2022. This is an increase in the number of severe harm incidents, above the mean, which remains within the common cause variation.

Severity grading of reported incidents may be modified following investigation and is therefore subject to change in future reports.

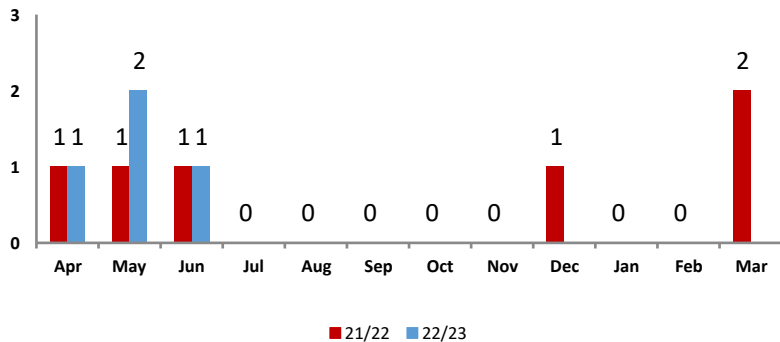
# Quality: Serious Incidents & Never Events

Number of Serious Incidents Reported

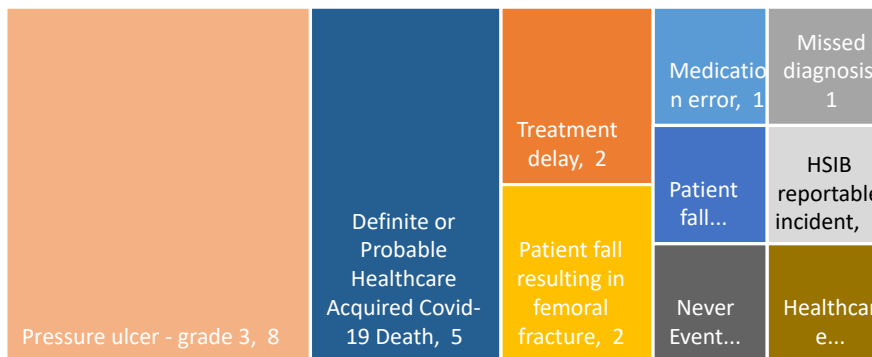


There were 23 Serious Incidents (SIs) reported in June 2022, demonstrating a decrease towards the mean. The increase in the numbers of SIs since July 2021 can be attributed to a return to pre-pandemic bed occupancy alongside higher acuity of patients in the Trust and an increase in COVID-19 prevalence. The statutory requirement Duty of Candour (DoC) applies to patient safety incidents that occur when providing care and treatment that results in moderate, severe harm or death and requires the Trust to be open and transparent with patients and their families. The DoC process has been initiated in all cases reported in June 2022.

Total Number of Never Events Reported



Serious Incidents by Category

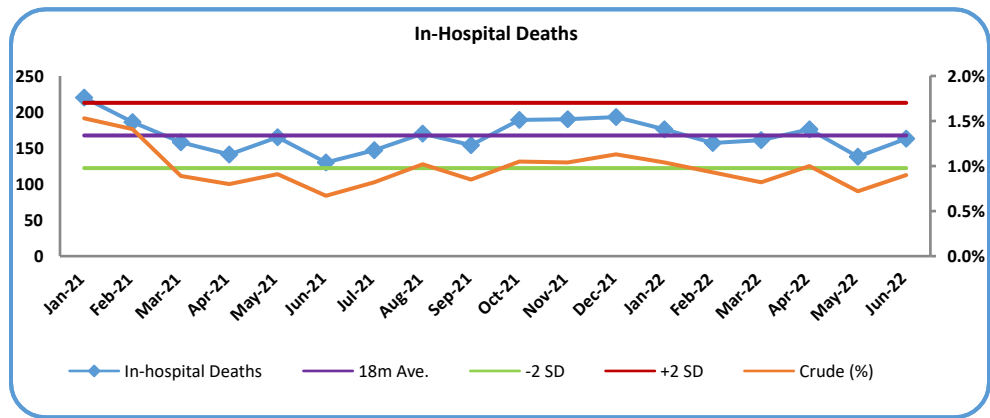


\*The Trust started reporting patients who have died with definite or probable hospital onset COVID-19 as serious incidents from 1st January 2021. This is following new NHSE reporting guidance which aims to standardise reporting by all trusts nationally.

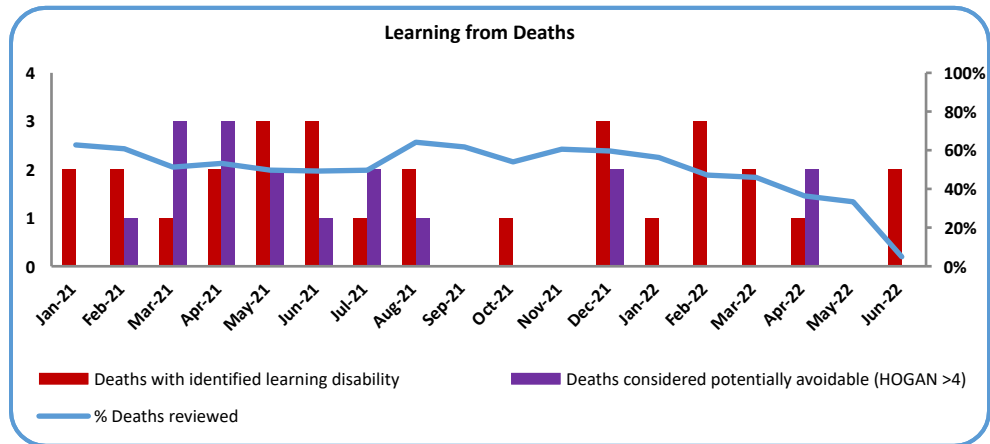
\*\* Since April 2019 all 'Each Baby Counts' reportable cases are now externally investigated by the Healthcare Safety Investigation Branch (HSIB) as part of their national programme.

# Quality: Mortality Indicators 1/2

**In-hospital Deaths:** In total there were 163 deaths reported in June 2022, which is higher than the amount reported 12 months previously (n=130). Crude death rate is 0.90%. Historically, crude death rate has consistently remained under 1% with the exceptions of COVID-19 pandemic peaks.



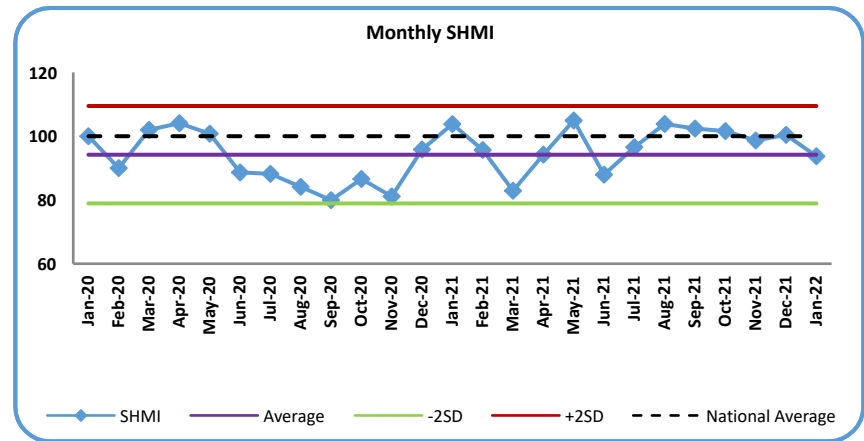
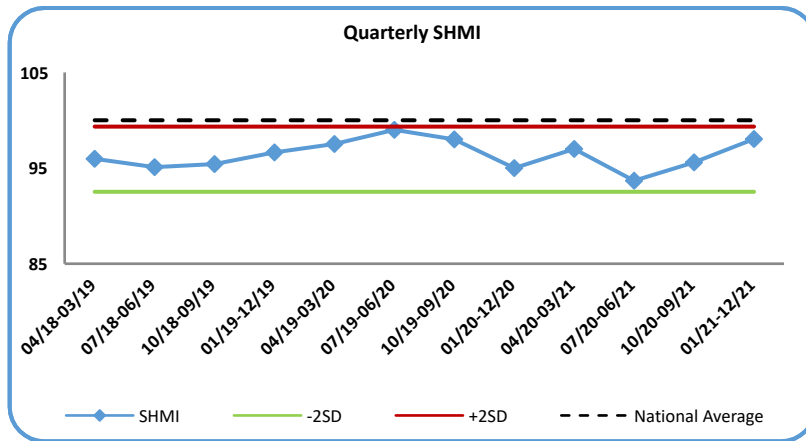
**Learning from Deaths:** Out of the 163 deaths reported in June 2022, Eight patients have received a level 2 mortality review. However, these figures will continue to rise due to ongoing M&M meetings held over the forthcoming months. All figures will continue to be monitored and modified accordingly.



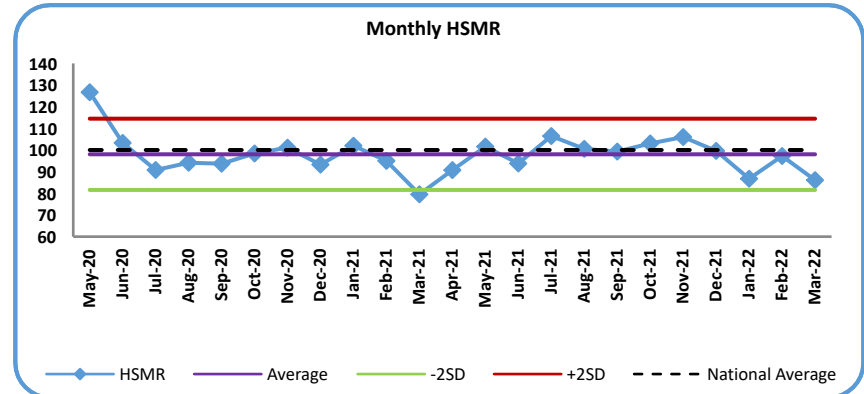
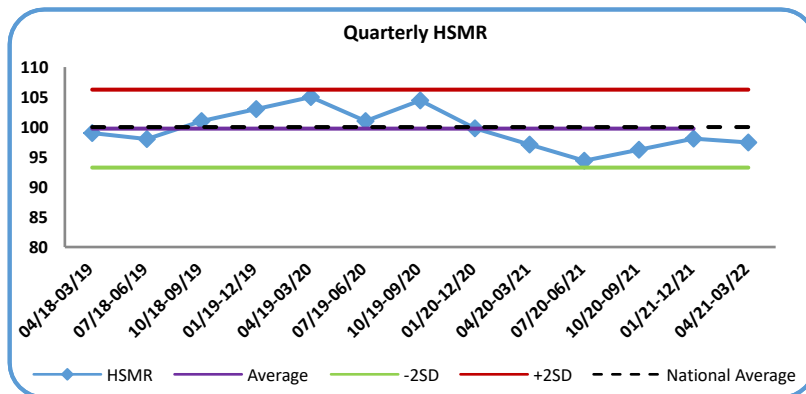


# Quality: Mortality Indicators 2/2

**SHMI:** The most recent published SHMI quarterly data from NHS Digital shows the Trust has scored 98 from months January 2021 – December 2021. This is below the national average and is within the "as expected" category. Monthly SHMI shows the Trust to be within the "as expected" category. COVID-19 data continues to be excluded from SHMI data published from NHS Digital.



**HSMR:** The HSMR data shows a 12 month rolling HSMR score by quarter as well as monthly data. Monthly HSMR data is available up to March 2022, and is showing to be below the national average, however this number may rise or fall as the percentage of discharges coded increases. All figures will continue to be monitored and modified accordingly.



# Quality: FFT and Complaints

## Inpatients and day cases

98% (94%)  
1% (3%)



## Outpatients

96% (93%)  
1% (3%)



## Maternity

90% (94%)  
0% (3%)



## Community Health

100% (94%)  
0% (3%)



## A&E, walk-in centre and minor injury units

74% (75%)

## Friends and Family Test

The published data shows that there were 2,266 responses to the Friends and Family test from the Trust in May 2022 (published July 2022) compared to 1,346 in the previous month.

The following infographic shows the proportion of responses that reflect a positive or negative experience from the feedback provided by our patients. The national average results are shown in brackets.

All data is available at: [www.england.nhs.uk/fft/friends-and-family-test-data/](http://www.england.nhs.uk/fft/friends-and-family-test-data/)

\*numbers too small to publish

## Trust Complaints 2022-23

The Trust has received a total of 117 (114 with identified patient activity) formal complaints up to June 22, an increase of 38 on last month's opened complaints.

The Trust has received an average of 39 new formal complaints per month, which is 7 complaints per month lower than the 46 per month average for the last full financial year 2021-22.

Taking into consideration the number of patients seen and areas with patient contact, the highest percentages of patients complaining to date are within Medicine with 0.07% (7 per 10,000 contacts). The lowest complaint percentages are with Dental who are yet to receive a complaint.

Directorates	2022-23				21-22 Ratio (Full Year)
	Complaints	Activity	Patient % Complaints	Ratio (YTD)	
Cardiothoracic	4	27,259.00	0.015%	1:6815	1:3128
Children's Services	7	19,921.00	0.035%	1:2846	1:3275
Community Services	1	5,880.00	0.017%	1:5880	1:4546
Dental Services	0	27,952.00	0.000%	1:	1:10120
Medicine	10	14,108.00	0.071%	1:1411	1:3053
Medicine (ED)	6	49,778.00	0.012%	1:8296	1:4866
ENT, Plastics, Ophthalmology & Dermatology (€	8	97,971.00	0.008%	1:12246	1:7356
Musculoskeletal Services	2	29,044.00	0.007%	1:14522	1:3505
Cancer Services & Clinical Haematology	10	47,083.00	0.021%	1:4708	1:6347
Neurosciences	12	26,857.00	0.045%	1:2238	1:3067
Patient Services	32	11,187.00	0.286%	1:350	1:1934
Peri-operative & Critical Care	4	9,333.00	0.043%	1:2333	1:3499
Surgical Services	8	20,588.00	0.039%	1:2574	1:1698
Urology & Renal Services	1	17,602.00	0.006%	1:17602	1:3090
Women's Services	9	36,971.00	0.024%	1:4108	1:3341
<b>Trust (with activity)</b>	<b>114</b>	<b>441,534.00</b>	<b>0.026%</b>	<b>1:3873</b>	<b>1:3994</b>

"Communication" is the highest primary subject area of complaints at 24% of all the subjects Trust wide.

# Quality: Health and Safety

## Overview

There are currently 1,201 health and safety incidents recorded on the Datix system from the 1st July 2021 to 30th June 2022. This represents an overall rate per 1,000 staff of 73.3. The Directorate with the highest number of incidents is Peri-operative & Critical Care reporting 166 health and safety incidents over this period. Directorate rates per 1,000 staff for the highest reporting services are Integrated Covid Hub North East (777), Estates (524), NHS Covid Vaccination Programme (202), Supplies (141) and Women's Service (78).

## Incidents of Violence & Aggression to Staff

In addition to the health and safety incidents, there are 986 incidents of physical and verbal aggression against staff by patients, visitors or relatives recorded on the Datix system from the 1st July 2021 to 30th June 2022. This represents an overall rate per 1,000 staff of 60.1 per 1,000 staff during this period. The Trust Violence Reduction Group met for the first time in July 2022. A number of initiatives are already underway, for example 'We Can Talk' in Children's Directorate which is a training package used to upskill staff in effective communication skills with patient suffering from mental health issues. Staff in Reception areas have also received additional training in face to face and telephone conflict resolution.

## Sharps Incidents

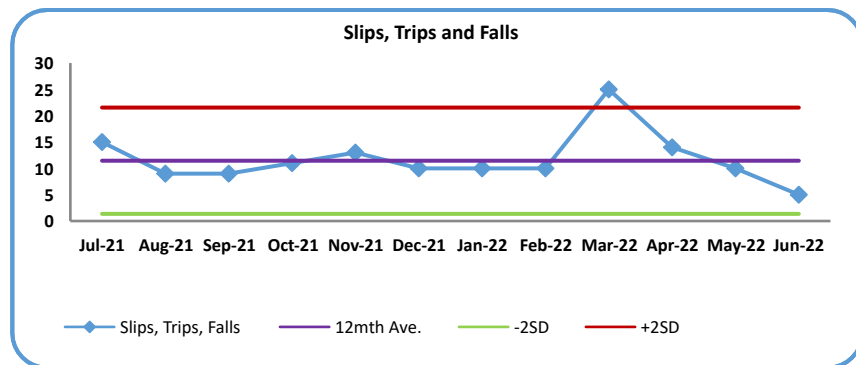
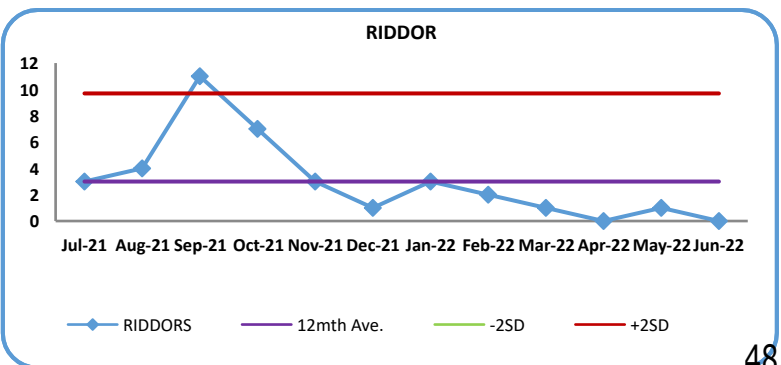
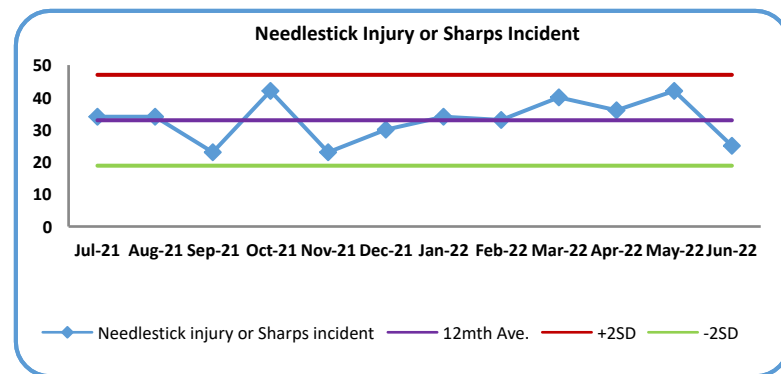
The recent sustained increase lines up with a number of factors, which are currently being discussed at the Trust Safer Sharps User Group. These factors include increased activity / acuity, supply issues meaning staff are using alternative devices and clinical educator vacancies.

## Slips, Trips and Falls

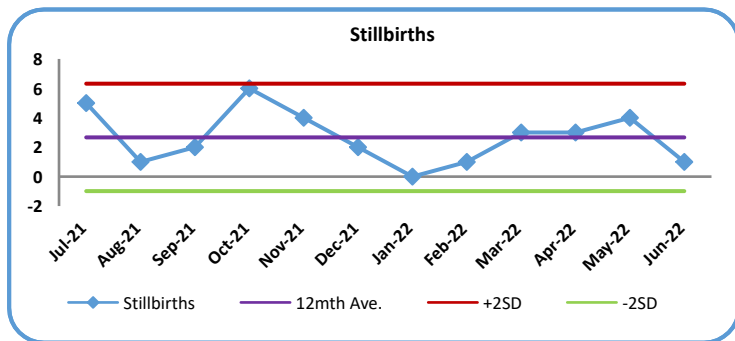
Slips on wet surface, fall on level ground and tripped over an object collectively account for 49% of falls between 1st July 2021 to 30th June 2022. Fall from height; fall up or down stairway and falls from a chair account for 7% of the incidents recorded.

## RIDDOR

There have been 43 RIDDOR incidents reported between 1st July 2021 to 30th June 2022. The most common reasons of reporting accidents and incidents to the HSE within the period are Moving and Handling (12), Accidents (involving staff, visitors etc.) (10), Slips, Trips and fall (11) and Aggression & Violence (7), and These account for 96% of reportable accidents over the period.



# Quality: Maternity (1/3)

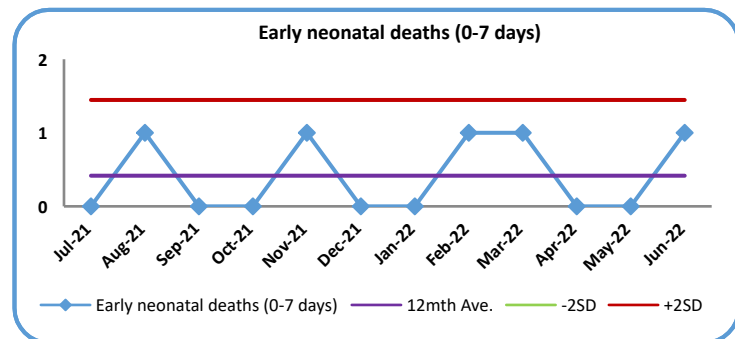


## Perinatal deaths

All Perinatal deaths (Stillbirths and Neonatal Deaths) are reported to MBRRACE-UK who produce an annual National report which includes our local data.

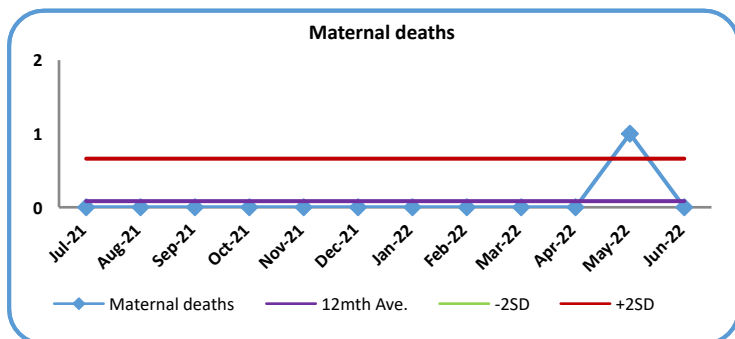
## Stillbirths

As we are a tertiary referral Fetal Medicine Unit often complex cases are referred to us from other units within the region and the women opt to deliver here rather than return to their local unit. All cases undergo an initial local review and then a more detailed review including external input, once we have the investigation results.



## Early Neonatal Deaths

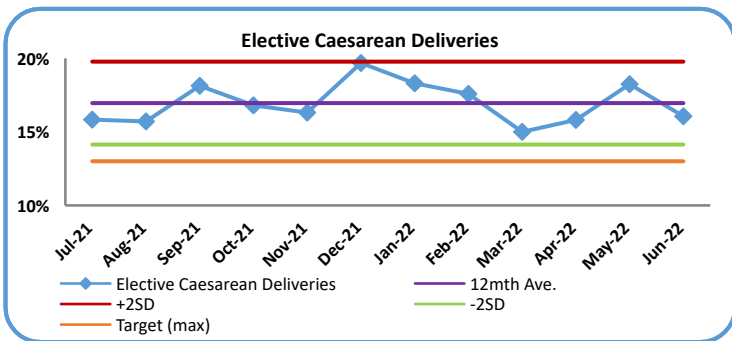
These figures are for term infants (born between 37 and 41 weeks) who delivered at the Trust but sadly died unexpectedly within the first week of life. These deaths are reported to the Child Death Review panel who will have oversight of the investigation and review process. These cases are also usually reported to the Coroner. A post mortem examination may be requested to try and identify the cause of death.



## Maternal Deaths

Maternal deaths are reported to MBRRACE-UK and a national report is provided annually. Maternal deaths can be categorised as Direct or Indirect. It is rare to have a direct Maternal death in Newcastle. Tragically in May, a woman died after suffering complications shortly after delivery. The case has been reported to the Coroner, MBRRACE-UK and HSIB. HSIB have started their investigations. It is anticipated that the report will be available within 6 months. A local review to consider immediate actions was undertaken within 72hrs of the death.

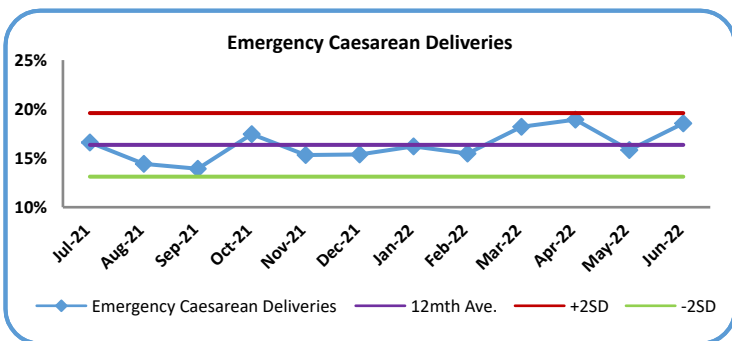
# Quality: Maternity (2/3)



## Elective Caesarean section

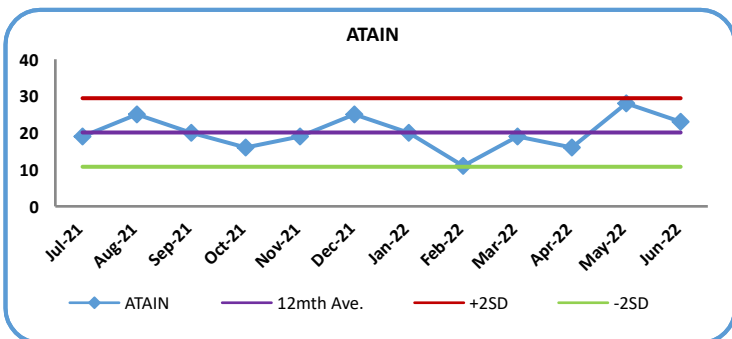
Maternity at the Trust is an outlier for elective Caesarean section compared to other UK Trusts. However, the rates are comparable to rates of other tertiary centres in the UK.

The service also has at its heart a shared decision making philosophy and offers informed, non-directive counselling for women over mode of delivery. There is an obstetrician/midwifery specialised clinic to facilitate this counselling and patient choice.



## Emergency Caesarean section

The emergency Caesarean section rate is comparable to other Trusts. Maternity is a consultant led service with 98-hour dedicated consultant sessions for Delivery Suite (8am-10pm daily), twice daily consultant ward rounds and consultant obstetricians being involved with all decisions for emergency Caesarean section.



## ATAIN

All unplanned admissions of term babies (37 – 41 weeks) into the neonatal unit are reviewed at a weekly multi-disciplinary meeting and a quarterly report is produced and shared. Some of these cases will be reviewed in more detail if they have been identified as a Serious Incident. An annual audit report is presented at the Directorate Audit meeting with lessons learnt/ key themes/ change to practice being shared across obstetrics and neonatology.

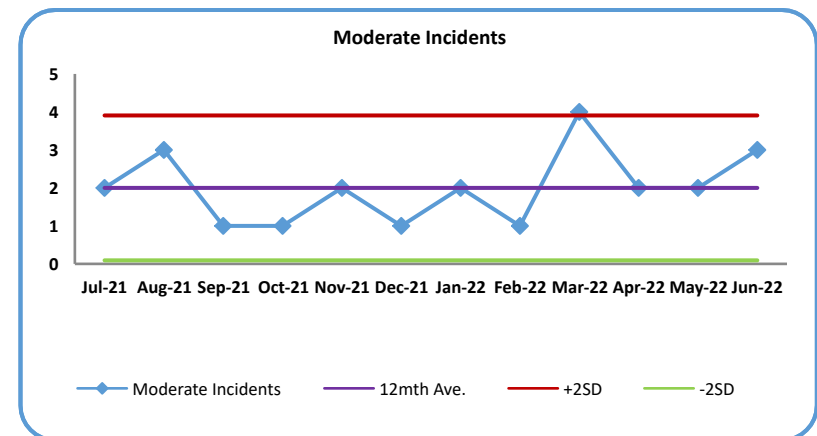
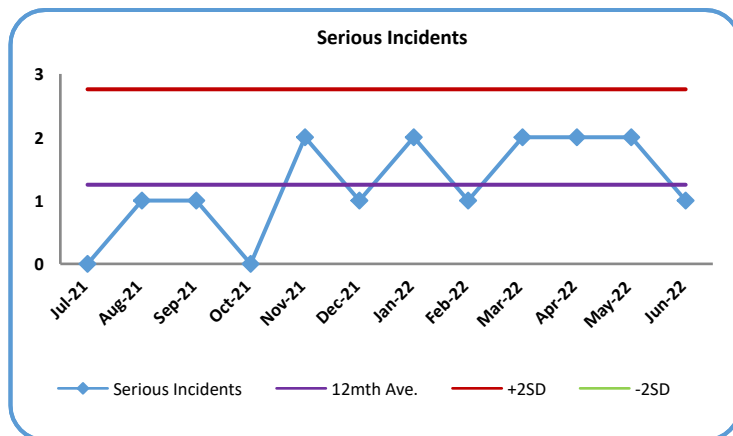
# Quality: Maternity (3/3)

## Serious Incidents

There have been 14 incidents escalated as Serious Incidents to the Trust in the past 12 months. These include 8 cases of potential Hypoxic Ischaemic Encephalopathy (HIE), 2 neonatal deaths, 1 baby fall, 1 bowel injury, 1 intrapartum stillbirths and 1 direct maternal death. The HIE, Intrapartum Stillbirth case and Maternal death were all reported to HSIB (Healthcare Safety Investigation Branch) for external review. A summary of the HSIB cases was presented to the Serious Incident Panel in May.

## Moderate incidents

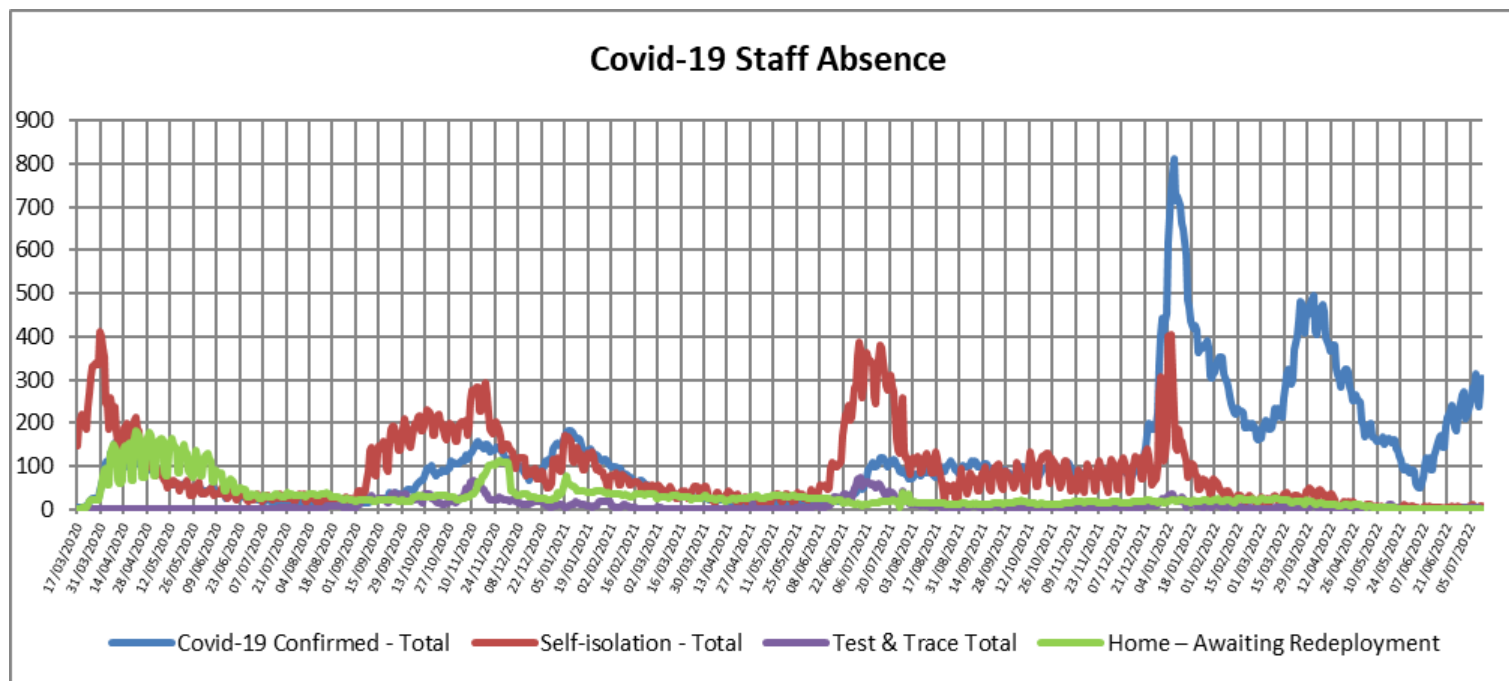
All incidents are carefully reviewed by the Maternity Governance team and are graded appropriately after completion of a rapid review (48hr report). In the past 12 months the majority of the moderate graded incidents were babies that needed to receive 'therapeutic hypothermia' in order to minimise the risk of a brain injury. Although graded moderate these babies may have no long term injury but they require a two year follow up in order to assess their neurological status. Moderate incidents will be investigated as a Serious Learning Event and involve parental input to the investigation and follow up with a Consultant and Senior Midwife 6-8 weeks after the incident.



# People – COVID-19

## Figures quoted are by headcount

- The graph below identifies the number of COVID-19 related absences taken by Trust staff between 17 March 2020 and 30 June 2022. Some staff may have had more than one episode of COVID-19 related absence during this period.



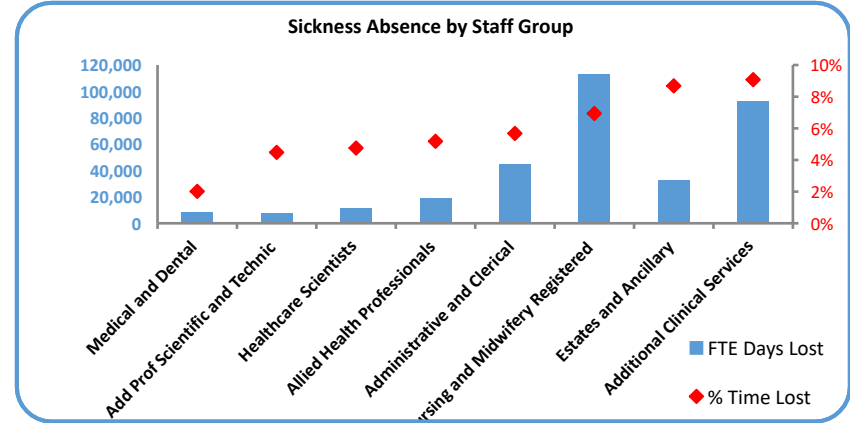
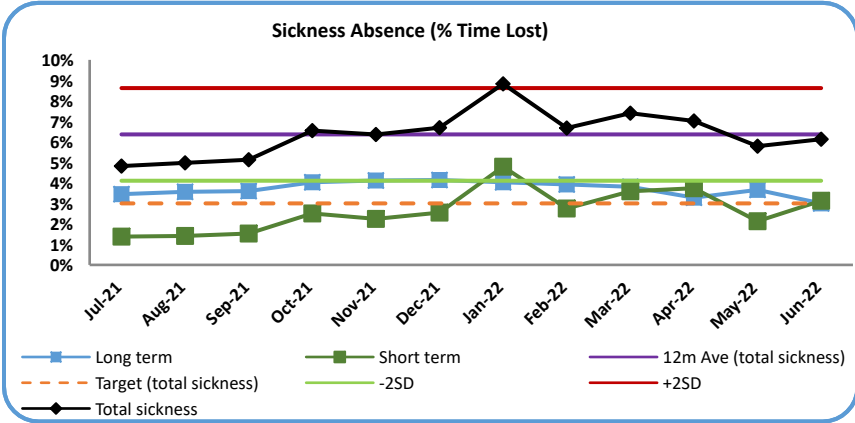
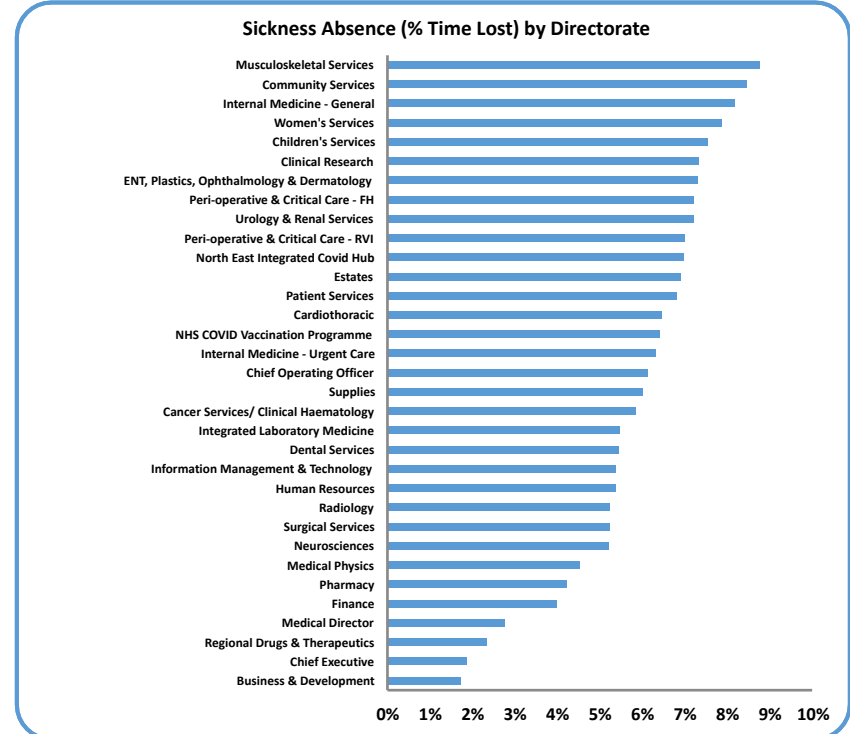
- Risk Assessments have been made available to all Trust staff – staff in ‘high risk’ category prioritised.

# People – Sickness Absence 1/2

- Year to year comparison for sickness absence (including COVID-19 related sickness (rolling 12 months):

	Jun-21	Jun-22	
Long-term	3.49%	3.90%	↑
Short-term	1.33%	2.68%	↑
Total	4.82%	6.58%	↑

- 329,985 FTE working days were lost due to sickness (including COVID-19 related sickness) in the year to June 2022, compared to 227,623 for the previous year, 31% increase.
- Overall sickness absence (including COVID-19 related sickness) is 6.13%, which is down from end of Apr 2022 position of 7.02% (% FTE Time Lost).
- The top three reasons for non-COVID related sickness absence are Anxiety/stress/depression/other psychiatric illnesses (28.09%) Gastrointestinal problems (8.63%), and other musculoskeletal (12.3%).
- The top reason for “Other” absences is Maternity Leave (49% of total absence).
- Nursing and Midwifery have the highest number of Maternity Leave at 4% (%FTE Lost).

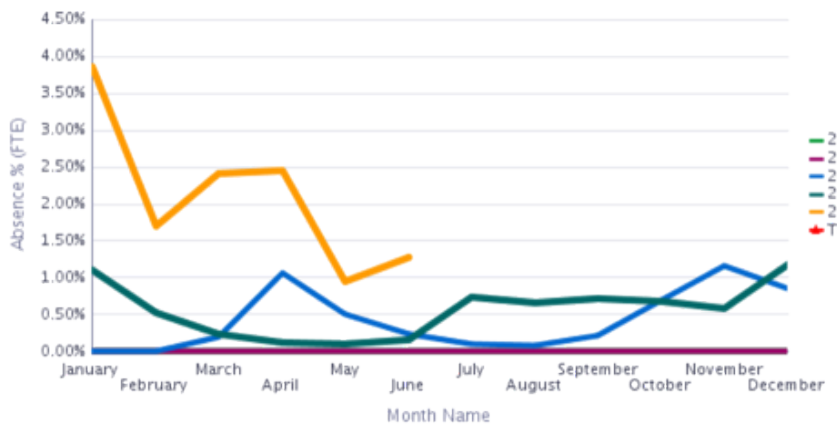


\*COO Directorate includes Outpatients / ABC Service

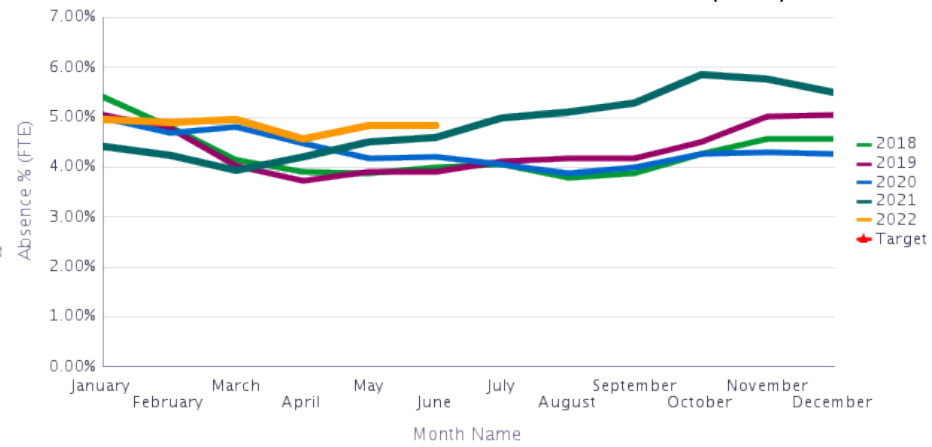


# People – Sickness Absence 2/2

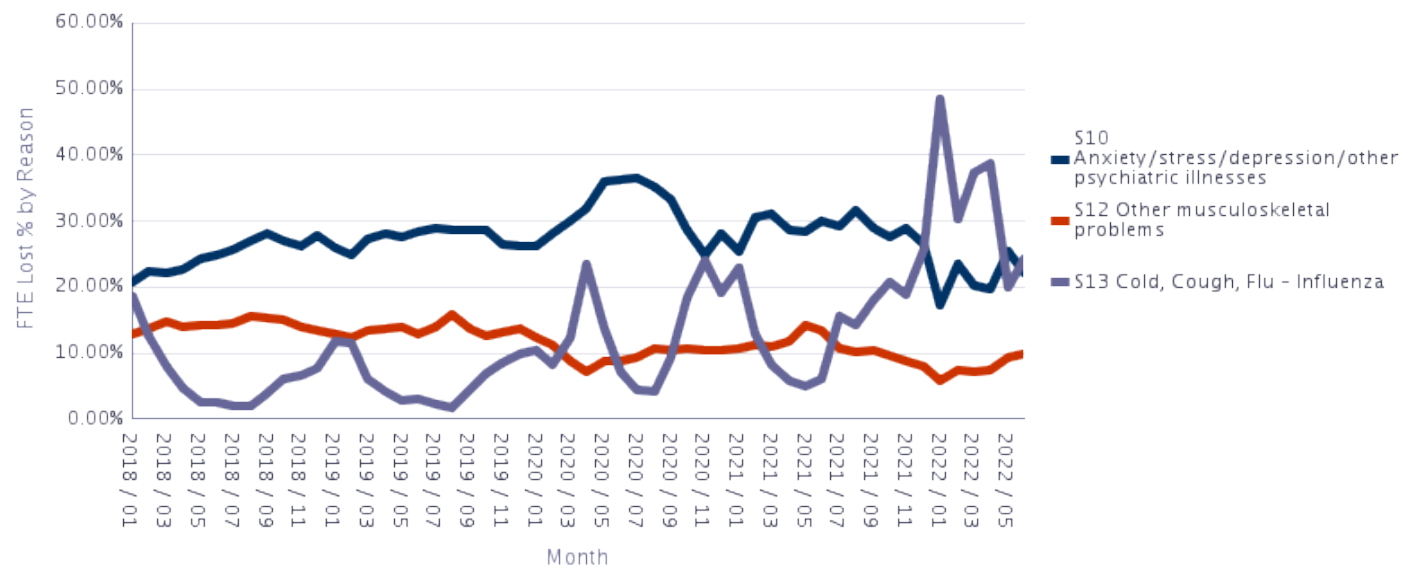
COVID-19 Related Sickness Jan 2018 - Jun 2022 (%FTE)



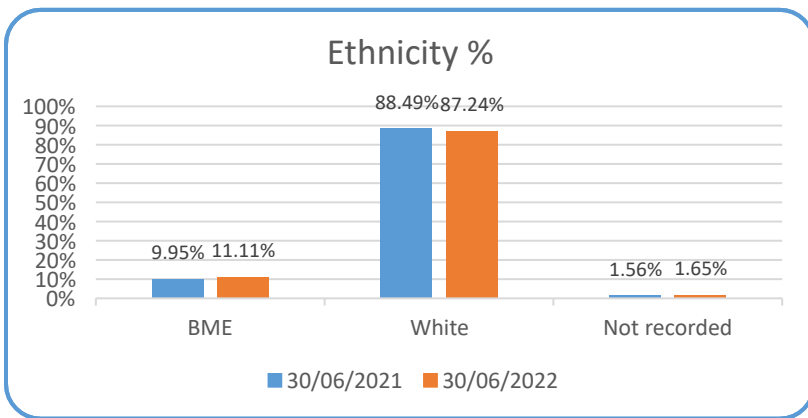
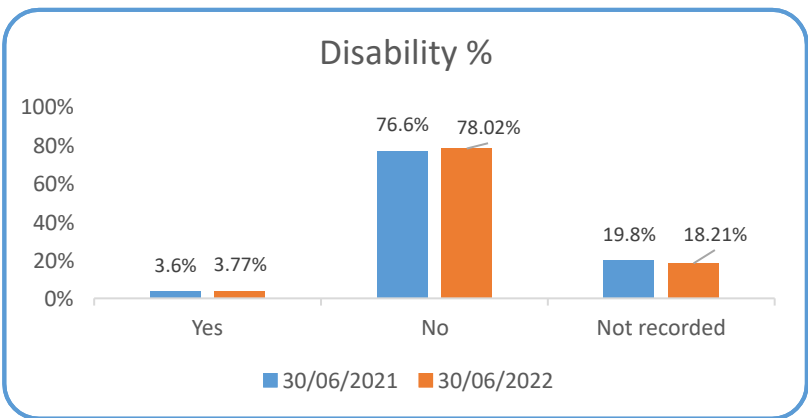
Non-COVID-19 Related Sickness Jan 2018 - Jun 2022 (%FTE)



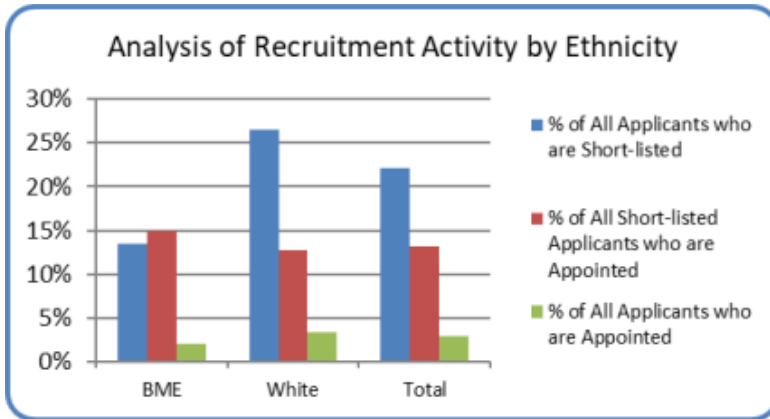
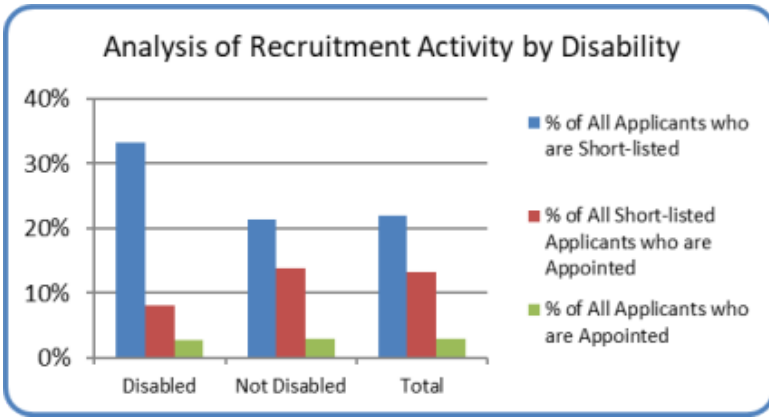
Top 3 Sickness Reasons Jan 2018 - Apr 2022 (%FTE)



# People – Equality and Diversity 1/2

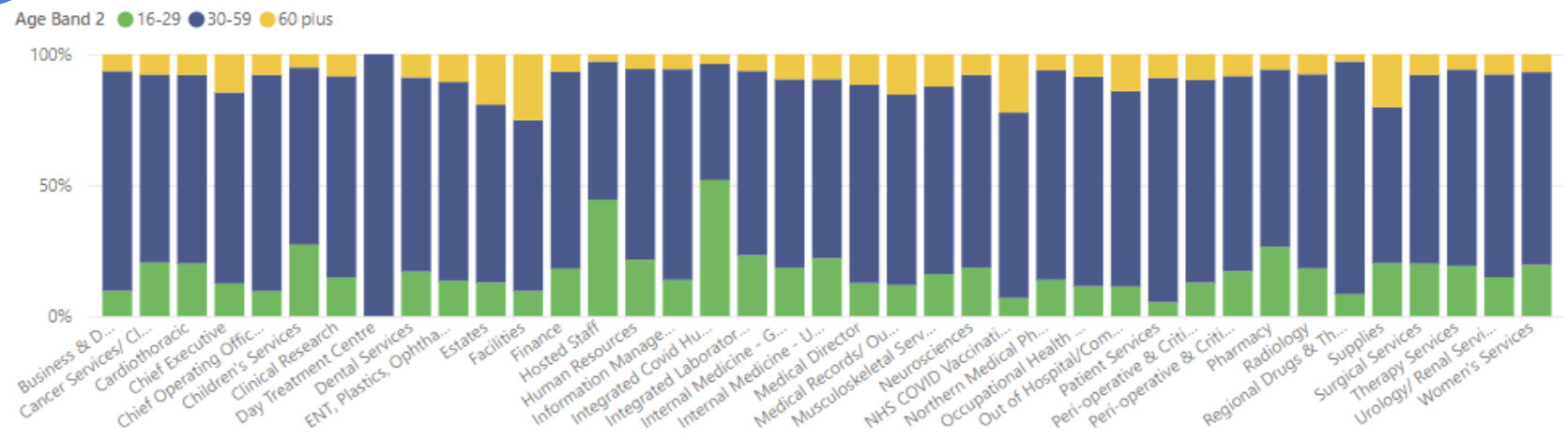


- The graphs above identify, by disability and ethnicity, the recruitment outcome of applicants during the twelve months ending June 2022.



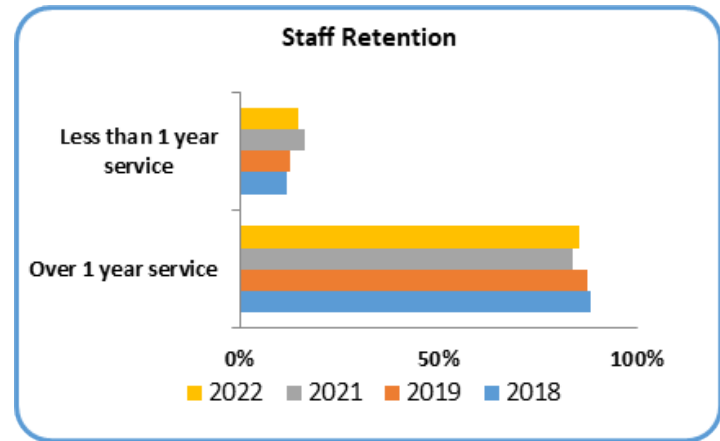
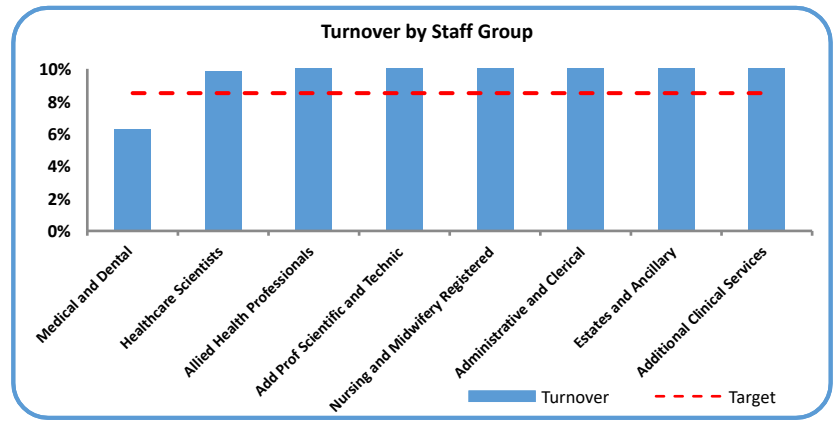
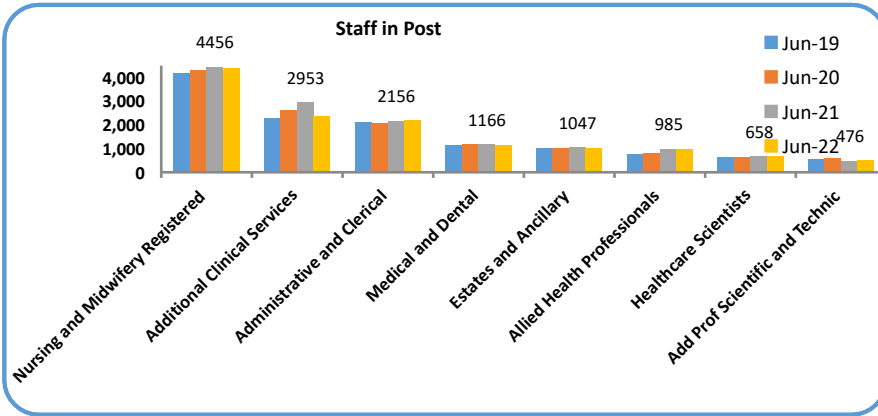
- The graphs above identify, by headcount, the percentage of staff in post in June 2021 and June 2022 by disability and ethnicity. The percentage of staff employed disclosing a disability has improved from 3.62% to 3.77% and the percentage of BAME staff has increased from 9.95% to 11.11%.

# People – Equality and Diversity 2/2



- Estates and Ancillary have the highest proportion of staff aged 55 and over (45%).
- Medical and Dental have 20% of staff aged 55 and above and 7% of staff aged 60 and above.

# People – Workforce 1/4



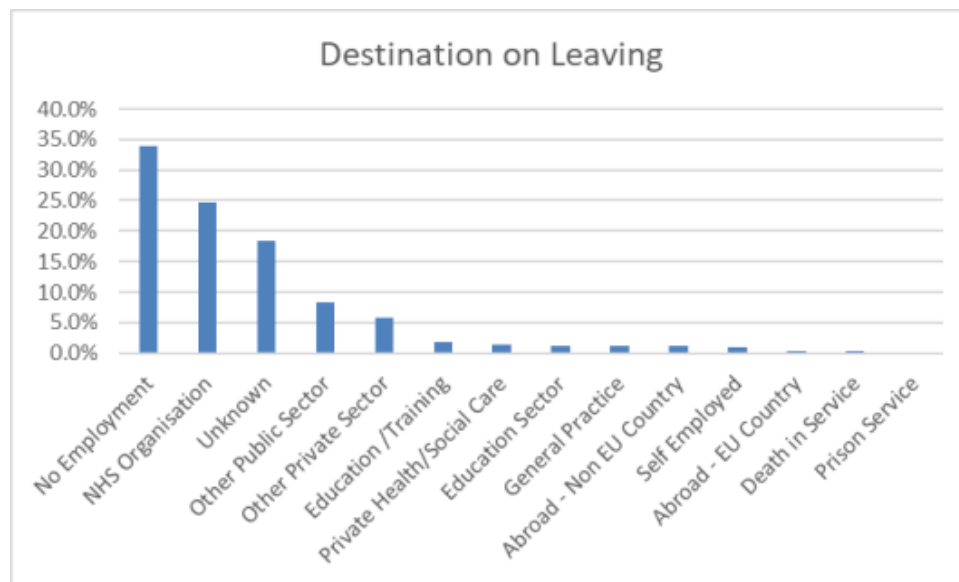
- Staff in post has increased by 5.43% since June 2019. The staff groups with the largest increase are Additional Clinical Services and Allied Health Professionals.
- Staff turnover has increased from 9.89% in June 2021 to 16% in June 2022, against a target of 8.5%.
- The total number of leavers in the period July 2021 to June 2022 was 2,505.
- Retention for staff over 1 year service is 85.5%, an increase from 83.8% in June 2021. Excluding ICHNE and COVID Vaccination staff this is 85.9%.

# People – Workforce 2/4

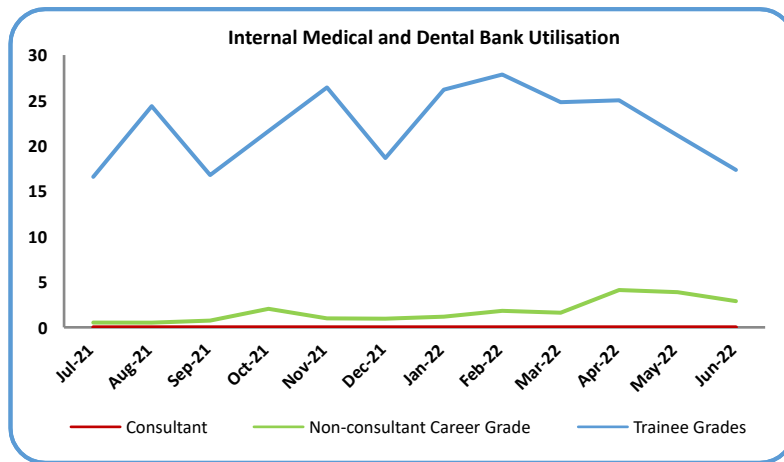
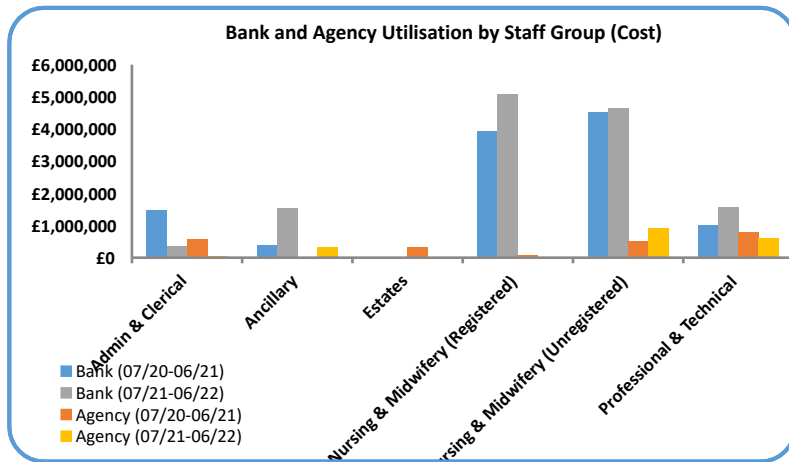
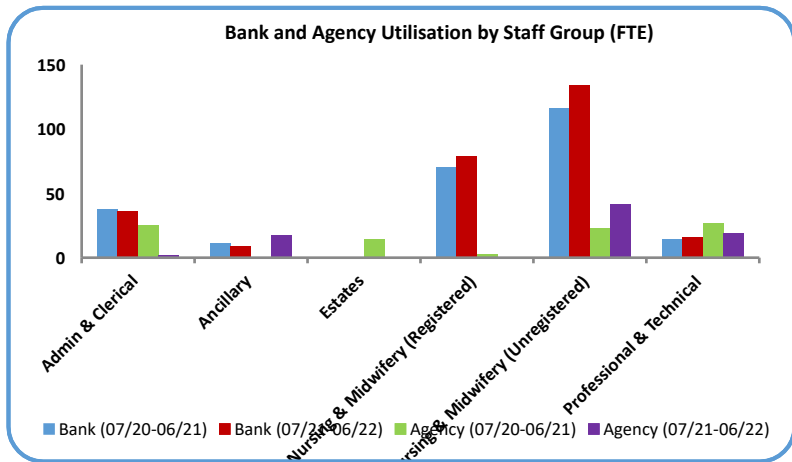
## Turnover by Directorate

Day Treatment Centre	0.00%
Chief Executive	5.17%
Neurosciences	6.25%
Peri-operative & Critical Care - FH	7.84%
Musculoskeletal Services	7.88%
Surgical Services	8.65%
Medical Director	8.78%
Medical Physics	8.84%
Urology & Renal Services	9.56%
Internal Medicine - Urgent Care	9.78%
Business & Development	10.00%
Integrated Laboratory Medicine	10.25%
Peri-operative & Critical Care - RVI	10.27%
Chief Operating Officer	10.55%
Cancer Services/ Clinical Haematology	10.73%
ENT, Plastics, Ophthalmology & Dermatology	11.04%
Cardiothoracic	11.13%
Radiology	11.66%
Women's Services	11.76%
Internal Medicine - General	11.83%
Dental Services	11.83%
Pharmacy	12.04%
Information Management & Technology	12.30%
Children's Services	12.81%
Clinical Research	12.90%
Patient Services	13.09%
Community Services	13.43%
Regional Drugs & Therapeutics	13.89%
Finance	14.16%
Estates	14.34%
Human Resources	20.22%
Supplies	27.38%
NHS COVID Vaccination Programme	86.05%
North East Integrated Covid Hub	79.73%

- The NHS Covid Vaccination Programme have had the highest turnover between June 2021 and June 2022, a total of 527 leavers.
- Only 25% of leavers across the Trust disclosed they were going to another NHS organisation.



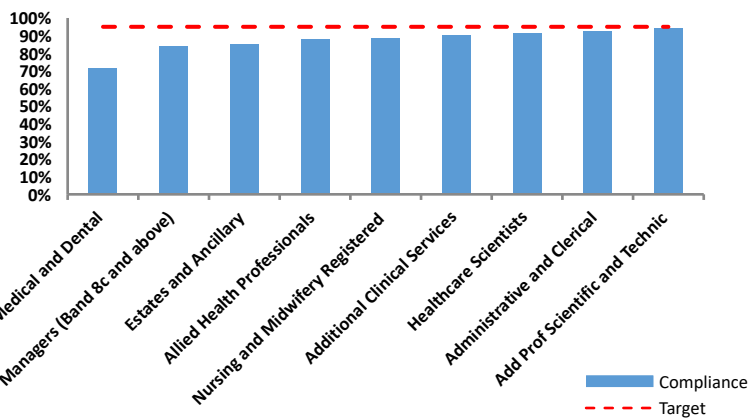
# People – Workforce 3/4



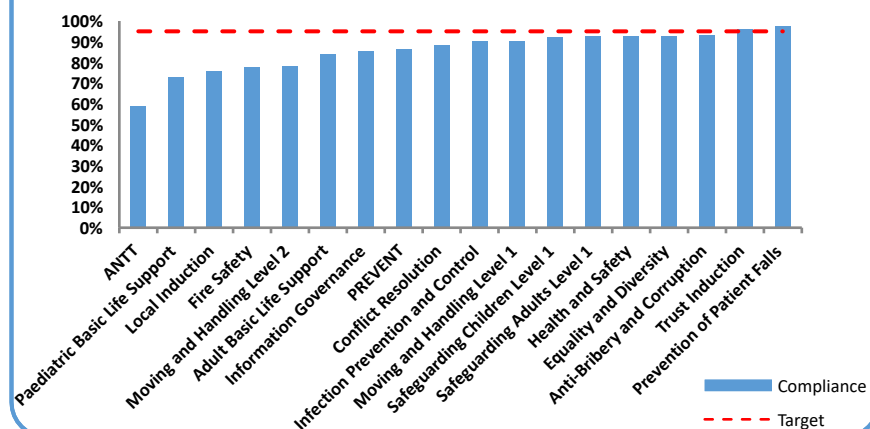
- Comparing the periods May 2020 – April 2021 to May 2021 – April 2022 , overall bank utilisation has increased from 249 wte to 273 wte and agency utilisation has decreased from 92 wte to 79 wte.
- No update for Bank and agency is currently available for this month (July 2021 – June 2022)

# People: Delivering Excellence in Education & Training

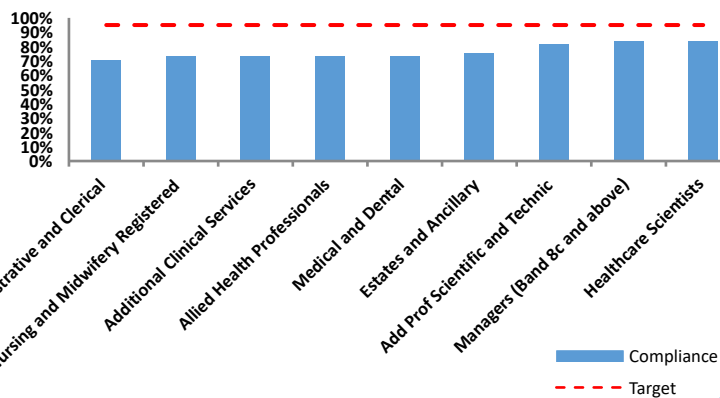
### Mandatory Training by Staff Group



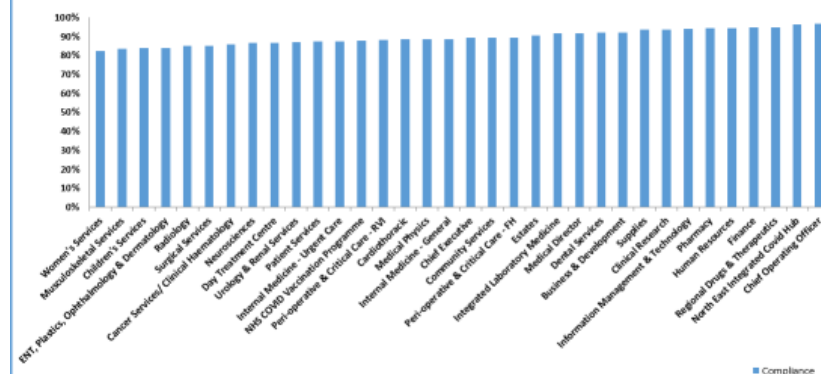
### Mandatory Training by Topic



### Appraisals



### Mandatory Training by Directorate



- Mandatory training compliance stands at 88.0% at end of June 2022, against an end of year target of 95%. The June 2021 position was 87.7%.
- Medical and Dental are the staff group with the lowest training compliance at 71.6% in June 2022 compared to 71.7% in June 2021.
- Appraisal compliance stands at 73.6%, at end of June 2022, against an end of year target of 95%. The June 2021 position was 78.8%. Interventions are in hand to improve this.

# Finance: Overall Financial Position

This page summarises the financial position of the Trust for the period ending 30 June 2022.

The Trust submitted a financial Plan to NHSE for 2022/23 in April, for a deficit of £5.5m for the year. However, there has been agreed additional funding made available and a revised plan was submitted in June with plan surplus of £10.7 million. There are a number of assumptions made, including the delivery of a challenging Cost Improvement Programme, delivery of the Elective Recovery Plan and reducing long waits.

In the period to 30th June 2022 the Trust incurred expenditure of £339.6 million, and accrued income of £339.8 million on mainstream budgets and incurred expenditure of £2.3 million on the programmes outside the block envelope (vaccine roll-out programme), leading to a small surplus of £0.2 million. ICHNE is being treated on an 'Agent Basis' and is excluded for both income and expenditure, the figure is £3.1 million.

It should be noted that all financial risk ratings and use of resources metrics continue to be suspended and are not reported here.

To 30th June the Trust had spent £12.1 million capital, £8.8 million behind Plan.

	Month 3 Budget £'000	Month 3 Actual £'000	Month 3 Variance £'000
Income	338,528	339,798	1,270
Expenditure	338,577	339,552	975
I & E position (excl impairment) - Deficit/(Surplus)	49	(245)	(294)
Capital Programme	20,945	12,114	(8,831)





The Newcastle upon Tyne Hospitals  
NHS Foundation Trust

### COUNCIL OF GOVERNORS

Date of meeting	28 July 2022						
Title	Trust Performance Report						
Report of	Martin Wilson – Chief Operating Officer & Vicky McFarlane-Reid – Director of Business, Development & Enterprise						
Prepared by	Joey Barton – Senior Performance Manager						
Status of Report	Public	Private			Internal		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
Purpose of Report	For Decision	For Assurance			For Information		
	<input type="checkbox"/>	<input checked="" type="checkbox"/>			<input type="checkbox"/>		
Summary	This paper is to provide assurance to the Council on the Trust's elective recovery progress as well as performance against NHSE priorities for 2022/23 and key operational indicators.						
Recommendation	For assurance.						
Links to Strategic Objectives	Patients – Putting patients at the heart of everything we do. Providing care of the highest standard focussing on safety and quality. Performance – Being outstanding now and in the future.						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Impact detail	Details compliance against NHS England plan priorities for 2022/23. Details compliance against national access standards which are written into the NHS standard contract.						
Reports previously considered by	Regular standing agenda item. This report was presented to the Trust Board on 28 July 2022.						

## TRUST PERFORMANCE REPORT

### EXECUTIVE SUMMARY

This report provides an overview of the Trust's continuing recovery of elective activity as well as performance against both contracted national access standards and the priorities for the year outlined by NHS England (NHSE) as part of the 2022/23 planning round.

- NHS England operational planning guidance for 2022/23 is target focused, with Newcastle Hospitals submitting trajectories including reducing the number of >104 week waits (ww) to 30 by the end of March 2023, the return of cancer patients waiting >62 days to February 2020 levels and promising substantial progress on the transformation of outpatients throughout 2022/23.
- Provisional data suggests Newcastle Hospitals delivered day case activity equivalent to 92.1% of June 2019 volumes, with overnight elective activity lower at 78.1%. Outpatient activity as a whole was delivered at 99.6% of the levels recorded in June 2019.
- June saw the Trust record an ambulance handover greater than 60 minutes for the first time since February. The Trust did not achieve the 95% Accident & Emergency (A&E) 4-hour standard in June, with performance of 81.2%. Positively, the Trust was compliant with the <2% 12-hour Emergency Department (ED) waits requirement in June.
- The 28-day Faster Diagnosis Standard (FDS) for cancer care has been achieved in each of the past four months, but seven of nine cancer standards fell short of target in May 2022.
- At the end of June, the Trust still had 41 patients waiting >104 weeks, but this represented a 27% reduction from the previous month, and the reduced volume was ahead of trajectory (63). Referral to Treatment (RTT) Compliance was 70.4%.

The Council of Governors are asked to receive the report.

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# Trust Performance Board Report

## July 2022



Healthcare at its best  
with people at our heart

# Contents

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• Cancer Care, Elective Care & Outpatient Transformation	<b>7</b>
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# Executive Summary

## Purpose

This report provides an overview of the Trust's continuing recovery of elective activity as well as performance against both contracted national access standards and the priorities for the year outlined by NHS England (NHSE) as part of the 2022/23 planning round. It has been established as a standalone report to provide more comprehensive scrutiny and accountability of operational performance as the Trust continues to strive to deliver higher volumes of treatments, reduce and eliminate the longest waits and transform the ways in which it delivers outpatient care. An overarching Delivery Board chaired by the Chief Executive also meets regularly to review and support further elective recovery and performance improvement.

The report is split into three sections, the first of which details the key access and delivery requirements highlighted by NHSE as national priorities for the forthcoming year as the NHS continues its operational recovery following the COVID-19 pandemic, alongside the Trust's trajectory responses. This is followed by a dashboard detailing current compliance with these requirements and subsequent narrative providing context for current performance against these metrics.

The second section provides an overview of the Trust's current performance against our contractual access standards and successive slides outlining the current position, underlying issues and actions being undertaken in relation to key waiting time standards within referral to treatment, emergency care, cancer care and diagnostic pathways. The report concludes with current delivery against a list of metrics to provide additional operational context.

## Report Highlights

- NHS England operational planning guidance for 2022/23 is target focused, with Newcastle Hospitals submitting trajectories including reducing the number of >104 Week Waits (WW) to 30 by the end of March 2023, the return of cancer patients waiting >62 days to February 2020 levels and promising substantial progress on the transformation of outpatients throughout 2022/23.
- Provisional data suggests Newcastle Hospitals delivered day case activity equivalent to 92.1% of June 2019 volumes, with overnight elective activity lower at 78.1%.  
Outpatient activity as a whole was delivered at 99.6% of the levels recorded in June 2019.
- June saw the Trust record an ambulance handover greater than 60 minutes for the first time since February. The Trust did not achieve the 95% Accident & Emergency (A&E) 4-hour (hr) standard in June, with performance of 81.2%. Positively, the Trust was compliant with the <2% 12 hour Emergency Department (ED) waits requirement in June.
- The 28 day Faster Diagnosis Standard (FDS) for cancer care has been achieved in each of the past four months, but seven of nine cancer standards fell short of target in May 2022.
- At the end of June the Trust still had 41 patients waiting >104 weeks, but this represented a 27% reduction from the previous month, and the reduced volume was ahead of trajectory (63). Referral to Treatment (RTT) Compliance was 70.4%.
- A round of Activity Plan meetings were conducted with directorates throughout Quarter 1 (Q1) of 2022/23, led by the Chief Operating Officer and supported by the wider Executive Team. These reviews were focused around the 2022/23 NHSE Planning requirements and scrutinised current elective recovery achievement at speciality level, as well as discussing the support and transformation required to bridge the remaining gap and tackle elective and cancer long waits.

# NHSE Plan Requirements 22/23 (1/4)

## 2022/23 NHSE Plan Requirements

During the winter of 2021/22, NHS England released their 2022/23 operational planning guidance illustrating their priorities for the year ahead. Planning for 2022/2023 is target focused, with an ambition to deliver over 10% more completed pathways than prior to the pandemic through the delivery of >104% value based activity, as well as reduce and eliminate long waits. Specific targets established include:

- Eliminate waits of over 104 weeks by July 2022 and maintain this position through 2022/23 (except where patients choose to wait longer).
- Eliminate waits of over 78 weeks by April 2023, except where patients choose to wait longer or in specific specialties.
- Develop plans that support an overall reduction in 52 week waits where possible, in line with ambition to eliminate them by March 2025.
- Accelerate progress already made towards a more personalised approach to follow-up care in hospitals or clinics, reducing outpatient follow-ups by a minimum of 25% against 2019/20 activity levels by March 2023.
- Return the number of cancer patients waiting over 62 days to levels observed in February 2020.

To support these ambitions, diagnostic activity should increase to a minimum of 120% of pre-pandemic levels across 2022/23 (for a specific group of tests). Overall activity should be delivered at 104% of 2019/20 levels, weighted for equivalent financial case mix value and with outpatient reviews capped at 85% of 2019/20 volumes. Overachievement against the 104% standard will deliver additional elective recovery fund finances to the Integrated Care System (ICS) and in turn the Trust.

## Newcastle Hospitals Response and Trajectories

In response the Trust submitted a draft plan in March 2022 and a final plan in April 2022, with key headlines from the submission including:

- An activity plan representing the combined total of 2019/20 activity baselines, subsequent service developments and planned independent sector usage.
- The most substantial increases compared to 2019/20 were projected in day case activity with the Campus for Ageing and Vitality (CAV) Cataract Centre, independent sector and the planned mobilisation of the new Day Treatment Centre all contributing significantly to this.
- Newcastle Hospitals submitted long waiter trajectories estimated 63 >104WW at the end of June 2022, with this comfortably achieved as there were 41 >104WW in reality. This is forecast to reduce to 30 >104WW by the end of March 2023, with these all expected to be spinal patients. The Trust expects to clear the >52WW backlog ahead of the target set in NHSE's planning guidance.
- MRI and CT are the diagnostic specialties expected to deliver the biggest proportional increase in activity compared to 2019/20 levels.
- Newcastle Hospitals is estimating that in March 2023 the number of cancer patients waiting >62 days will return to February 2020 levels. This is contingent on solving some of the long standing issues in certain tumour groups, such as Lower GI, Urology and Gynae. Compliance with the 28 Day FDS is expected throughout 2022/23 and has been achieved for 4 successive months between February and May 2022.
- Submitted trajectories also show Newcastle Hospitals anticipating substantial progress on the transformation of outpatients throughout 2022/23. The requirement to hold 25% of outpatient appointments virtually is expected to be met throughout 2022/23, and compliance with the 5% target set for patients seen and moved to patient initiated follow-up (PIFU) in March 2023 is also projected. Work continues to identify methods to reduce Outpatient (OP) reviews by 25%, however this target is not expected to be met in 2022/23.

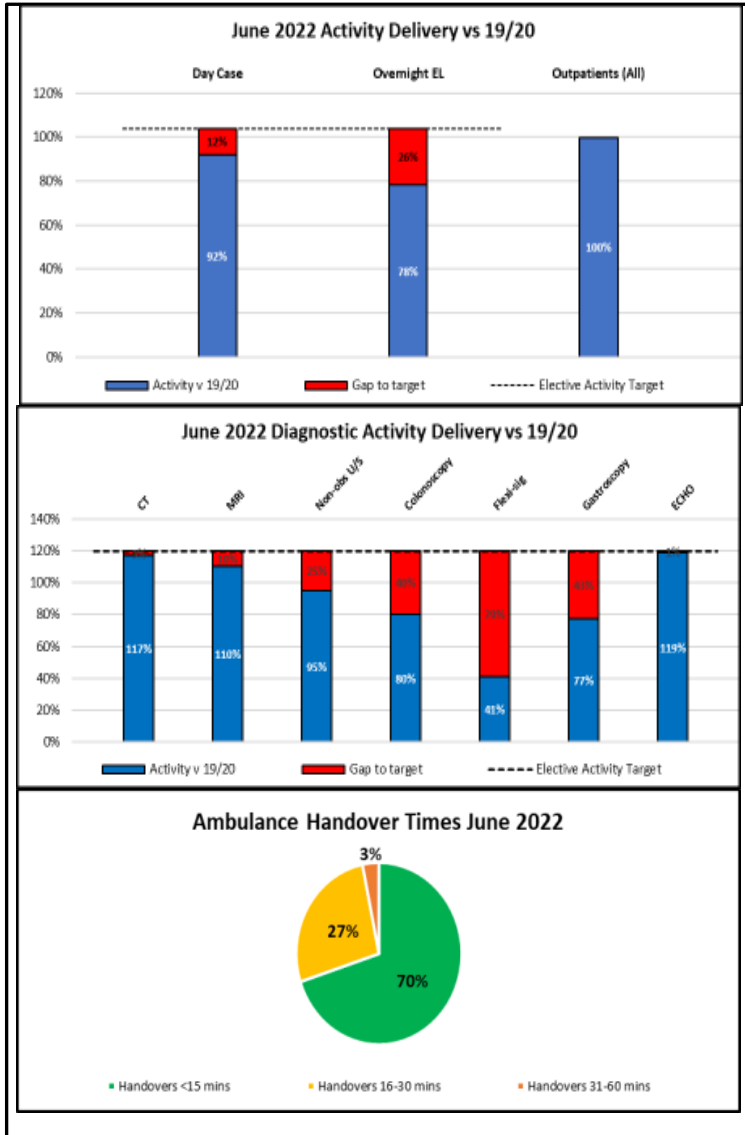
# NHSE Plan Requirements 22/23 (2/4)

Metric	Requirement	RAG Rating		Mar-22	Apr-22	May-22	Jun-22	Trendline
		Trajectory	Target					
<b>Activity Delivery</b>								
Day Case	104% of 19/20 levels combined (Reviews fixed at 85% of 19/20)			91.8%	92.9%	91.6%	92.1%	
Elective Overnight				69.2%	84.9%	78.4%	78.1%	
Outpatient New				106.0%				
Outpatient Procedures				101.2%	97.7%	103.4%	99.6%	
Outpatient Reviews				104.2%				
Completed Treatments	110% of 19/20 levels			TBC	TBC	TBC	TBC	
Diagnostics*	120% of 19/20 levels			101.0%	103.3%	103.0%	105.8%	
<b>Emergency Care</b>								
Ambulance Handovers	>=65% under 15 mins	N/A		67.5%	68.5%	71.0%	70.0%	
	>=95% under 30 mins			95.9%	96.6%	97.1%	96.8%	
	100% under 60 mins			100.0%	100.0%	100.0%	100.0%	
A&E Arrival to Admission/Discharge	<2% over 12 hours				0.3%	0.5%	0.2%	0.5%
<b>Cancer Care</b>								
>62 Day Cancer Waiters	Reduce to <=213 by e/o Mar-23			289	385	396	439	
28 Day Compliance	>=75%			83.4%	79.9%	77.6%	TBC	
<b>Elective Care</b>								
>104 Week Waiters	Zero by e/o Jun-22			117	84	56	41	
>78 Week Waiters	Zero by e/o Mar-23			662	722	678	595	
>52 Week Waiters	Reduction (Zero by e/o Mar-25)			3,535	3,636	3,760	4,122	
<b>Outpatient Transformation</b>								
Specialist Advice Requests	16 in every 100 New OP atts.	N/A		7.6%	TBC	TBC	TBC	
Virtual Attendances	>=25% Non-F2F			18.6%	18.7%	18.2%	17.4%	
PIFU Take-up	>=5% of all OP atts. by e/o Mar-23			N/A	0.1%	0.4%	0.8%	
Outpatient Reviews	<=75% of 19/20			110.6%	TBC	TBC	TBC	

\* Applicable to CT, MRI, Non-obs Ultrasound, Gastroscopy, Colonoscopy, Flexi-sigmoidoscopy and ECHO.



# NHSE Plan Requirements 22/23 (3/4)



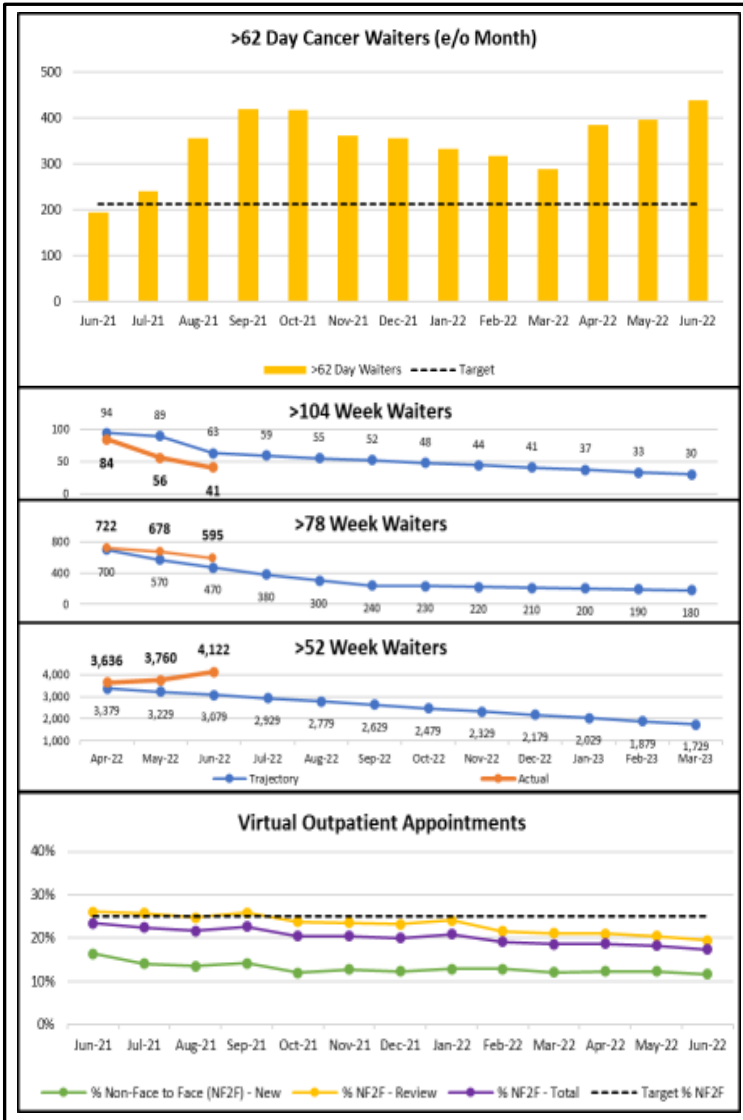
## Activity Delivery

- Provisional data suggests Newcastle Hospitals delivered day case activity equivalent to 92.1% of June 2019 volumes, with overnight elective activity lower at 78.1%.
- Due to internal issues with outpatient activity data, we are currently unable to split outpatient procedure activity from new or review appointments. However for outpatient activity as a whole the Trust delivered 100% of the levels recorded in June 2019. These issues are anticipated to be resolved ahead of the next report.
- Activity delivery in both day case and overnight settings remained similar to May's levels, whilst outpatient recovery has consistently been at or above 100% for many months.
- Due to the aforementioned data issues we cannot state any indicative performance against the 104% value activity target at this time, however the data available is sufficient to be sure that the Trust did not achieve this overall requirement in June.
- Diagnostic activity has been at over 100% of pre-COVID levels for many months, and recovery rose to 106% in June, the highest level for 5 months. However, performance remains short of the 120% target. Whilst the extra capacity afforded by the Community Diagnostic Centre in Blaydon has helped increase activity, even the potential expansion to the Metro Centre is unlikely to provide sufficient capacity to consistently deliver the volume of tests as required by NHSE.
- A round of Activity Plan meetings were conducted with directorates throughout Q1 of 22/23, led by the Chief Operating Officer and supported by the wider Executive Team. These reviews were focused around the 2022/23 NHSE Planning requirements and scrutinised current elective recovery achievement at specialty level, as well as discussing the support and transformation required to bridge the remaining gap and tackle elective and cancer long waits.

## Emergency Care

- All ambulance handover targets have been consistently met by the Trust in recent months. There are some data quality issues concerning handover times recorded by the North East Ambulance Service (NEAS) affecting all acute Trusts in the region, and Newcastle Hospitals emergency care team continue to raise these.
- The 12 hour ED wait is a new target measuring time from arrival to admission/discharge, and different to the 12 hour trolley wait target also monitored and for which breaches are very rare for the Trust (the last one was in October 2021). 12 hour ED waits averaged 3 per day in June. Although this is higher than May, Newcastle Hospitals remain compliant with the <2% target.

# NHSE Plan Requirements 22/23 (4/4)



## Cancer Care

- Progress was made in reducing the >62 day backlog in early 2022, largely due to reductions in skin cancer waiters through the use of teledermatology and weekend Waiting List Initiatives (WLIs). However the >62 day backlog snapshot has increased for three successive months, impacted by bank holidays and high staff sickness levels, as well as capacity exceeding demand in some areas. The tumour groups with the biggest backlog growth were Lower GI and Skin.
- The 28 day standard has been achieved in each of the past four months with performance above the Northern Cancer Alliance (NCA) average. Performance against this standard has also benefitted from the aforementioned skin cancer developments.

## Elective Care

- The total number of >104WW reduced to 41 by the end of June, meaning the trajectory submitted to NHSE to have 63 at this time was comfortably achieved. Only 1 of these patients (an Ophthalmology patient) was in non-Spinal services. A business case is in the final stages of agreement with commissioners to fund an expansion in capacity of Spinal services, which had been severely lacking prior to the pandemic.
- >78WW volumes dropped to 595 in June, representing a 12% reduction in 1 month. However this remains well above trajectory of 470.
- The >52WW rose for the third successive month. This reverses the declining trend seen in Q3 and Q4 of 2021/22 and there are 4,122 >52 week waiters, which is above trajectory.

## Outpatient Transformation

- Virtual attendances as a percentage of all outpatient attendances started 2021/22 at greater than 25%, but incrementally declined throughout the year. This trend has continued in Q1 of 2022/23, standing at 17.4% for June. To note, attendance type data for the Trust is currently being underreported nationally – a resolution is expected shortly.
- At 0.83%, PIFU take-up was above trajectory for the first time in 22/23 (0.75%), having increased considerably from 0.44% in May. PIFU outcomes became recordable from mid-April and it is anticipated that figures will continue to increase as services capture encounters where PIFU was already being implemented in all but name.
- Directorates have drawn up initial plans to contribute to the required reduction in review appointments, including wider adoption of advice and guidance provision and one stop clinics. It is recognised that it will not be appropriate for all services to reduce follow-ups at this stage, depending on patient cohorts and volumes of patients on non-RTT waiting lists.

# Operational Standards

Metric	Standard	RAG Rating	Mar-22	Apr-22	May-22	Jun-22	Trendline
<b>Emergency Care</b>							
Ambulance Handovers	Zero >60 mins	Red	0	0	0	1	
A&E Arrival to Admission/Discharge	95% <4 hours	Red	82.2%	82.5%	82.5%	81.2%	
	<2% over 12 hours	Green	0.3%	0.5%	0.2%	0.5%	
<b>Cancer Care</b>							
Two Week Wait (Suspected Cancer)	93%	Red	84.1%	78.5%	79.5%	Cancer data runs one month behind	
Two Week Wait (Breast Symptomatic)	93%	Red	38.0%	53.2%	68.9%		
28 Day FDS	75%	Green	83.4%	79.9%	77.6%		
31 Days (First Treatment)	96%	Red	86.9%	85.5%	83.8%		
31 Days (Subsq. Treat. - Surgery)	94%	Red	66.7%	65.7%	60.2%		
31 Days (Subsq. Treat. - Drugs)	98%	Red	96.4%	95.6%	95.5%		
31 Days (Subsq. Treat. - Radiotherapy)	94%	Green	99.5%	97.6%	95.9%		
62 Days (Treatment)	85%	Red	60.2%	62.4%	58.8%		
62 Days (Screening)	90%	Red	81.0%	72.9%	46.3%		
<b>Elective Care</b>							
18 Weeks RTT	92%	Red	70.1%	69.5%	71.6%	70.4%	
>104 Week Waiters	Zero	Red	117	84	56	41	
>6 Weeks Diagnostic Waiters	1%	Red	18.2%	16.9%	15.9%	15.2%	
Cancelled Ops. Rescheduled >28 Days	Zero	Red	10	7	14	1	
Urgent Ops. Cancelled Twice	Zero	Green	0	0	0	0	
<b>IAPT</b>							
Wait to First Appointment	75% <=6 weeks	Green	98.8%	98.5%	98.0%	97.8%	
	95% <=18 weeks	Green	99.0%	98.7%	99.8%	99.6%	
Movement to Recovery (Overall)	50%	Red	43.7%	44.0%	33.5%	43.4%	
<b>Other</b>							
Duty of Candour	Zero	Green	0	0	0	0	
Mixed Sex Accommodation Breach	Zero	Green	0	0	0	0	
MRSA Cases	Zero	Green	0	0	1	0	
C-Difficile Cases	<=153 (FY cumulative)	Red	169	12	29	42	
VTE Risk Assessment	95%	Green	95.9%	95.6%	95.0%	TBC	
Sepsis Screening Treat. (Emergency)	90% (of sample) <1 hour	Green	90.0%	93.0%	93.0%	93.0%	
Sepsis Screening Treat. (All)		Red	60.0%	63.0%	63.0%	63.0%	

# Other Metrics

Metric	Mar-22	Apr-22	May-22	Jun-22	Trendline
<b>Emergency Care</b>					
Ambulance Arrivals	2,970	2,749	2,852	2,829	
Type 1 Performance (A&E 4 hour)	71.4%	71.0%	71.1%	68.7%	
Type 1 Attendances (Main ED)	13,035	11,716	13,130	12,386	
Type 2 Attendances (Eye Casualty)	1,563	1,446	1,563	1,440	
Type 3 Attendances (UTC)	5,670	5,880	6,624	6,087	
<b>Patient Flow</b>					
Covid Inpatients (average)	74	80	33	47	
Emergency Admissions	6,087	5,571	5,973	5,703	
G&A Bed Occupancy	86.0%	86.0%	86.0%	85.8%	
Critical Care Bed Occupancy	74.8%	79.1%	79.0%	76.1%	
Bed Days Lost (average)	143	114	64	78	
Medical Boarders	66	53	47	40	
Length Of Stay >7 Days	741	775	728	719	
Length Of Stay >21 Days	318	346	320	349	

# Other Metrics

Metric	Mar-22	Apr-22	May-22	Jun-22	Trendline
<b>Cancer Care</b>					
2WW Appointments	2,403	2,117	2,187	2,201	
Cancer First Treatments	541	456	441	TBC	
<b>Planned Care</b>					
2WW Referrals	2,733	2,243	2,924	2,600	
Urgent Referrals	6,286	5,024	6,052	5,107	
Routine Referrals	28,004	23,594	27,114	24,597	
Day Case Activity (Specific Acute (SA))	10,754	8,961	9,758	9,260	
Overnight Elective Activity (SA)	1,883	1,664	1,719	1,752	
New Outpatient Attendances (SA)	30,225	88,195	100,816	93,530	
Review Outpatient Attendances (SA)	77,977				
Outpatient Procedure Activity (SA)	18,077				
Diagnostic Tests	20,659	16,837	19,657	18,844	
Outpatient DNA Rate	7.9%	8.0%	8.1%	8.5%	
RTT Waiting List Size	97,447	96,321	96,526	95,901	

### COUNCIL OF GOVERNORS

Date of meeting	18 August 2022						
Title	Update from the Lead Governor						
Report of	Pam Yanez, Lead Governor						
Prepared by	Pam Yanez, Lead Governor						
Status of Report	Public	Private			Internal		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
Purpose of Report	For Decision		For Assurance		For Information		
	<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		
Summary	This report updates on the work of the Lead Governor since the last meeting of the Council of Governors on 16 June 2022.						
Recommendation	The Council of Governors are asked to (i) receive the update and (ii) note the contents.						
Links to Strategic Objectives							
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impact detail	Impact detailed within the report.						
Reports previously considered by	Regular report.						

## UPDATE FROM THE LEAD GOVERNOR

### EXECUTIVE SUMMARY

This report provides an update to the Council for the period since the last meeting of the Council of Governors on 16 June 2022.

## UPDATE FROM THE LEAD GOVERNOR

### 1. UPDATE

I have continued to attend as many of the Working Group meetings as I am able to, including the Nominations Committee meeting held on 27 July 2022. I also attended the Trust Board meeting virtually on 28 July 2022.

I, with the other Working Group Chairs, participated in the induction of the new Governors and we have recommended to them that they sample each Working Group before making a final choice on the one(s) they wish to attend.

On 28 June 2022. I had the pleasure of meeting Dame Jackie Daniel, Chief Executive Officer (CEO) and discussed the role of the Governors in the Trust. We plan to meet every three months in order to enhance the communication between the Council of Governors and the CEO.

I have met with Jo McCallum, Senior Project Manager, from the Trust Transformation Team, and agreed that three Governors will join their patient pathway workstream for the new Day Treatment Centre.

I recently recorded an interview with Radio Tyneside which will be broadcast as a 5-minute piece highlighting the benefits of becoming a Member of the Trust. The People, Engagement and Membership (PEM) Working Group are striving to increase the diversity of the Trust membership and this interview is part of a number of actions agreed in order to do this.

I am looking for Governors who wish to join our new Governor Buddy scheme as buddies.

Eric Valentine and Judy Carrick (Public Governors) kindly led the Governors Informal Meeting on 14 July 2022 in my absence. We are reviewing the time for the next informal meeting on Thursday 15 September which is planned to be held face to face with Microsoft Teams available to those unable to attend in person. Governors are invited to raise any matters through this forum unless they are urgent in which case the Governor and Membership Engagement Officer should be contacted.

I was recently interviewed by a member of staff from PwC as part of their external Well Led Review on the Trust, to aid Trust preparations for future Care Quality Commission (CQC) inspections.

### 2. RECOMMENDATION

The Council of Governors are asked to note the contents of this report.

**Report of Pam Yanez**

**Lead Governor**

8 August 2022



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**COUNCIL OF GOVERNORS**

Date of meeting	18 August 2022						
Title	Quality of Patient Experience (QPE) Working Group Report						
Report of	Poonam Singh, Chair of QPE Working Group						
Prepared by	Poonam Singh, Chair of QPE Working Group Lauren Thompson, Governor and Membership Engagement Officer						
Status of Report	Public	Private			Internal		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
Purpose of Report	For Decision		For Assurance		For Information		
	<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		
Summary	The content of this report outlines the activities undertaken by the working group.						
Recommendation	The Council of Governors are asked to receive the report.						
Links to Strategic Objectives	Patients – Putting patients at the heart of everything we do. Providing care of the highest standard focusing on safety and quality.						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Impact detail	Outlined within the report.						
Reports previously considered by	Regular reports on the work of this Working Group are provided to the Council of Governors.						

## QUALITY OF PATIENT EXPERIENCE (QPE) WORKING GROUP REPORT

### EXECUTIVE SUMMARY

This report provides an update to the Council of Governors on the work of the Quality of Patient Experience (QPE) Working Group during the period June to August 2022. It provides a summary of:

- Group activities;
- Presentations received; and
- Ongoing areas of focus.

## QUALITY OF PATIENT EXPERIENCE (QPE) WORKING GROUP (WG) REPORT

### 1. INTRODUCTION

The QPE Working Group continues to meet monthly, in person and via Microsoft Teams with a break in August due to annual leave and summer holidays. The group agreed to change the meeting time to start at an earlier time of 1pm.

### 2. GROUP ACTIVITIES

#### Complaints Panel

- June / July meetings – No Governor was available to update on the Complaints Panel meetings due to a change in membership of the QPE representative on the Panel, but Tracy Scott, Head of Patient Experience, attended the QPE meeting to update on the service, and this has been included in section three of this report.

#### Clinical Audit and Guidelines Group (CAGG) [meets monthly]

- June meeting – David Black provided a brief update in relation to clinical audits.
- July meeting – No update given due to change in QPE representative on the CAGG.

#### Patient Safety Group (PSG) [meets quarterly]

- July meeting – Meeting took place after the Working Group and will be included in the next QPE report to the Council of Governors.

#### Nutrition Steering Group (NSG) [meets quarterly]

- June meeting – Alexandros Dearges-Chantler shared an update with the QPE Group on the following topics:
  - Electronic meal ordering project;
  - Malnutrition screening;
  - Nutrition care plan completion; and
  - Nutrition dietetics analysis of the core menus.

Following the recent Governor Elections in May 2022 and membership change to the working group, it was agreed that an email would be circulated for expressions of interest to attend each of the above groups. Replies were received, collated and it was agreed at the July working group which Governor would attend which groups going forward. The working group has now put in place a second Governor that would cover the meeting if needed.

### 3. PRESENTATIONS

#### June

Tracy Scott, Head of Patient Experience, explained that her role is to manage the complaints department, equality, diversity inclusion for patients and patient experience. Tracy also manages the interpretation and translation contracts.

Tracy referred to the service improvement work and explained that her team are working closely with 'We are all disabled' and 'Disability North' focusing on patients with disability experience. Tracy informed the QPE group that the Trust will be working with a video production company, funded by Newcastle Hospitals Charity, to produce a training video over the next 6 to 9 months which will be shared widely via Trust induction and other routes.

Catherine Lee, Head of Patient Advice and Liaison Service (PALS), attended to talk about the PALS which has been running for over 20 years now. She explained that the service is a Newcastle Hospital service but is a shared service covering other organisations.

She advised group that PALS work closely with the complaints team and patient relations and ensure that people do not have to go to different departments. Further she explained that the team actively review how long it takes to deal with issues as PALS was set up with the aim of ensuring issues are dealt with promptly. Catherine elaborated on the key themes frequently raised, which include:

- Communication - information about services, lack of communication and lack of information about treatment;
- Appointments - delays, booking arrangements and appointment details; and
- Care and treatment – which covers a range of issues such as test results, pain relief and diagnosis.

Sam Rutherford, Head of Quality, Assurance and Clinical Effectiveness and Anne-Marie Troy-Smith, Quality Development Manager attended to present an update on the Trust Quality Account.

Sam referred to the proposed Quality Priorities for 2022/23 which are as follows:

- Patient Safety
  - Reducing Infection – with a focus on Gram negative blood stream infections; and
  - Management of Abnormal Results.
- Clinical Effectiveness
  - Enhancing capability in Quality Improvement (QI);
  - Identify deterioration in pregnant women (MAU/MEOWS); and

- Trust-wide Day Surgery Initiative.
- Patient Experience
  - Ensure reasonable adjustments are made for patients with suspected or known Learning Disability and Learning Difficulty; and
  - Improve services for children and young people with mental health issues.

## July

James Callaghan, Head of Nutrition and Paula Coulson, Nurse Specialist - Adult Clinical Nutrition, Mary Mahon, Lead Catering Dietitian and Colin Chapman, Catering Manager, attended to give a presentation in relation to Nutrition and Hydration.

James advised that the Nutrition Steering Group feeds into the Harm Free Care Group and that the Clinical Nutrition Teams, Catering subgroup, Harm free care leaders and Adhoc task and finish groups feed into the Nutrition Steering Group

Paula discussed in detail with the working group members the current areas of focus and progress made as follows:

- Nutritional Screening & Care Planning;
- Electronic Meal Ordering (EMO);
- Nutritional analysis of hospital menus and menu review;
- Patient hydration;
- Incidents; and
- Food and Drink Strategy.

## 4. ONGOING AREAS OF FOCUS

A meeting with Ian Joy, Deputy Chief Nurse, Diane Cree, PA to the Chief Nurse, Poonam Singh, QPE Chair and Lauren Thompson, Governor and Membership Engagement Officer, took place on Monday 11 July to discuss restarting the QPE ward/department visits from mid-September 2022.

The following was agreed at that meeting:

- Governors will contact Diane Cree one week before the visit, with two Governors to attend each visit.
- Governor visits are informal and to ask patients / families about their experience of care and the services provided.
- Any recommendations/positive or negative feedback received should be collated into one document from the visit and sent to Poonam Singh (Chair) with a copy to Lauren Thompson. The QPE WG chair will then review and send to Diane Cree who will progress.
- Diane will send the feedback to the ward / department manager or matron and will chase if a response has not been received within 4 weeks.

- Diane will update Poonam as appropriate with any responses and Poonam will feed back to the QPE Working Group.
- Diane will produce a report twice a year which will go to the July and January QPE Working Group and then to the August and February Council of Governor meetings with outcomes / actions taken from the recommendations submitted by the QPE Working Group.

It was agreed that a prompt sheet can be used with questions to ask patients views about their experience of care and the services provided.

At the July working group, it was agreed that members of the group would arrange to visit entrances to the hospitals to check signage, access, wheelchair facilities, car park and more importantly walk through the patient experience entering the hospital. Once the visits have taken place, it was agreed that any information would be collated and sent to Poonam Singh and Lauren Thompson and then to be discussed at the September QPE Working Group to agree an approach to take this forward.

## **5. RECOMMENDATIONS**

The Council of Governors are asked to receive the report.

**Report of Poonam Singh  
Chair of QPE Working Group  
August 2022**

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**The Newcastle upon Tyne Hospitals**  
NHS Foundation Trust

**COUNCIL OF GOVERNORS**

Date of meeting	18 August 2022						
Title	Report of the Business and Development Working Group						
Report of	Eric Valentine, Chair of the Governors Business and Development Working Group						
Prepared by	Eric Valentine, Chair of the Governors Business and Development Working Group						
Status of Report	Public	Private			Internal		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
Purpose of Report	For Decision		For Assurance		For Information		
	<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		
Summary	This report details the activities of the Business and Development Working Group since the last report to the Council of Governors (CoG) in June 2022.						
Recommendation	The Council of Governors are asked to note the contents of this report.						
Links to Strategic Objectives	Performance- Being outstanding now and in the future.						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impact detail	Impact detailed within the report.						
Reports previously considered by	Standing agenda item.						

## **REPORT OF THE BUSINESS AND DEVELOPMENT WORKING GROUP**

### **EXECUTIVE SUMMARY**

This report provides an update to the Council of Governors on the ongoing work of the Business and Development (B&D) Working Group since the last meeting of the Council of Governors in June 2022.

## **REPORT OF THE BUSINESS AND DEVELOPMENT (B&D) WORKING GROUP (WG)**

### **1. INTRODUCTION**

Meetings have been held monthly via Teams and in-person with the topics covered relating to the WG Terms of Reference.

There are presently 11 members within the WG. The WG always welcomes any new Governors who would like to join, as well as Governors who may wish to attend a specific meeting.

### **2. PRESENTATION TOPICS**

The WG has discussed a number of matters in the previous two meetings including:

#### **1) External Audit Update / Annual Accounts Briefing**

Stuart Smith, Assistant Director of Finance, attended to update the working group on the paper that was presented on 10 March 2022 in relation to the External Audit Contract.

Stuart explained the rationale for the increase in the audit fee noting the following:

- Following the publication of the new Code of Audit Practice, an increased volume of work was required on Value for Money. In addition, further work has been required in the previous two years in response to regulatory recommendations to increase the level of audit work on property valuations;
- The ever-increasing complexity of accounts e.g. changes to/new international financial reporting standard requirements such as IFRS16;
- Amended and/or new audit requirements e.g. introduction of ISA (UK) 540, which has increased the work required on estimates;
- Increased regulatory expectations around journals testing and information produced by the entity (IPE);
- The need to increase the size of the audit technical and quality support teams to support audit teams in delivering high quality audit work and changing requirements;
- Market conditions, which include a reducing pool of experienced public sector auditors, ongoing difficulties in recruitment (particularly in audit and public sector audit); and
- All of these pressures increase salary expectations, which also drives the need to increase fees.

A number of suggestions were made by the working group which included for example, to receive information in relation to the market conditions in public sector audit and to have early engagement to shape the Trust's requirements to optimise the market.

## **2) Review of plans for 2021/22 – Effectiveness Review**

The Working Group reviewed the Effectiveness Review document and suggested asking the presenters and Council of Governors for feedback noting that the Governor role is to hold the Non-Executive Directors to account for the performance of the Board and to represent members/the public. The Working Group agreed that the format of the document is useful and easy to read, and that feedback from the Non-Executive Directors would be valuable. It would be useful to include ideas that have been influenced and what impact the group has had.

## **3) Gary Towns – Head of IT Service Management**

Gary Towns highlighted some key headlines including cyber activity in relation to the Trust firewalls and updated the group on the responsibility that the Cyber Security Team have.

The Trust has evolved its cyber protection approach over recent years and since the cyber-attacks took place at the local Universities in September 2020 and October 2021, this has made the Trust more conscious of ensuring robust cyber defences are in place. The Trust receives notifications from NHS Digital (CareCERT notification) when they are aware of a cyber threat and there is a 14-day deadline in place. Gary talked through the process which is followed if the 14-day deadline is not able to be achieved, which included risk rating, actions being put in place and discussions with the Head of Corporate Risk and Assurance and the Senior Information Risk Owners (SIROs).

Gary referred to Cyber Security Awareness and Training and explained that the team are keen to work with end users and individuals to ensure staff are fully aware of cyber security requirements. The training is included as part of the Trust induction process and mandatory training on an annual basis. Cyber Security Awareness is raised via posters, leaflets, internal communications, social media, screensavers, and digital banners.

It was agreed that some of the WG members would visit the Trust data centres in the future.

## **4) Natalie Yeowart – Head of Corporate Risk and Assurance and Information Governance**

Natalie gave a presentation to provide the WG with an understanding of the Trust risk management approach and to provide assurance around the robust processes in place for Risk Management.

Natalie advised that following the last Care Quality Commission (CQC) inspection, refinements were required to further enhance/strengthen the Trust's risk management approach. A review of the Trust risk management was undertaken at that time and Trust adopted the ISO3100 Risk Management approach. This approach is an international standard which encompasses multiple best practices across risk management theories and standards which has allowed the Trust to incorporate risk-based decision making in the governance processes, reporting, policy, values and culture.

Natalie shared the Trust Risk Management Policy which explains in detail how risk is managed across the Trust. The new approach allows the Trust to constantly prioritise its

objectives, allocate resources and supports continuous improvement. Natalie explained that the Board Assurance Framework (BAF) is the Board level Risk Register noting that there is an annual process in place to ensure the Trust Strategic Objectives are reviewed with the Board to ensure risks which may impact our ability to deliver the Trust strategy are highlighted and monitored effectively.

Natalie discussed the Top Three Risks in the Trust noting that in the Annual Governance Statement the Trust is required to detail the top three risks. Those risks detailed in the Annual Governance Statement are as follows:

- COVID Recovery.
- Workforce Resilience / Health Wellbeing.
- Financial Regime and constraints.

### **5) Angela O'Brien – Director of Quality and Effectiveness**

Angela O'Brien attended to give assurance in relation to the production of the Trust Quality Account.

Angela advised that the Quality Account document is published on an annual basis and is a public document. The Account provides a retrospective look at quality performance from the previous year and describes the commitment to public stakeholders on how the Trust will improve. The document has input from the Governors, Healthwatch and the local Councils. Goals and aims will be set to achieve in the forthcoming year. The Department of Health and Social Care and NHS England provide the prescribed content for the Quality Account. Previously there was a requirement that the Trust took assurance from an external provider for certain mandated indicators. Angela confirmed that the Governors have, in previous years, been asked to identify one indicator to include in the external validation exercise.

Angela advised that for the past eight years, external companies such as Mazars LLP, and PwC have carried out deep dives into various indicators and confirmed that they have not found any significant omissions or inaccuracies. She explained that no significant issues were identified with regards to data quality or accuracy of the Quality Account. Previously external audit companies would ordinarily carry out validation work on-site however the requirement had been removed since early on in the COVID-19 pandemic.

Angela informed the group that the Trust has used other assurance mechanisms instead as follows:

- Assurance from the NHS Digital Data Quality Index Maturity Score.
- The Quality Team compare data received with the information from Public Health England. If there are any discrepancies this will be explored.
- Annual Data Security and Protection Clinical Coding Audit. Coding of inpatient activity demonstrated an excellent level of attainment and satisfies the requirements of the Data Security and Protection Toolkit Assessment.
- The Trust exceeded national standards on data quality and training related to its clinical coding accuracy.
- Hospital Episode Statistics (HES) data also provides the Trust with assurance on data quality and consistency.

Angela confirmed that the data for the past two years has been consistent, and it is possible that next year will return to a requirement to obtain external assurance from the auditors.

### **3. RECOMMENDATION**

The Council of Governors are asked to note the contents of this report.

**Report of Eric Valentine  
Working Group Chair  
18 August 2022**

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**COUNCIL OF GOVERNORS**

Date of meeting	18 August 2022						
Title	People, Engagement and Membership (PEM) Working Group Report						
Report of	Judy Carrick – Chair of the PEM Working Group						
Prepared by	Judy Carrick – Chair of the PEM Working Group						
Status of Report	Public	Private			Internal		
	<input checked="" type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>		
Purpose of Report	For Decision		For Assurance		For Information		
	<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		
Summary	The content of this report outlines the activities undertaken by the working group.						
Recommendation	The Council of Governors are asked to receive the report.						
Links to Strategic Objectives	Patients – Putting patients at the heart of everything we do. Providing care of the highest standard focusing on safety and quality.						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Impact detail	Outlined within the report.						
Reports previously	Regular reports on the work of this Working Group are provided to the Council of Governors.						



## **PEOPLE, ENGAGEMENT AND MEMBERSHIP (PEM) WORKING GROUP REPORT**

### **EXECUTIVE SUMMARY**

This report provides an update to the Council of Governors on the ongoing work of the People, Engagement and Membership (PEM) Working Group since the last meeting of the Council of Governors on 16 June 2022.

## PEOPLE, ENGAGEMENT AND MEMBERSHIP (PEM) WORKING GROUP REPORT

### 1. INTRODUCTION

The People, Engagement and Membership (PEM) Working Group (WG) is tasked with increasing and diversifying Trust membership, as well as engaging and communicating with members. The Group is aligned to the Trust People Committee and engages with the Trust Communications Team to promote e.g. membership engagement.

### 2. GROUP ACTIVITIES

PEM WG activities include membership events and newsletters, contributions to Dame Jackie's Blog and to other Trust communications. We meet with community and Trust groups in order to engage a broader membership and work with the Council of Governors to increase awareness of the role of the Governor and the benefits of Trust membership. We are supported in these activities by some of the Trust Non-Executive Directors (NEDs), the Communications Team and the Equality, Diversity and Inclusion (EDI) champions across the Trust.

### 3. ONGOING AREAS OF FOCUS

#### 3.1 Communication

- a. The PEM WG arranged for the Lead Governor to appear on Radio Tyneside (hospital radio) for an interview highlighting the role of the Governor and the benefits of membership.
- b. The PEM WG has set up a Task and Finish Group to develop a social media strategy for discussion with the Communications Team.
- c. The PEM WG was visited by representatives from the Trust Young Persons Advisory Group (YPAG) to discuss strategies for increasing the number of 16-19-year-old members of the Trust. Since this meeting the Trust has received eight new members aged between 16-19 years old.
- d. The PEM WG is exploring the possibility of holding a new hybrid type of event, a members and public meeting, to discuss engagement methods/activities. The discussion is still at an early stage amongst Group members and requires discussing in more detail with the Trust to explore feasibility.
- e. The PEM WG has arranged for membership materials to be placed on 'Information Now' which is a website with information for people in Newcastle upon Tyne.
- f. We have compiled our summer update for Dame Jackie's blog and hope to use some of it in other publications as well.

### **3.2 Membership**

- a. Representatives from the PEM WG set up a table outside the Medicinema at the Royal Victoria Infirmary (RVI) to distribute membership materials and to speak with visitors.
- b. The PEM WG facilitated/met with key leaders at Newcastle College to start further engagement with prospective 16–19-year-old members. Further meetings are planned with college leads and the universities. We have also met with the Chaplaincy team to increase diversity and to support us with their contacts in Further Education and Higher Education.
- c. The PEM WG has delivered a lunchtime membership event on Sustainable Healthcare in Newcastle (Shine) at the RVI. We included the option for questions to be sent in advance and there will be a Governors' table to encourage two-way communication with our members. A survey will follow.
- d. The PEM WG has begun work on the content of its first newsletter. We have solicited paragraphs from Governors answering the questions 'why did you become a Governor' and 'what do you hope to achieve', alongside a brief biography.
- e. The PEM WG has secured the support of the Quality of Patient Experience (QPE) Working Group in asking its members to carry membership materials on visits from September for distribution only when and as deemed suitable, for example with family members in Outpatient facilities.
- f. The PEM WG has arranged for membership materials to be part of the "first day pack" for new medical trainees on rotation from August. We hope they will want to engage more deeply with the Trust while training here; some will go on to become staff in the future.

### **4. RECOMMENDATIONS**

The PEM Group asks the Council of Governors to receive this report.

**Report of Judy Carrick  
Chair of the PEM Working Group  
July 2022**

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## COUNCIL OF GOVERNORS

Date of meeting	18 August 2022						
Title	Nominations Committee Update						
Report of	Professor Sir John Burn, Nominations Committee Chair						
Prepared by	Kelly Jupp, Trust Secretary						
Status of Report	Public	Private	Internal				
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Purpose of Report	For Decision	For Assurance	For Information				
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
Summary	The content of this report outlines a summary of the Nominations Committee business since the previous Council meeting held in June 2022.						
Recommendation	<p>The Council of Governors are asked to note the contents of this report, and specifically:</p> <ul style="list-style-type: none"> <li>i) To note the outputs of the Chair and Non-Executive Director (NED) appraisal exercise for 2021/22</li> <li>ii) To endorse the proposed corporate objectives and the personal objectives for the Chair and NED for 2022/23 as included in Appendix A; and</li> <li>iii) To approve the reappointment of Professor Kath McCourt for a period of 1 year from 1 December 2022 and Mr Jonathan Jowett for a period of 1 year from 1 November 2022.</li> </ul>						
Links to Strategic Objectives	<p>Learning and continuous improvement is embedded across the organisation. Our partnerships provide added value in all that we do. We maintain financial strength and stability.</p>						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Impact detail	Detailed within the report.						
Reports previously considered by	Regular report.						

## NOMINATIONS COMMITTEE UPDATE

### EXECUTIVE SUMMARY

The content of this report outlines a summary of the Nominations Committee business since the previous Council meeting held in June 2022.

The Committee last met on 29 July 2022. The following matters were considered:

- The outputs of the Chair and Non-Executive Director (NED) appraisal exercise for 2021/22, including proposed objectives for 2022/23;
- The proposed reappointment of two NEDs;
- A debrief on the last NED recruitment exercise; and
- The Chair Remuneration Review (confidential report included within the Private Council of Governors meeting papers).

This report provides further detail on the matters listed above.

The Council of Governors are asked to note the contents of this report, and specifically:

- i) To note the outputs of the Chair and Non-Executive Director (NED) appraisal exercise for 2021/22
- ii) To endorse the proposed corporate objectives and the personal objectives for the Chair and NED for 2022/23 as included in Appendix A; and
- iii) To approve the reappointment of Professor Kath McCourt for a period of 1 year from 1 December 2022 and Mr Jonathan Jowett for a period of 1 year from 1 November 2022.

## NOMINATIONS COMMITTEE UPDATE

### 1. COMMITTEE MEETINGS

Committee members last met on 29 July 2022 to discuss:

- The outputs of the Chair and Non-Executive Director (NED) appraisal exercise for 2021/22, including proposed objectives for 2022/23;
- The proposed reappointment of two NEDs;
- A debrief on the last NED recruitment exercise; and
- The Chair Remuneration Review (confidential report included within the Private Council of Governors meeting papers).

### 2. CHAIR & NED APPRAISALS 2021/22 & OBJECTIVES 2022/23

All Chair and NED appraisal meetings have now been undertaken with positive performance noted. The Committee discussed the appraisal reports from the Trust Chairman and Senior Independent Director at their last meeting in July.

The proposed Chair and NED objectives were considered by the Committee. Further minor refinements have been made following Committee feedback, feedback from Dame Jackie as Trust Chief Executive Officer (CEO) and from the Chair/NEDs themselves. The proposed final objectives for Council endorsement are included in Appendix A to this report.

### 3. NED REAPPOINTMENT

Committee members considered the re-appointment of two Trust Non-Executive Directors, Professor Kath McCourt and Mr Jonathan Jowett, whose terms of office are due to conclude in the final quarter of the 2022 calendar year.

Committee members adhered to the Trust NED Succession Policy and gave consideration as to the current skillset of the Trust Board.

The Committee agreed to support the Chair recommendation to reappoint:

- i) Professor Kath McCourt from 1st December 2022 for one year (being the second year of up to a maximum of three years subject to annual renewal); and
- ii) Mr Jonathan Jowett from 1 November 2022 for one year (being the first year of up to a maximum of three years subject to annual renewal).

### 4. NED RECRUITMENT DEBRIEF

Committee members agreed that the recruitment process had run smoothly, with no significant issues to report to the Council of Governors.

### 5. CHAIR REMUNERATION REVIEW

Following feedback provided at the Council of Governors meeting in June, Nomination Committee members revisited the Chair Remuneration Review and an updated confidential report has been included within the Private session of the Governors meeting for consideration.

## **6. NED UPDATE**

Governors will recall that Mrs Liz Bromley commenced formally as a Trust NED on 1 June 2022 for her first three-year term of office. Mrs Bromley has attended a number of induction meetings with key individuals and is scheduled to attend the Trust corporate induction and a local induction during August 2022.

A meeting has been scheduled with Mrs Bromley on 15 August 2022 to discuss and agree objectives for the remainder of the year. It was agreed previously that objectives would not be set until circa 3 months from appointment to allow Mrs Bromley to build her knowledge of the Trust and identify any areas for development/further training. The objectives for any new NED in the first year are generally focussed on building knowledge of Newcastle Hospitals and observing each of the Finance, Quality and People Committee meetings once across the course of the first year.

## **7. NEW COMMITTEE MEMBER**

The Committee welcomed Genna Bulley, Staff Governor, as a new Committee member, to her first Committee meeting in July.

## **8. FUTURE COMMITTEE BUSINESS**

The Committee will next meet on 14 November 2022 to consider the following:

- The Committee Terms of Reference and Schedule of Business; and
- A review of the NEDs position/succession planning arrangements.

## **9. RECOMMENDATIONS**

The Council of Governors are asked to note the contents of this report, and specifically:

- i) To note the outputs of the Chair and Non-Executive Director (NED) appraisal exercise for 2021/22
- ii) To endorse the proposed corporate objectives and the personal objectives for the Chair and NED for 2022/23 as included in Appendix A; and
- iii) To approve the reappointment of Professor Kath McCourt for a period of 1 year from 1 December 2022 and Mr Jonathan Jowett for a period of 1 year from 1 November 2022.



**Report of Kelly Jupp  
Trust Secretary  
11 August 2022**

**Appendix A – Chair and NED objectives**

**Proposed Corporate Objectives 2022/23:**

1. To support the evolving Integrated Care System and establishing robust networks.

To be evidenced through discussion in Board meetings, documented in the minutes of the meetings, and through the establishment of networks.

2. To oversee, and seek assurance on, the delivery of the elective recovery, productivity and efficiency (including both cost improvement and continuous productivity improvement more broadly) and the quality improvement programmes.

To be evidenced through discussion in Board and Committee meetings, documented in the minutes of the meetings.

3. To oversee the Trust preparations for future Care Quality Commission/NHS Improvement/NHS England Well-led inspections.

To be evidenced through preparation activity undertaken and discussed during annual appraisals.

4. To continue to hold monthly Spotlight on Services visits, and increasingly undertake physical visits, to ensure regular engagement with staff in a range of areas and services across the Trust, ensuring any matters for escalation are raised appropriately.

To be evidenced through updates included within the Chairman’s report to the Trust Board.

Consideration will be given to exploring closer alignment of the programme with the activities of the Governors Quality of Patient Experience Working Group. *[NB rolled over from prior year but updated to reference physical visits]*

**Proposed Personal Chair and NED Objectives 2022/23:**

**PROFESSOR SIR JOHN BURN - PROPOSED 2022/2023 OBJECTIVES**

1. Work closely with the Chief Executive Officer (CEO) to provide strategic direction/input into the Executive Team process for preparing the Trust Board, and in particular the NEDs, for a future Care Quality Commission (CQC) inspection. Contribution to be measured by feedback from the NEDs and CEO, as well as inspection report content.

## Agenda item 9

2. Review/enhance engagement between the Chair and NEDs to ensure the effectiveness of interactions, specifically returning to in person Chair/NED 1 to 1 meetings at least six monthly. Contribution to be measured by feedback from NEDs.
3. Build relationships across the North East and North Cumbria Integrated Care System (ICS), including facilitating NED introductions to key ICS representations and strengthening networks. Contribution to be measured by feedback from NEDs.
4. Continue to build positive working relationships with Governors and find new/different ways to engage with Governors to further strengthen the relationship between Board members and Governors. Contribution to be measured by feedback from Governors.
5. Remain cognisant of the corporate objectives and Chair and contribute to all Board meetings and Board development workshops. To be measured by contributions made and attendance at such meetings.

**MR JONATHAN JOWETT - PROPOSED 2022/2023 OBJECTIVES**

1. Continue to chair the People Committee and ensure that the Committee receives the required assurances in relation to the Trust workforce. In conjunction with the Trust Chair, to further develop effective working relationships with the Lead Governor and Chair of the People, Engagement & Membership (PEM) Working Group. To be measured through contributions to agenda setting and review of Committee information, as well as feedback from the Lead Governor and PEM Chair.
2. Continue to chair the Appointments and Remuneration Committee and ensure remuneration for the senior managers and executives is appropriate and in line with national recommendations.
3. Continue to be an active member of the Audit Committee and the Nominations Committee through regular attendance and contribution at meetings.
4. Continue to attend Spotlight on Service events, in person where possible, and attend the Council of Governors whenever possible.
5. As Senior Independent Director, support the Chair in ensuring regular effective communications between the Trust Secretary, the Lead Governor, and the NEDs, holding more formal six-monthly review meetings with the Trust Secretary & Lead Governor, and informally from time to time.
6. Remain cognisant of the corporate objectives and aim to attend and contribute to all Board meetings and Board development workshops. To be measured by contributions made and attendance at such meetings.

**MR BILL MACLEOD - PROPOSED 2022/2023 OBJECTIVES**

1. Chair the Audit Committee, ensuring that the Committee operates in accordance with its Terms of Reference and works effectively, including receiving reports from the other Committee Chairs. Contribution to be assessed by feedback to Board, completion of the Annual Report of the Committee and report of other Committee members.
2. Continue as an effective member of the Finance and Appointments and Remuneration Committees by providing constructive challenge and sharing expertise as appropriate. Contribution to be measured by record of attendances and evidenced in the meeting minutes.
3. Continue as a member of the Strategic Oversight Group for the Day Treatment Centre to provide ongoing advice, support and constructive challenge.
4. Become a member of the Charity Committee while continuing to attend the Appointments and Remuneration and Finance Committees.
5. Support the Chair and Senior Independent Director in ensuring regular effective communications between the Corporate Governance Team, Governors, the Chair and NEDs.
6. Remain cognisant of the corporate objectives and aim to attend and contribute to all Board meetings and Board development workshops. To be measured by contributions made and attendance at such meetings.

#### **PROFESSOR KATH MCCOURT CBE FRCN - PROPOSED OBJECTIVES 2022/2023**

1. Act as Deputy Chair of the Board, taking responsibility for any activities for which the Chair is unavailable. Contribution to be measured by updates in the Chair Board report and feedback from Board members.
2. Continue as a member of the Quality committee. Contribution to be measured by record of the meetings.
3. Continue as a member of the Appointments and Remuneration Committee and the People Committee, providing constructive input. Contribution to be measured by attendance at meetings.
4. Continue as NED responsible for oversight of the Trust compliance with the recommendations of the Ockenden Report. Contribution to be measured by routine updates provided to the Trust Board, regular walkabouts within Maternity Services and discussion at the Quality Committee.
5. Continue to chair the Strategic Oversight Group for Cardiac Surgery. Contribution to be measured by reports to Board and feedback from executive colleagues.

6. Support the Chair and Senior Independent Director in ensuring regular effective communications between the Corporate Governance Team, Governors, the Chair and NEDs.
7. Remain cognisant of the corporate objectives and aim to attend and contribute to all Board meetings and Board development workshops. To be measured by contributions made and attendance at such meetings.

#### **MR STEVEN MORGAN - PROPOSED 2022/2023 OBJECTIVES**

1. Continue to chair the Finance Committee and ensure that the Committee receives the required assurances in relation to the Trust financial sustainability. To be measured by the content of Committee meeting agendas and papers
2. Participate in the induction programme for the new Chief Finance Officer (CFO) Jackie Bilcliff and conduct at least three one to one meetings during the year as Chair of the Finance Committee.
3. Continue to lead the DTC SOG to ensure effective strategic development of opportunities, and as a member of the Audit Committee reporting on Finance Committee activities. Contribution to be assessed by attendance record and feedback from the Chair.
4. Continue to take part in at least four face to face or virtual meetings with different services as part of the NED leadership Spotlight on Services programme.
5. Maintain a watching brief on developments in North Cumbria, particularly in relation to health service delivery, to ensure consideration is given as a resident of North Cumbria to the delivery of safe and sustainable services. Join with the Chair to develop a closer interaction with the Cumbria Infirmary Board. Contribution to be assessed by myself as Chairman.
6. Remain cognisant of the corporate objectives and aim to attend and contribute to all Board meetings and Board development workshops. To be measured by contributions made and attendance at such meetings.

#### **MR GRAEME CHAPMAN - PROPOSED 2022/2023 OBJECTIVES**

1. Remain cognisant of the corporate objectives and aim to attend and contribute to all Board meetings and Board development workshops. To be measured by contributions made and attendance at such meetings.
2. To continue to Chair Quality Committee to ensure that the Committee receives the required assurances in relation to quality of care. Contribution to be measured by meeting attendance, completion of the Annual Report of the Committee and minuted records of engagement.

3. Represent Quality Committee input into the Audit Committee and attend the Finance Committee as a NED member. Contribution to be measured by attendance at meetings.
4. Continue to be an active participant in the Charity Committee, contributing effectively to the refresh of charity governance arrangements. Contribution to be measured through attendance and feedback from the Charity Committee members.
5. Chair the Trust Commercial Strategy Group (CSG) and continue to interact with the Commercial Enterprise Unit team to share specialist knowledge in the areas of informatics and artificial intelligence. Contribution to be measured by Executive Team feedback and from the Executive Director of Business, Development & Enterprise as Executive Lead for the CSG.
6. Support the Chair and Senior Independent Director in ensuring regular effective communications between the Corporate Governance Team, Governors, the Chair and NEDs.
7. Provide NED oversight and constructive challenge to the Trust digital strategy and associated implementation programme through contributing own expertise. To be measured by contributions made.

#### **MS JILL BAKER - PROPOSED 2022/2023 OBJECTIVES**

1. Remain cognisant of the corporate objectives and aim to attend and contribute to all Board meetings and Board development workshops. To be measured by contributions made and attendance at such meetings.
2. Continue to chair the Charity Committee and support the Charity Director with the following aims:
  - Complete the governance review and present at a future Board Development session on proposed changes to the governance arrangements/structure.
  - Review current brands within the Newcastle Hospitals Charity to identify those which should be retained and those where alternative options would be more appropriate.
  - Review the more than 200 small funds embedded in the Charity to develop a more effective and equitable use of resources.
  - Coordinate, through the Charity Committee a review of the relationship with major national brands to ensure effective interaction.
3. Attend where possible Spotlight in Service events to maintain and develop an understanding of the functions of the Trust. To be measured by attendance record.
4. Support the Chair and Senior Independent Director in ensuring regular effective communications between the Corporate Governance Team, Governors, the Chair and NEDs.

5. Continue to be the Lead NED for Palliative Care, acting as an independent Board level champion to aid Board understanding of learning, challenges and successes regarding palliative care.
6. Continue to provide NED independent oversight and support the wider Trust work on preventing/addressing health inequalities and support, where appropriate, the work of e.g. Collaborative Newcastle in this regard. Contribution to be assessed through discussions at Trust Board meetings/evidenced in Board meeting minutes.

#### **MS STEPHANIE EDUSEI - PROPOSED 2022/2023 OBJECTIVES**

1. Remain cognisant of the corporate objectives and aim to attend and contribute to all Board meetings and Board development workshops. To be measured by contributions made and attendance at such meetings.
2. Take responsibility for being the NED Wellbeing Guardian after briefing by the present responsible NED, Kath McCourt. Contribution to be measured by contributions to Board and People committee minutes.
3. Take responsibility for NED representation of Equality, Diversity and Inclusion (EDI), by acting as an independent voice and Board level champion for EDI. Contribution to be measured by feedback from the associated staff network groups and meeting contributions.
4. Become an active member of the People Committee through regular attendance and contribution at meetings.

#### **MR DAVID BURN - PROPOSED 2022/2023 OBJECTIVES**

1. Remain cognisant of the corporate objectives, and attend and contribute to all Board meetings, both Public and Private and all Board Development Sessions where feasible in order to continue to contribute expertise and challenge as a clinical academic and system leader. Contribution to be measured by records of attendance at Board related activities.
2. Continuing from 2020/21, seek to further integrate NHIP activities into discussions around the evolving Integrated Care System. Contribution to be measured by reports from NHIP and the Integrated Care Board.
3. Explore creation of joint clinical academic posts to restore our longstanding strength in this space.

#### **MRS PAM SMITH - PROPOSED 2022/2023 OBJECTIVES**

Agenda item 9

1. Remain cognisant of the corporate objectives, and attend and contribute to all Board meetings, both Public and Private and all Board Development Sessions where feasible in order to continue to contribute expertise and challenge as a system leader. Contribution to be measured by records of attendance at Board related activities.
2. Continue to be a member of the Joint Executive Group involving the Trust CEO and supporting efforts to integrate Trust and local Council ambitions in meeting the broader healthcare needs of the population through the Collaborative Newcastle Project.
3. Alert the Trust Board to developments of mutual interest such as changes in transport infrastructure.
4. Contribute to the Healthy Ageing agenda by liaising with the Trust on future council initiatives in this area to encourage alignment with Trust activities.



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## COUNCIL OF GOVERNORS

Date of meeting	18 August 2022						
Title	Update from Committee Chairs						
Report of	Non-Executive Director Committee Chairs						
Prepared by	Kelly Jupp, Trust Secretary Lauren Brotherton, Governor and Membership Engagement Officer						
Status of Report	Public	Private	Internal				
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
Purpose of Report	For Decision	For Assurance	For Information				
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
Summary	<p>The report includes updates on the work of the following Trust Committees that have taken place since the last meeting of the Trust's Board on 31 May 2022:</p> <ul style="list-style-type: none"> <li>• People Committee – 23 June 2022</li> <li>• Finance Committee – 17 June 2022 (Extraordinary) and 27 July 2022</li> <li>• Audit Committee – 20 June 2022 (Extraordinary) and 26 July 2022</li> <li>• Charity Committee – 18 July 2022 (Extraordinary)</li> <li>• Quality Committee – 19 July 2022</li> <li>• Board of Directors – 21 June 2022 (Extraordinary)</li> </ul>						
Recommendation	The Council of Governors are asked to (i) receive the update and (ii) note the contents.						
Links to Strategic Objectives	Links to all.						
Impact (please mark as appropriate)	Quality	Legal	Finance	Human Resources	Equality & Diversity	Reputation	Sustainability
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Impact detail	Impacts on those highlighted at a strategic level.						
Reports previously considered by	Regular standing agenda item. This report was presented to the Trust Board on 28 July 2022.						

## UPDATE FROM COMMITTEE CHAIRS

### EXECUTIVE SUMMARY

This report provides an update to the Council on the ongoing work of the Trust's Committees for those meetings that have taken place since the last meeting of the Council of Governors in June 2022.

## UPDATE FROM COMMITTEE CHAIRS

### 1. PEOPLE COMMITTEE

A formal meeting of the People Committee took place on 23 June 2022. During the meeting, the main areas of discussion to note were:

- An update on the Integrated COVID Hub North East (ICHNE) contract was provided by the Head of Human Resources and the Chief Operating Officer provided an update on the Vaccination Hub.
- A detailed update was received from the Associate Director of Education, Training and Workforce Development in relation to Statutory and Mandatory Training and Apprenticeships.
- The Leadership Development and Talent Management Strategy was presented by the Director of HR and approved.
- The people dashboard and Trade Union Working Time Report were received and discussed in detail.
- The Committee annual report, including the review of Terms of Reference and Schedule of Business was received and ratified.
- The Committee received the Guardian of Safe Working Annual Report, the Freedom to Speak Up Guardian Annual Report and the People Risks Board Assurance Framework (BAF) quarterly report.
- A Sustainability update was received.

The next formal meeting of the Committee will take place on 16 August 2022.

### 2. FINANCE COMMITTEE

An extraordinary meeting of the Finance Committee took place on 17 June 2022. During the meeting, the main areas of discussion included:

- The Interim Assistant Finance Director explained the rationale for conducting earlier financial reporting from 2022/23 onwards.
- The Annual Accounts 2021/22 including the Trust Accounts Consolidation (TAC) schedules were received and approved.
- The Terms of Reference and Schedule of Business were received and ratified.

A formal meeting of the Finance Committee took place on 27 July 2022. During the meeting, the main areas of discussion included:

- An update on the financial plan sign off for 2022/23.
- The month 3 finance report including emerging risks regarding inflation and the removal of non-recurrent spend.
- An update on the Cost Improvement Programme (CIP) delivery and the activity and recovery programme.
- The Director of Estates provided an update on the capital strategy.
- The Month 3 2022/23 performance and delivery report was received.
- The Finance Director provided an update on the National Cost Collection Exercise.

The next formal meeting of the Committee will take place on 28 September 2022.

### **3. AUDIT COMMITTEE**

An extraordinary meeting of the Audit Committee took place on 20 June 2022. During the meeting, the main areas of discussion to note were:

- Approval of the Annual Report and Accounts 2021/22 including the Annual Governance Statement and Trust Accounts Consolidation (TAC).
- AuditOne provided a progress report on the Trust's Internal Audit Programme and submitted the Draft Head of Internal Audit Opinion for 2021/22.
- Mazars LLP provided a progress report including the Trust ISA260 Audit Completion Report and Audit Opinion on the Annual Report and Accounts 2021/22.

A formal meeting of the Audit Committee took place on 26 July 2022. During the meeting, the main areas of discussion included:

- Committee Chairs provided updates relating to risk and assurance in relation to their specific areas of focus.
- The Head of Corporate Risk and Assurance presented the Board Assurance Framework (BAF) and the Standards of Business Conduct Annual Report including the Chairman Fit and Proper Persons Statement and the annual review of the register of gifts and hospitality.
- An update was received on the clinical audit process.
- The Finance Director provided an update on the review of performance of Internal Audit, External Audit and Counter Fraud.
- A Charity update was received including the Charity Annual Accounts and Charity Policy and Scheme of Delegation.
- AuditOne provided a progress report on the Trust's Internal Audit programme, the Internal Audit Operational Plan, and the Internal Audit Charter for 2022/23.
- Counter Fraud provided an update report and the Annual Anti-Fraud Report 2021/22.
- Mazars LLP provided an update on the Trust's Auditor's Annual Report.
- The Fit and Proper Persons Policy and Modern Slavery and Human Trafficking Act Annual Statement were submitted for approval.
- The Committee received a number of reports including:
  - Review of schedule of approval of single tender action and breaches and waivers exception report;
  - Review of debtors and creditors balances;
  - Review of schedule of losses and compensation;
  - Information Governance Update; and
  - Information Management & Technology Update.

The next formal meeting of the Committee will take place on 25 October 2022.

#### **4. CHARITY COMMITTEE**

An extraordinary meeting of the Charity Committee took place on 18 July 2022. The meeting was convened primarily to discuss a number of grant applications in advance of the next formal meeting in September.

The committee received an overview of the Charity's grant making approach and a summary of grants up to £25,000 that had been approved since the last meeting of the committee in May (these totalled £102,000).

The committee approved applications which totalled £396,981 and included the following:

- A neonatal MRI compatible transport ventilator.
- A cardiothoracic data development project.
- An uplift to a previously made grant to the Northern Region Functional Electrical Stimulation service.
- An uplift to a previously made grant for research into the clinical benefit of circulating tumour cell analyses for oesophageal adenocarcinoma patients.
- Support for Coping with Cancer North East's acupuncture and counselling service for NCCC patients.
- A Newcastle University study into socioeconomic inequalities in lung cancer treatment.
- Young Persons Advisory Group North East (YPAGne) and Engagement co-ordinator.

The next formal meeting of the Committee will take place on 2 September 2022.

#### **5. QUALITY COMMITTEE**

A formal meeting of the Quality Committee took place on 19 July 2022. During the meeting, the main areas of discussion to note were:

- An update on the Ockenden report and Assurance visit was provided.
- The Director of Quality and Effectiveness provided an update on the Trust's response and plan in relation to the National Patient Safety Strategy.
- The integrated quality and performance reports were received and discussed.
- A Royal College reviews update was provided.
- An update was provided on the Quality Strategy refresh.
- The Committee considered a number of reports including:
  - The Clinical Outcomes & Effectiveness Group;
  - Clinical Negligence Scheme for Trusts (CNST);
  - CQC Action Plan;
  - Health and Safety Annual Report; and
  - The Committee Annual Report 2021/22 including the schedule of business and review of the Committee Terms of Reference.
- An update was provided on the leadership walkabouts / spotlight on services.
- The Patient Safety Group and Clinical Outcomes and Effectiveness Group provided their annual reports.

Agenda item 10.1

- The Clinical Outcomes and Effectiveness Group provided an update on their activity and progress.

The next formal meeting of the Committee will take place on 20 September 2022.

## **6. PRIVATE BOARD OF DIRECTORS**

An extraordinary private meeting of the Board of Directors took place on 21 June 2022. During the meeting, the main areas of discussion to note were:

- Approval of the:
  - Annual Report 2021/22; and
  - Annual Accounts 2021/22.

## **7. RECOMMENDATIONS**

The Board of Directors is asked to (i) receive the update and (ii) note the contents.

**Report of Kelly Jupp, Trust Secretary**  
**Lauren Brotherton, Governor and Membership Engagement Officer**  
**21 July 2022**

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