

Council of Governors' Meeting: Public Session Thursday 17 August 2023 1445 h

Venue: Training rooms 3 & 4, Education Centre, Freeman Hospital (no dial in available)

Agenda

Item	Lead	Paper	Timing
Business items			14:45 – 15:00
1	Apologies for absence and declarations of interest	Kath McCourt	Verbal
2	Minutes of the meeting held on 15 June 2023 and Matters arising	Kath McCourt	Attached
3	Meeting action log	Kath McCourt	Verbal
4	Chair's report	Kath McCourt	Attached
5	Chief Executive's report	Dame Jackie Daniel	Attached
Items for discussion			
6	Update on Paediatrics	Stella Wilson	Presentation 15:00 – 15:15
7	Staff Survey results and People Plan Development	Christine Brereton	Presentation 15:15 – 15:30
Items to approve			15:30 – 15:35
8	Nominations Committee Report	Kelly Jupp	Attached
Governor reports			15:35 – 15:50
9.1	Lead Governor Update	Pam Yanez	Attached
9.2	Quality of Patient Experience (QPE) Working Group (WG)	Poonam Singh	Attached
9.3	Business and Development (B&D) WG	Eric Valentine	Attached
9.4	People, Engagement and Membership (PEM) WG	Judy Carrick	Attached
Items to receive and any other business			15:50 – 16:00
10.1	Integrated Board Report including Quality, People & Finance	Angela O'Brien / Jackie Bilcliff	Attached
10.2	Performance Report	Vicky McFarlane-Reid	Attached
10.3	Committee Chairs Report	Committee Chairs	Attached
10.4	NED Activity Report	Kath McCourt	Attached
10.5	Date and time of next meeting: Formal Meeting – Thursday 7 December 2023, 14:45 – 16:00	Kath McCourt	Verbal

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

Professor Kath McCourt, Vice Chair

Dame Jackie Daniel, Chief Executive

Dr Vicky McFarlane-Reid, Director for Business, Development and Enterprise

Mrs Jackie Bilcliff, Chief Finance Officer

Mrs Christine Brereton, Chief People Officer

Mrs Angela O'Brien, Director of Quality and Effectiveness

Stella Wilson, Director of Operations

Mrs Kelly Jupp, Trust Secretary

Mrs Pam Yanez, Lead Governor

Mrs Poonam Singh, Staff Governor and Chair of the QPE Working Group

Dr Eric Valentine, Public Governor and Chair of the B&D Working Group

Mrs Judy Carrick, Public Governor and Chair of the PEM Working Group

DRAFT COUNCIL OF GOVERNORS' MEETING: PUBLIC MEETING MINUTES OF THE MEETING HELD 15 JUNE 2023

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: Professor Kath McCourt, Non-Executive Director (NED) *(from 03:03pm)*
Mr Bill Macleod, NED
Mr Graeme Chapman, NED
Mrs Jill Baker, NED
Miss Christine Smith, NED
Mrs Christine Brereton, Chief People Officer (CPO)
Dr Victoria McFarlane-Reid, Executive Director of Business, Development and Enterprise (EDBDE)
Mrs Jackie Bilcliff, Chief Finance Officer (CFO)
Mrs Angela O'Brien, Director of Quality and Effectiveness (DQE)
Mr Andrew Welch, Medical Director/Deputy Chief Executive Officer (MD/DCEO)
Ms Maurya Cushlow, Executive Chief Nurse (ECN)
Mrs Kelly Jupp, Trust Secretary (TS)

Secretary: Abigail Martin, Governor and Membership Engagement Officer

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

The Chairman welcomed all to the meeting.

23/07 BUSINESS ITEMS:

i) Apologies for Absence and Declarations of Interest

Apologies for absence were received from Governors Aileen Fitzgerald, Kelly Gribbon, David Black, Shashir Pobbathi, Michael Warner. For the Board, apologies were received from Non-Executive Directors Jonathan Jowett, and Liz Bromley, Associate Non-Executive Director, David Burn, Dame J Daniel, Chief Executive Officer, Mr M Wilson, Chief Operating Officer and Mrs C Docking, Assistant Chief Executive.

There were no declarations of interest made at this time.

ii) Minutes of the Meeting held on 16 February 2023 and Matters Arising

The minutes of the meeting held on 16 February 2023 were agreed to be a true record of the meeting, subject to an amendment to record Ms Baker as being present.

It was resolved: to **approve** the minutes, subject to the above amendment.

iii) **Meeting Action Log**

The action log position was **received**, with no outstanding actions.

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

iv) **Chair's report**

The Chairman presented the report, highlighting the following points:

- Participation in the judging panel for the Children's Garden Design Competition.
- Attendance at the 10 in 10 Celebration Event to recognise Newcastle College University Centre reaching the milestone of 10,000 graduates in 10 years.
- Jill Goodfellow, Nurse Practitioner, was presented with a People at our Hearts Award. Jill was nominated as a member of staff who best illustrates providing healthcare at its very best with the people at our heart.

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

v) **Chief Executive's report**

The MD/DCEO presented the report, noting the following points:

- The positive improvement in the reduction of the numbers of long-waiting patients within the Trust. The Day Treatment Centre at the Freeman Hospital has been very successful in helping to reduce long-waiting patients, primarily surgical patients, and plans are in place to use the facility to its full capacity in the future.
- In addition to addressing the long waiting patients as prescribed in the national targets, Newcastle Hospitals was also focussed on improving cancer performance.
- The activity and finance plans for 2023/24 had been agreed, which include a challenging cost reduction requirement.
- Periods of industrial action had continued since the last Council meeting, with some of the Trusts Junior Doctors participating in a recent 3-day strike. During this time, the focus of the Trust remained on reducing the risk of any incidents and maintaining patient safety.

[Professor McCourt joined the meeting at 03:03pm]

- The introduction of many digital improvements such as the Care Coordination System (CCS) to improve theatre scheduling and productivity. The MD/DCEO highlighted the use in Urology, where it has been implemented to maximise efficacy of theatre provision and reduce waiting times with great success.

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- Work continued on the new Clinical Board structure, the MD/DCEO advised that all of the Clinical Board Chairs and Directors of Operations had been appointed, with interviews scheduled for the Heads of Nursing posts next week.
- The publication of the Care Quality Commission's (CQC's) report into aspects of the Trust's maternity services. Whilst some of the report findings were noted to be disappointing, a key focus was on supporting the staff within the department and making the required improvements. Staffing levels had increased over recent months.
- Gratitude was expressed to Mr Graham King, Chief Information Officer who was leaving the Trust to move on to a new role.
- Awards and recognitions for staff members were highlighted in the report.

Dr Dearges-Chantler sought clarification with regards to the Newcastle Change Board. The EDBDE confirmed that this will bring together the Programme Management Office and Newcastle Improvement teams to focus on medium and longer term change programmes as well as the Cost Improvement Programme (CIP) for 2023/24.

Mr Black asked about the closure of the West Road Urgent Treatment Centre (UTC) due to staffing issues and whether this should be re-opened to contribute towards the CIP. He also sought clarification with regards to staffing issues in podiatry noting that it was his understanding that only patients who are bedridden or on oxygen are currently receiving at home care. The MD/DCEO confirmed that there would be further discussions with the aim of modifying the UTC provision to associate more centres with Emergency Departments (EDs) to enable more patients to be seen in UTCs. Location and accessibility will also be considered.

Dr Dearges-Chantler queried if a UTC could be next to the ED to which the MD/DCEO indicated that this would be preferred.

In response to Mr Black's earlier question, the ECN added that the podiatry service is experiencing challenges due to a high vacancy rate, with podiatrists often moving on to work in private organisations with more competitive remuneration packages and that because of this the scope for patients to be seen at home has been reduced significantly. Currently, the target is that all patients who can travel to the hospital should be coming to hospital for appointments. The ECN agreed to look into Mr Black's concerns and to feedback through the Corporate Governance Team **[ACTION01]**.

Mrs Yanez advised that she had attended an ICS consultation on urgent and emergency care and asked if representatives from the Trust were present/involved in the discussions. The EDBDE confirmed that the Trust is involved and that the events are being used to gauge feedback/explore alternatives to the existing UTC provision.

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

23/08 QUALITY & PATIENT SAFETY; PERFORMANCE & DELIVERY

iv) Integrated Board Report including Quality, People & Finance

The DQE presented the report, highlighting the following:

Agenda item 2

- The Trust continues to see high bed occupancy levels throughout April 2023. When the bed occupancy levels rise over 85%, this can impact quality of care, particularly with regards to infection control. It was noted that nationally bed occupancy levels are at 92%.
- There were two periods of Industrial Action in April and that this had an impact on activity levels, however infection control and incidences of pressure ulcers were seen to remain stable with only a very minor increase in falls reported during the period.
- The Trusts mortality rates are reassuring and are the lowest in the region.

Mrs Yanez queried the use of the term 'Indirect Maternal Death' to which the DQE explained that an Indirect Maternal Death relates to the death of a woman who dies during pregnancy or within one year of conception for a reason not directly related to the pregnancy. There were noted to be 4 cases in the last year.

The CFO provided a short finance update and reported that the financial plan for 2023/24 has now been set. The CFO highlighted that the targets are challenging and this had been discussed at the Business and Development Working Group. She indicated that all Trusts nationwide have similar targets to achieve.

Mr Hughes asked if there are any risks regarding cashflow to which the CFO advised that the Trust is in a good position with regards to cash management.

It was resolved: To receive the report.

v) Performance Report

The EBDDBE presented the report, highlighting the following:

- The End of Year position had been validated as detailed within the report, along with a summary of the targets for 2023/2024.
- Due to the Industrial Action, April had been challenging in relation to elective activity, however the Trust overachieved on the performance target of 90.2%. For the Elective Recovery Fund (ERF), the Trust has an End of Year performance target of 109%.
- Accident & Emergency (A&E) has a nationally set target of 76% for four hour waits, but the Trust has set an internal target of 85%. The national target was achieved for the month.
- Seven out of nine of the Trust's cancer targets were not met however the Faster Diagnosis Standard had been achieved for the 5th consecutive month.
- At the end of April 2023, the Trust had 21 patients who had a wait of over 104 weeks and 164 patients with a wait of over 78 weeks.
- The Trust has been placed in Tier One Oversight for Elective Recovery. This is in recognition of the challenges faced by Newcastle Hospitals for example in spinal surgery.

It was resolved: to receive the report.

23/09 DISCUSSION TOPIC

i) Introduction to Christine Smith:

Miss Christine Smith was introduced following her recent appointment as a NED.

Miss Smith introduced herself and explained that she has a special interest in finance, being a qualified accountant. She advised that she has worked in several varying finance roles for many different sized organisations, including business partnering to grow businesses, customer focussed financial services and management of commercial businesses.

Following this, Miss Smith has undertaken a number of NED roles in different sectors. She indicated that she feels that her experience of looking after customers will transition well into a patient focussed NHS organisation, and that she is experienced in cultural change.

22/10 ITEMS TO APPROVE

ii) Non-Audit Services Policy

The TS presented the Non-Audit Services Policy which has been reviewed, with minor changes proposed for approval. The changes were considered and approved at the 25 April 2023 Audit Committee meeting.

The TS sought approval for these amendments from the Council of Governors.

It was resolved: to **approve** the amendments in the Non-Audit Services policy.

23/11 GOVERNORS REPORT

i) Lead Governor Update

Mrs Yanez, Lead Governor provided the update and highlighted that she attended a meeting with the Lead Governor for Gateshead Health NHS Foundation Trust, and the recent Governor Focus Conference, which she plans to feedback to the Governors in due course.

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

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

Mrs Singh presented the report, highlighting the following:

- The QPE WG are focussed on improving quality of care within the Trust.
- They are currently undertaking ward visits in the Medicine Directorate, with a focus on Older People's Medicine. Challenges had been identified regarding availability of members to undertake Ward visits but this was being worked through.
- The Group have received presentations from several valuable speakers and receive regular updates from Tracy Scott, Head of Patient Experience and the Quality Committee.
- They are currently seeking a representative for the Patient Safety Group and invite any Governors who are interested to express their interest through the corporate office.

Mr Gibson advised that on a recent ward visit he had met two terminally ill patients who were extremely complimentary regarding the support they had received from staff and the excellent care. He asked that this be fed back to which PS agreed to share the details with the ECN for feeding back to the ward [**ACTION02**].

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

iii) Business and Development (B&D) WG

Mr Valentine presented the report, highlighting the following:

- The group has received presentations from Lisa Jordan, Associate Director of Operations, Nichola Kenny, Deputy Chief Operating Officer, Wayne Elliott, Associate Director Commercial Enterprise, Bill MacLeod, NED, and Jackie Bilcliff, CFO, on a variety of topics.
- A subgroup has been established to appoint the external auditor.
- Membership has reduced in number recently due to a number of Governors finishing their terms of office and would welcome new members from the recently appointed Governors.

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

iv) People, Engagement and Membership (PEM) WG

Mrs Carrick presented the report, highlighting the following:

- The first Member's Discussion Forum will be held on 27 June 2023 and is an opportunity for all Governors to listen to and represent the Members of the Trust. All Governors were encouraged to attend.
- The group has set ambitious targets for the year 2023/24 and welcome any additional engagement or participation from Governors to achieve this.

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

23/12 ITEMS TO RECEIVE AND ANY OTHER BUSINESS

i) Updates from Committee Chairs

People Committee

Professor McCourt, provided an update on behalf of Mr Jowett and reported that the People Committee had met twice since the last Council of Governors meeting and covered the following topics:

- Industrial action.
- The new People Strategy.
- Guardian of Safe Working.
- Sustainability.

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- General Medical Council (GMC) survey.
- Workforce Standards.
- Apprenticeships.
- Feedback from the Freedom to Speak Up Guardian.

The Chairman added that he had recently visited the Dental Hospital along with Bill Macleod, NED and was very impressed. Professor McCourt advised that the Freeman Education Centre and the new facilities at Eldon Court have been completed.

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

Quality Committee

Mr Chapman submitted a report from the Quality Committee and commented on the following:

- The Committee Annual Report 2022/2023 was drafted and discussed in detail, particularly the risks arising during the year and decisions taken.
- The ongoing CQC inspection has created a huge amount of additional work, particularly in complying with the documentation submission request.
- The Committee members continue to attend walkabouts and have used deep-dives to explore areas of focus.

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

Audit Committee

Mr MacLeod presented the update and highlighted that the Audit Committee has a range of responsibilities including oversight of; risk management, internal audit, and external audit. He added that Chairs from each of the People, Finance and Quality Committees also sit on the Audit Committee.

The Committee considered the Board Assurance Framework, the draft accounts and the going concern statement.

Mr Macleod noted that Mazars LLP have presented their external audit plan, and that the accounts and annual report should be signed off by the end of the month. Internal Audit have also presented their work to date.

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

Finance Committee

Mr Chapman submitted a report from the Finance Committee and highlighted the following:

- The CIP and ERF are the main focus of the Finance Committee in terms of risk.
- The Finance Committee have held extraordinary meetings to consider business cases and tenders across the year end period. Consideration was also given to the impact of declining to approve any business cases.
- The draft annual report and accounts have been submitted and are a testament to the hard work within the Finance and corporate Teams.

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

Charity Committee

The CFO gave an update from the Charity Committee on behalf of Jill Baker. She stated that the Board is a corporate Trustee, and delegates decision making to the Charity Committee. The Committee meet four times per year, with occasional extraordinary meetings to approve grants. From February to May, a total of £1.3million was approved in grants. Eleven were internal and eight were external.

A meeting of the Charity Committee took place on 16 February 2023 during which a grant totalling £15,000 was approved for improvements to Children's Services.

A meeting of the Charity Committee took place on 10 March 2023. The meeting was convened primarily to discuss several grant applications in advance of the next formal meeting. During this meeting, the Charity Committee approved applications which totalled £618,889.

A meeting of the Charity Committee took place on 6 April 2023. During the meeting, the Committee approved applications which totalled £263,667.60.

It was also noted that the Head of Grants is leaving the Trust and the position is currently being recruited.

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

ii) Date and time of next meeting:

The next formal meeting of the Council of Governors was scheduled for Thursday 17 August 2023, 14:45 – 16:00.

22/10 ITEMS TO APPROVE

i) Nominations Committee Report

[Mr MacLeod and Mr Chapman left the meeting at 16.03]

The Nominations Committee sought to reappoint Mr Graeme Chapman and Mr Bill MacLeod and requested approval from the Council of Governors. The reappointment was supported by Dr Valentine as Chair of the Business and Development Working Group (B&D) Working Group.

A number of documents were presented for approval as detailed in the report.

It was resolved: to **approve:**

- a) The reappointment of Mr G Chapman and Mr B MacLeod, Non-Executive Directors, for a second 3-year term of office from 30 July 2023;

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- b) The updated Chair/NED Appointments and Reappointments Process and Chair/NED succession policy;
- c) The updated NED Terms and Conditions; and
- d) The updated Chair/NED expenses guidance.

There being no further business, the meeting closed at 16:09.

DRAFT

GOVERNORS' ATTENDANCE – 15 June 2023

	Name	Y/N
1	Mr David Black	Apologies
S	Miss Genna Bulley	Yes
1	Mrs Judy Carrick	Yes
S	Mrs Sharon Chilton [Nursing & Midwifery]	Apologies
1	Dr Alexandros Dearges Chantler	Yes
A	Professor Justin Durham [Newcastle University]	No
1	Mrs Aileen Fitzgerald	Apologies
1	Mr David Forrester	Yes
2	Mr Ian Frenette-Wood	Yes
S	Mr Gary Gibson [Volunteer]	Yes
S	Mrs Kelly Gribbon [Admin and Clerical]	Apologies
S	Dr John Hanley [Medical & Dental]	Yes
1	Mrs Kate Hawley	Yes
2	Mrs Catherine Heslop	Yes
2	Mr Alex Holloway	Apologies
2	Professor Philip Home	Yes
3	Mr David Hughes	Yes
A	Professor Tom Lawson	No
2	Mr John McDonald	Yes
2	Professor Pauline Pearson	Yes
2	Ms Linda Pepper	Yes
2	Mr Shashir Pobbathi	Apologies
S	Miss Elizabeth Rowen [Health Professional Council]	Yes
S	Mrs Poonam Singh [Nursing & Midwifery]	Yes
A	Cllr Ian Tokell [Newcastle City Council]	Yes
1	Dr Eric Valentine	Yes
2	Mr Bob Waddell	No
3	Mr Michael Warner	Apologies
2	Mrs Claire Watson	Yes
1	Mrs Pam Yanez	Yes
1	Mr David Black	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
101	ACTION01	23/07 BUSINESS ITEMS iv) Chief Executive's Report	15-Jun-23	The ECN agreed to look into a query from the Governors regarding the new appointment policies in Podiatry [ACTION01] .	MC	<u>11.08.23</u> - MC to provide a verbal update at the August Council of Governors meeting.	
102	ACTION02	23/11 GOVERNORS REPORT ii) Quality of Patient Experience (QPE) Working Group (WG)	15-Jun-23	Mr Gibson advised that on a recent ward visit he had met two terminally ill patients who were extremely complimentary regarding the support they had received from staff and the excellent care. He asked that this be fed back to which PS agreed to share the details with the ECN for feeding back to the ward [ACTION02] .	PS/MC	<u>08.08.23</u> - AM emailed details to the ECN to feedback to Ward staff. Action closed.	

Key:

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



COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
Title	Chairman's Report						
Report of	Professor Sir John Burn, Chairman						
Prepared by	Gillian Elseder, Corporate Governance Officer and PA to the Chairman and 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 type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>				
Summary	<p>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"> • Board Activity • "Spotlight on Services" • Governor Activity • Regional engagement with Foundation Trust Chairs of the North Integrated Care Partnership (ICP) 						
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"/>
Link to the Board Assurance Framework [BAF]	No direct link however provides an update on key matters.						
Reports previously considered by	Previous reports presented at each meeting.						

CHAIRMAN'S REPORT

EXECUTIVE SUMMARY

This report outlines a summary of the Chairman's activity and key areas of focus since the previous Board of Directors meeting, including:

- Board Activity
- "Spotlight on Services"
 - Dental Labs
 - Chaplaincy
 - Pharmacy Production Unit
- Governor Activity
 - New Governor Induction
 - Council of Governors
 - Members Event Discussion Forum
 - Governor Training: Performance Metrics
- Regional engagement with Foundation Trust Chairs of the North Integrated Care Partnership (ICP)

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

CHAIRMAN'S REPORT

Our July Board meeting coincided with a Well Led inspection visit by the Care Quality Commission (CQC). This was an opportunity to take stock and demonstrate the changes we have implemented over the last 5 years have improved our effectiveness as a unitary Board, focussing on quality of care while remaining innovative and financially prudent. I am acutely aware of the pressure on our staff, and the challenge to our Executive Team, when faced with regulatory inspections and from so many external challenges - I am grateful to all for their preparations both before and during these inspections. We can but keep calm and carry on with business as usual.

In terms of Board activity, I chaired an Extraordinary Board meeting on 29 June which was held to formally approve the Trust's Annual Report and Accounts and I would like to take this opportunity to thank everyone involved in the preparation of these two items as the work and effort involved should not be underestimated.

This was followed by our Board Development Session which covered several topics including:

- Discussion in relation to the latest developments in system work and the impact for Newcastle Hospitals.
- Consideration of the proposed Board Development Framework and Programme for the year ahead.
- An update on the development of the new Trust Strategy and the associated timeline.
- Discussion around the development of a Trust Public and Patient Engagement Strategy.

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 three "Spotlight on Services" since the last meeting, being:

- **Dental Labs** - Bill MacLeod, Non-Executive Director and I experienced an absolutely fascinating morning at our Dental Labs. We were shown around the labs by Mark Pickersgill, Dental Laboratory Manager where we were privileged to see world class reconstruction prostheses made by expert technicians who work with 3 Dimensional reconstructions alongside our maxillofacial surgical team.
- **Chaplaincy** - Katie Watson, Head of Chaplaincy joined me and several of our Non-Executive Directors and delivered a very emotive presentation outlining the role of her team who provide an outstanding service 24 hours per day. In the last year, Katie and her team have recorded in excess of 8,682 patient and staff contacts which is a staggering amount!

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- **Pharmacy Production Unit** - Neil Watson, Director of Pharmacy and colleagues from the Commercial Enterprise team delivered a short presentation on the growth of the unit and the next steps for potential commercial opportunity.

Governor and Member activity since our last meeting has included:

- Our **New Governor Induction** was held on 9 June 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.
- Our **Council of Governors** met on 15 June. In addition to our regular updates from our Lead Governor and Working Group Chairs we were joined by Executive colleagues who provided a comprehensive update on the Trust's current performance and delivery. We were also joined by Christine Smith, our new Non-Executive Director who was pleased to provide a short biography and is very much looking forward to working with and establishing valuable links between the Council and the Board.
- We held a **Members Event Discussion Forum** on 27 June. Our first ever discussion forum took place in our newly refurbished Education Centre at the Freeman Hospital. The forum allowed our members to share their experiences of living with a disability when accessing healthcare. We heard from Fardeen Choudhury, Equality, Diversity & Inclusion Manager, regarding some of the current support available within Newcastle Hospitals when accessing our services, and learned from our members, regarding suggestions for improvement.
- **A Governor Training session on Performance Metrics** was held on 3 July. We were joined by members of our Performance Team who delivered a very informative session covering the basis of our performance targets, who we are held accountable to for the targets as well as the mechanisms for performance monitoring.
- **A Patient Experience Strategy Workshop** was held on 1 August. We were joined by members of the Patient Experience Team and STAND, a community of experienced engagement practitioners and service change leaders, who have been involving people to inform policy, strategy, service design and transformational change programmes for more than 25 years. The session comprised a workshop discussing methods of feedback available to patients and ways the Trust could improve on the current offering.

At a regional level, I continue to engage with both Foundation Trust Chairs and the Integrated Care Partnership (ICP).

The North ICP Area Meeting held on 14 June 2023 included several presentations and discussion topics such as:

- The role of HealthWatch - A network of organisations fully committed to independently represent the voice of the people.

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- North East and North Cumbria Integrated Care System Healthier and Fairer Programme which is a system wide and multi-agency approach to coordinate efforts to prevent ill health, tackle inequalities and support the NHS to play a greater role in economic regeneration and addressing the social determinants of health.
- North of Tyne work and a Health Strategy Update.

RECOMMENDATION

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

Report of Professor Sir John Burn
Chairman
17 July 2023

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COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
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"> • Industrial action and the NHS workforce plan; • Care Quality Commission (CQC) inspection; • NHS 75; and • Headlines from other key areas, including the Chief Executive Officer's networking activities, our awards, and achievements. 						
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"/>
Link to Board Assurance Framework [BAF]	This is a high-level report from the Chief Executive Officer covering a range of topics and activities.						
Reports previously considered by	Regular report. This report was presented to the Trust Board on 27 July 2023.						

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 of Governors meeting, including:

- The Trust's response to industrial action by the British Medical Association;
- The NHS workforce plan and our work locally to improve our training facilities;
- A CQC core service and well-led inspection;
- The NHS' 75th Birthday;
- My work with local, regional and national networks; and
- An update on research awards and recognitions for staff members.

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

CHIEF EXECUTIVE'S REPORT

1. OVERVIEW

Industrial action and the NHS Long Term Workforce Plan

As I write, the Trust's operation is again significantly impacted as a result of industrial action. Junior doctor members of the British Medical Association (BMA) took industrial action on 14-16 June and 13-18 July, with consultant BMA members striking on the 20 and 21 July. Both groups of medical staff remain in dispute with the government over pay. I know that medical colleagues make the decision to strike with a heavy heart, and I appreciate how difficult this has been for them.

Since my last Council of Governors report, the government has announced and accepted the recommendations of the remaining independent pay review bodies covering the NHS but has stated it will not negotiate further on pay. I continue to be concerned about the impact of this ongoing dispute on patients and staff.

Eight consecutive months of industrial action has taken up a significant amount of clinical and management capacity which could have otherwise been used to plan and deliver improvements in care. At every strike, the cancellation of a significant amount of elective care and outpatient appointments is necessary to ensure that the reduced number of staff at work can focus on the care of acutely unwell patients. NHS England has recognised the cumulative loss of elective capacity due to industrial action by reducing its elective activity target for the year from 107% of pre-pandemic levels to 105%. It is sobering to hear that, across the whole country, more than 750,000 patient appointments have now been cancelled as a result of NHS industrial action.

I want to again place on record my thanks both to those involved in the coordination of the Trust's response to industrial action and to all staff who, whether they personally take part in industrial action or not, adjust their work to cover for the impact such action has on the running of our services.

I have said before that there is no sustainable future for the NHS without a sustainable workforce and therefore, I welcome the long-awaited NHS Long Term Workforce Plan which was published at the end of June. The plan focuses on increasing the training of staff, improving retention of existing staff and reforming ways of working to deliver services and training with greater efficiency. Particularly welcome is the recognition that the plan will be refreshed every two years in light of the changing workforce situation – however funding will be needed to implement the envisaged workforce increases.

As a leading teaching hospital, we play a key role in training the next generation of staff. Our commitment to providing the best possible learning environment and facilities was illustrated by the opening last month of our two new training centres, based at the Freeman Hospital and at Eldon Court in Newcastle city centre. The investment we've made in these centres will provide thousands of clinical and non-clinical learning opportunities each month in the best possible facilities. It was fantastic to visit and open the centres, and to offer thanks to everyone who has been involved in the project.

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We are keen and ready to play our part in training and developing the NHS staff of the future, as funding becomes available. As a Trust, we will work closely with our key workforce partners, including the Universities of Newcastle and Northumbria, to prepare to implement the initiatives contained in the NHS long-term workforce plan.

Care Quality Commission

On Tuesday 27 June, the CQC commenced an unannounced inspection of our urgent and emergency, medicine, surgery, and North East and Cumbria Transport and Retrieval (NECTAR) services. My thanks to everyone who has been involved in this and in hosting CQC inspectors in their areas of work. The final element of is a 'well-led' inspection which is being held between 25 and 27 July. I will share further feedback in my next report.

NHS75

Wednesday 5 July marked the 75th birthday of the National Health Service and gave us an opportunity to pause, reflect and give thanks for the achievements and values of the service that I am so proud to be part of.

Throughout its history the NHS - and our part of it here in Newcastle Hospitals – has faced and overcome many challenges from financial pressures to changing demographics, advances in medical technology and, most recently, the Coronavirus pandemic and its impact. This has only been possible because of the efforts of the NHS' talented, dedicated, diverse workforce.

A range of activities took place across the Trust, and wider City, to reflect on our history and achievements as well as celebrating the dedication of our thousands of staff and volunteers. These included musical performances at various Trust sites, key city landmarks such as the Tyne Bridge being illuminated in NHS colours, special offers for staff from local businesses, and the Newcastle Hospitals Charity selling a range of NHS75 memorabilia. I had the privilege to attend a special service at Westminster Abbey, London, with NHS representatives from across the country. Nearby in the capital, a new art exhibition features NHS Charities Together champions including Jess Shield, a sister on ward 18 at the Royal Victoria Infirmary (RVI), who has worked with NHS charities and our own Newcastle Hospitals Charity to enhance mental health support for staff.

Community Diagnostic Centre

I am pleased to confirm that, in partnership with Gateshead Health NHS Foundation Trust, we have now signed a long-term lease with Metrocentre for the new Community Diagnostic Centre (CDC). This is an important step towards providing improved access to screening and diagnostic services outside of a hospital setting for the people of Gateshead and Newcastle. The CDC will provide imaging, respiratory investigations and cardiac investigations with the centre designed to create capacity for these services that are seeing increased referrals. It will offer 145,000 appointments per year and create 134 jobs when the centre opens. It is an important step in providing improved access to screening and diagnostic services outside of a hospital setting for the people of Gateshead and Newcastle.

Leadership Congress

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Last month, I opened our most recent Leadership Congress, where 130 leaders and others interested in leadership came together to discuss some of the challenges and opportunities we have together. The session focused on the issue of equality, diversity, and inclusion and how we can do much more to become an inclusive organisation that challenges discrimination and enables everyone to fulfil their potential. Among the important discussions, we reflected on the role that everyone can play in ‘Calling In and Calling Out’ when remarks are made – either by other colleagues or by patients.

Continuing to embed an inclusive, open culture in every part of the organisation, for all staff, continues to be a leadership priority for me and the whole Executive Team. There has been significant positive cultural change in the organisation since 2018 and work is now progressing on the Trust’s refreshed People Plan which will detail our renewed approach to continue supporting further improvement in the coming years.

Patient experience and nutrition

In June and July, patients, staff, visitors, and carers were asked to have their say about how Newcastle Hospitals gathers and uses patient feedback to improve services and care. Patient experience matters, so this engagement work is helping us understand what is working well, and how our patients want to share their views and ideas with us so that we can continuously improve. I will share feedback in a future report.

In June, we launched the trust’s food and drink strategy for 2022 to 2027 which outlines our ambitions in delivering high quality nutrition and hydration care, recognising the importance of offering healthy, balanced food and drink choices for our patients, visitors, carers, volunteers and staff. You can find out more <https://www.newcastle-hospitals.nhs.uk/news/food-drink-strategy/>.

2. NETWORKING ACTIVITIES

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

Service visits and meetings

Recently I visited some of our busy medicine wards at the RVI, including ward 30 (Gastroenterology), ward 42 (stroke), ward 48 (respiratory) and our Respiratory Support Unit (ward 49). I heard from the teams about how they are focussing on quality improvement and streamlining processes wherever they see an opportunity. In recent years our levels of bed occupancy have risen, as they have across the whole NHS, so the type of discharge and flow improvement work I saw is crucial to keeping the whole hospital moving and making sure that patients do not experience undue delays.

Each of the teams talked about the improved staffing position they were in, having recently recruited new staff members. Several had high quality and enthusiastic nursing students who hoped to join their teams after graduation. They also told me about the strengths that

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international recruits had brought to the team, and it was lovely to learn about the support offered to those new recruits to help them to settle in.

In the last month I have also spent time with our dedicated colleagues in the Information Management and Technology (IM&T) directorate based at Regent Point, which includes diverse teams from switchboard to service desk, clinical coding to project delivery.

The directorate is made up of nearly 200 staff who support our clinical, operational, and corporate teams at a range of locations. By working behind the scenes, our IM&T teams support every single member of staff by maintaining our systems, ensuring they are operational and secure whilst also introducing new technology.

I was pleased to learn about planned enhancements which will make it easier for users to interact with the service and get quick resolution to their problems. As our digital maturity grows, the effort required to maintain service also increases. As well as our ongoing work to continue to improve our core clinical information systems such as e-record, we are on the cusp of some exciting digital transformations which will have a significant impact on patient care - including our Patient Engagement Platform, virtual wards and improved use of our comprehensive data, including the potential use of Artificial Intelligence to support cutting-edge research.

I remain hugely grateful to the efforts of all staff across the organisation for the work they do every day – whether they directly provide care to patients, or whether they play a key role in supporting those who do.

Partnership work in Newcastle and across the region

Last month I was delighted to present to the latest cohort of our Collaborative Newcastle 'Learning to Lead together' leadership development programme, which brings managers from different health and care organisations in the city together for shared development.

I continue a regular programme of meetings with colleagues across the North East and North Cumbria Integrated Care Board and Provider Collaborative. In the last month these have included a development workshop held with other Trust Chief Executives at which we agreed the common approach for developing how we collectively plan clinical services for the future. I have also been involved in the significant work underway across the patch to deliver this year's challenging financial saving requirements and to plan for a financially sustainable future. I continue to work particularly closely with colleagues in our neighbouring Gateshead and Northumbria Trusts to collectively deliver financial efficiencies and support the resilience of our services.

National policy and influencing

As well as my regular engagements with the Shelford Group and the NHS Confederation, I have been pleased to support NHS England's national work on improvement ('NHS Impact') by sponsoring the development of the leadership for improvement programme for Chief Executives and Chairs. The programme is currently in the design phase, and I was pleased to chair a design workshop with contributions from a range of senior figures includes Julian

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Hartley (Chief Executive, NHS Providers) and Matthew Taylor (Chief Executive, NHS Confederation). Encouraging the leadership of every NHS organisation to embed continuous improvement as a core way of working is a key national development priority, so I look forward to sharing experiences from here in Newcastle as well as from across my career in support of this.

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.

- **Celebrating Excellence Awards** – Thank you to everyone who submitted nominations for our Celebrating Excellence Awards. Our judges, once again, had a difficult time in selecting our finalists as the standard and quality of entries was very high and really showcased the good work going on across the trust. There are 15 categories in the awards including a Lifetime Achievement Award in honour of NHS75 and thanks to the support of Newcastle Hospitals Charity, we will be holding a gala event at the Civic Centre on Friday 15 September where the winners will be announced. Well done to all of our finalists and everyone who was nominated.
- Great news for our **estates team and the clinical team behind the Day Treatment Centre** at the Freeman Hospital, who won three prestigious awards and were highly commended in a fourth category at the Constructing Excellence in the North East Awards. Their collective efforts were singled out for integration and collaborative working, value, and client of the year, as well as building project of the year and it is a really impressive achievement for the entire team.
- Congratulations to **Dr Chris Lamb**, an honorary gastroenterologist at the trust and clinical senior lecturer and honorary consultant in gastroenterology in immunity and inflammation at Newcastle University, who was awarded the 2023 Sir Francis Avery Jones Medal from the British Society of Gastroenterology (BSG) for his work in translational gastroenterology research.
- We have five finalists in the Nursing Times Awards which will be held in October. They are as follows:
 - **Nurse leader of the Year** – Caroline Ralph
 - **Ingrid Fuchs Cancer Nursing Award** – 7-day systemic anti-cancer therapies service
 - **Patient safety improvement** – A collaborative model of meningococcal vaccination response monitoring for patients receiving complement inhibition
 - **Public health nursing** – Operation encompass police cause for concern triage pilot
 - **Technology and data in nursing** – Digital pre-assessment for cancer patients

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- Professor Naeem Soomro who has been selected as the next British Association of Urological Surgeons (BAUS) representative on the Royal College of Surgeons of England Council and will be taking over this role from Mr Jonathan Glass.
- Healthcare Scientist Wayne Hartley who recently has returned from the World Transplant Games in Australia where he earned four medals – a gold in the triathlon relay, a silver in tenpin bowling (doubles) and in the men’s team 5k, and a bronze medal in the individual ten pin bowling. Team GB topped the medal table with 121 gold, 96 silver and 71 bronze medals.
- Iain Clarke, deputy catering manager, was shortlisted as a finalist for Leader of the Year in the Healthcare Estates and Facilities Management Association (HEFMA) Awards 2023.
- Consultant oncologist at the Northern Centre for Cancer Care, Dr Najibah Mahtab, alongside her five sisters runs a mentoring scheme with a focus on helping those from deprived backgrounds, which was featured on ITV Tyne Tees. The Mahtab sisters from Newcastle, founded the 5 Diamonds Mentorship, a not-for-profit scheme for young people aged between 14 and 18 and have workshops running across the country.

4. RECOMMENDATION

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

Report of Dame Jackie Daniel

Chief Executive

20 July 2023

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COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
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 2023.						
Recommendation	The Council of Governors is 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 2022/23; and ii) To endorse the proposed corporate objectives and the personal objectives for the Chair and NED for 2023/24 as included in Appendix A.						
Links to Strategic Objectives	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.						
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 2023.

The Committee last met on 1 August 2023. The following matters were considered:

- The outputs of the Chair and Non-Executive Director (NED) appraisal exercise for 2022/23, including proposed objectives for 2023/24;
- The Annual Report of the Committee for 2022/23;
- Succession Planning for the Chairman and NEDs whose terms of office are due to end within the next three years; and
- The Schedule of Business and Committee membership.

This report provides further detail in relation to the matters listed above.

The Council of Governors is 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 2022/23; and
- ii) To endorse the proposed corporate objectives and the personal objectives for the Chair and NED for 2023/24 as included in Appendix A.

NOMINATIONS COMMITTEE UPDATE

1. COMMITTEE MEETINGS

The Committee last met on 1 August 2023. The following matters were considered:

- The outputs of the Chair and Non-Executive Director (NED) appraisal exercise for 2022/23, including proposed objectives for 2023/24;
- The Annual Report of the Committee for 2022/23;
- Succession Planning for the Chairman and NEDs whose terms of office are due to end within the next three years; and
- The Schedule of Business and Committee membership.

2. CHAIR AND NED APPRAISALS 2022/23 AND OBJECTIVES 2023/24

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 meeting on 1 August 2023.

The proposed individual and corporate objectives for the Chairman and NEDs were considered by the Committee. The proposed final objectives for Council endorsement are included in Appendix A to this report.

3. ANNUAL REPORT OF THE COMMITTEE

The Annual Report of the Committee was endorsed.

4. SUCCESSION PLANNING

Committee members were briefed on the NED terms of office which were due for consideration in the next three years and on the reappointment consideration specified within the new Code of Governance for Provider Trusts (issued by NHS England). Committee members agreed to schedule a further meeting in early September to review the Code considerations in more detail.

5. OTHER MATTERS DISCUSSED/CONSIDERED

- The updated Schedule of Business was agreed.
- The Committee welcomed Mr Bob Waddell and Mr John McDonald to their first Committee meeting in August 2023.

6. FUTURE COMMITTEE BUSINESS

The Committee will next meet as follows:

Agenda item 8

- September 2023 - A review of the NEDs position/succession planning arrangements.
- November 2023 – To conduct the annual review of the Committee Terms of Reference.

7. RECOMMENDATIONS

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

- iii) To note the outputs of the Chair and Non-Executive Director (NED) appraisal exercise for 2022/23; and
- iv) To endorse the proposed corporate objectives and the personal objectives for the Chair and NED for 2023/24 as included in Appendix A.

Report of Kelly Jupp
Trust Secretary
1 August 2023

Appendix A – Chair and NED objectives

Proposed Corporate Objectives 2023/24:

1. As identified in the national NHS England Equality Diversity and Inclusion (EDI) Improvement Plan, 'Chief executives, chairs and board members must have specific and measurable EDI objectives to which they will be individually and collectively accountable.' Therefore the following objective is proposed:

To oversee, and seek assurance on, the development and delivery of the Newcastle People Programme, which includes a specific focus on improving performance regarding EDI, and support demonstrable leadership in relation to EDI within Newcastle Hospitals.

To be evidenced through discussion in Board and Committee meetings (documented in the minutes of the meetings) in relation to updates on the delivery of the People Programme and key people metrics on EDI.

2. To oversee, and seek assurance on, the delivery of the elective productivity and efficiency (both in terms of planned cost improvement and activity delivery). To be evidenced through discussion in Board and Committee meetings, documented in the minutes of the meetings.
3. To continue to support the evolving Integrated Care System and associated Strategy. To be evidenced through discussion in Board meetings, documented in the minutes of the meetings, and discussion topics in Board Development sessions.

Proposed Personal Chair and NED Objectives 2023/24:

PROFESSOR SIR JOHN BURN

1. *Oversee Trust Board preparation for a CQC well-led inspection and associated actions required post inspection (based on the report received). Contribution to be measured by feedback from NEDs.*
2. *Build further ICS networks for Board members. Contribution to be measured by feedback from NEDs and Executive Team members.*
3. *Develop a robust succession plan for the Board of Directors as a whole. Contribution to be evidenced through reporting/discussion at both the Nominations Committee and the Appointments and Remuneration Committee.*
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.*

MR JONATHAN JOWETT

1. *Continue to chair the People Committee and ensure that the Committee receives the required assurances in relation to the development and ongoing monitoring of the Trust People Programme. In conjunction with the Trust Chair, maintain 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

1. *Continue as 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 Appointments and Remuneration Committee by providing constructive challenge and sharing expertise as appropriate. Contribution to be measured by record of attendances and evidenced in the meeting minutes.it is*
3. *Continue as a member of the Charity Committee with particular focus on development of the Charity finance structure and investment management. Contribution to be measured by record of attendances and evidenced in the meeting minutes.*

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4. *Continue as a member of the Well Led Group, to be measured by contributions to the meetings.*
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.*

Following the recent appointment of Christine Smith as the new Chair of the Finance Committee, it is deemed timely for Mr MacLeod to rotate off the Finance Committee as there is no need to have two qualified accountants on the Finance Committee and it is best practice for the Audit Committee Chair not to be a member of the Finance Committee. From August 2023 Mr MacLeod will hand over to Liz Bromley.

PROFESSOR KATH MCCOURT CBE FRCN

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. Support Steph Edusei as she moves to become deputy chair of the Quality Committee, continuing to support the committee during the transition. Contribution to be measured by attendance at 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 while providing induction to Liz Bromley as deputy Maternity NED Lead. 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*

Agenda item 8

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.*

As Professor McCourt is approaching her final year of a full nine-year term of office (ends 30 November 2024), and in order to undertake an orderly succession plan/handover, the following changes will take place:

- Jill Baker to take over as a member of the Quality Committee from Professor McCourt in April 2024 (with a period of shadowing from January to March 2024).
- Liz Bromley to take over as a member of the People Committee from Professor McCourt in April 2024 (with a period of shadowing from January to March 2024).
- Liz Bromley to also take on the role of Maternity Champion from November 2024 with a period of shadowing/deputising during 2023/24.

MR GRAEME CHAPMAN

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. *Provide NED oversight and constructive challenge to the Trust digital strategy and associated implementation programme. Chair the Trust Commercial Strategy Group (CSG) interacting 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. *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.*

MS JILL BAKER

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:*
 - a. *Complete the review of current brands within the Newcastle Hospitals Charity to confirm those which should be retained.*
 - b. *Aim to reduce by half the small funds embedded in the Charity to develop a more effective and equitable use of resources.*
 - c. *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.*
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.*

MS STEPHANIE EDUSEI

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 as the NED Wellbeing Guardian. Contribution to be measured by contributions to Board and People committee minutes.*
3. *Continue 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 Quality committee with a view to becoming deputy Chair while continuing to attend People Committee to address Wellbeing and EDI issues. Contribution to be recorded through records of attendance and minutes of the Board committees.*
5. *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.*
6. *Support the Chair and Senior Independent Director in ensuring regular effective communications between the Corporate Governance Team, Governors, the Chair and NEDs.*

MRS LIZ BROMLEY

1. *Shadow Kath McCourt as a member of the People Committee from January to March 2024 before taking over from Kath formally in April 2024 .*
2. *To conduct a period of shadowing Kath McCourt/deputising as NED Maternity Champion during 2023/24 prior to taking on the role formally commencing in November 2024.*
3. *Become an active member of the Finance Committee, taking over from Bill MacLeod. Contribution to be recorded through records of attendance and minutes of the Board committees. It is proposed therefore that Bill attends his last Finance Committee in July before handing over to Liz.*
4. *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.*
5. *Support the Chair and Senior Independent Director in ensuring regular effective communications between the Corporate Governance Team, Governors, the Chair and NEDs.*

MS CHRISTINE SMITH

1. *Become 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. *Engage in 1:1 interactions with the new CFO Jackie Bilcliff on a regular basis to ensure a close working relationship, contribution to be assessed by feedback from the CFO.*
3. *Attend each of the major Board committees once to expand knowledge of the organisation. To be assessed by Committee minutes.*

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4. *Attend Audit committee in her capacity as Chair of Finance Committee, to be assessed by Audit committee minutes.*
5. *Engage with the governors including attending a meeting of the Business Development Working Group and liaising with its chair, Eric Valentine.*
6. *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.*
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.*

PROFESSOR DAVID BURN FMedSci

1. *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 previous years, 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 areas of shared interest between NHIP and Collaborative Newcastle such as Health Inequalities where efforts may be integrated to improve population health. Contribution to be measured by NHIP report.*

MRS PAM SMITH

1. *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.*
2. *Alert the Trust Board to developments of mutual interest such as changes in transport infrastructure.*
3. *Contribute to the Healthy Ageing agenda by liaising with the Trust on future council initiatives in this area to encourage alignment with Trust activities and NHIP.*

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COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
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 15 June 2023.						
Recommendation	The Council of Governors is 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 15 June 2023.

UPDATE FROM THE LEAD GOVERNOR

1. UPDATE

I continue to ensure good communication with fellow Governors and the Non-Executive Directors by attending the Working Group meetings. I chair the Governors bi-monthly informal meetings which identify relevant issues to be added to the subsequent Council of Governors meeting.

I attended and presented at the new Governors Induction programme, organised a buddy for those who requested one, and offered 1:1 meetings with new Governors.

I attended the Discussion Forum held for members on 27 June 2023 and assisted with the group sessions. This event was successful and developed new ways of communicating with our members.

The meeting for Governors in relation to the performance metrics with members of the Trust Performance Team was much appreciated and will assist in the development of enhanced performance reports for Governors.

With my Governor colleagues Judy Carrick and Eric Valentine, I met with members of the visiting Care Quality Commissioning (CQC) team as part of the Trust well-led review.

2. RECOMMENDATION

The Council of Governors is asked to note the content of this report.

**Report of Pam Yanez
Lead Governor
7 August 2023**

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COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
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 Abigail Martin, 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 checked="" 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 is 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 (WG) during the period of June to August 2023. It provides a summary of:

- Group activities;
- Presentations received; and
- Ward and department visits.

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

1. INTRODUCTION

The QPE WG continues to meet monthly, in person and via Microsoft Teams. There is no meeting arranged in August.

2. GROUP ACTIVITIES

Complaints Panel

Philip Home and Aileen Fitzgerald, WG members, attended the Complaints Panel in June and submitted a report to the group. No particular concerns were noted.

Key points raised during these meetings included:

- Learning Disability (LD) and Autism including;
 - The use of patient passports;
 - A recent pilot for an improved reasonable adjustments form;
 - Employment of a Play Specialist;
 - Plans to introduce mandatory training for all staff;
 - The pilot of care bags which include distraction tools and headphones to limit noise.
- Feedback concerning security and the increased number of flags highlighting potentially violent or abusive patients.
- Complaints data, most notably that the number of outstanding complaints is steadily reducing.

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

Philip Home (WG member) attended the Clinical Audit and Guidelines Group meetings in June and July. Key matters discussed included:

- Improvements in emergency laparotomy;
- The results of the national audits; and
- The management structure/framework for Quality Oversight within the Trust.

Patient Safety Group (PSG) [meets quarterly]

The Patient Safety Group meeting on 21 July 2023 was postponed and will take place on 24 August 2023. The WG are currently looking for a new representative to attend the PSG.

Nutrition Steering Group (NSG) [meets quarterly]

The Nutrition steering group has not met since the last Council of Governors meeting. Claire Watson has been selected to take over from Alexandros Dearges-Chantler as the Governor representative at the NSG and will attend the next meeting.

3. PRESENTATIONS/GUESTS

June 2023

Susanne Harkness, Discharge Improvement Programme Lead attended the WG to provide an update on the Discharge Improvement Programme and covered the following topics:

- Steering Group oversight;
- Communication within the Trust;
- Educating staff on the discharge process; and
- Use of the Discharge Hub.

The WG would like to thank Susanne for attending.

July 2023

Graeme Chapman, Chair of the Trust Quality Committee attended to give a Quality Update and included the following:

- The recent CQC visits;
- Risks within the Trust, including the 'Top Three' Risks included in the Board Assurance Framework; and
- Cost Improvement Programme targets for 2023/24 and how the Trust plans to approach achieving these .

The WG would like to thank Graeme for attending.

4. WARD AND DEPARTMENT VISITS

The Governors are currently conducting ward and department visits within the Medicine Directorate, with a focus on Older People's Medicine.

One visit was conducted in July and a further five are planned in August.

5. RECOMMENDATIONS

The Council of Governors are asked to receive the report.

Report of Poonam Singh
Chair of QPE Working Group
01 August 2023

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COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
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 February 2023.						
Recommendation	The Council of Governors is 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
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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 2023.

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

1. INTRODUCTION

The Business and Development (B&D) Working Group meetings have been held monthly via Teams and in-person with the topics covered relating to the Working Groups (WG) Terms of Reference.

The WG is generally well attended. The WG always welcomes 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 several matters in the previous meetings including:

2.1 Effectiveness Review of Working Group (WG):

A table summary was submitted to the Trust Secretary and comments are awaited.

2.2 Christine Smith, Non-Executive Director (NED), Finance Committee Chair.

Christine Smith, newly appointed NED, attended the WG to introduce herself and to find out more about the relationship between the B&D WG and the Finance Committee, which she has taken over as Chair.

2.3 Chris Haynes, Assistant Finance Director, External Audit Update/Annual Accounts Briefing

Chris Haynes gave an update on the External Audit Tender as well as a briefing on the Annual Accounts.

In general, Chris reports that there was agreement with the treatment of the accounts. For the main audit findings, any changes so far have been below materiality so have not affected the view of the accounts.

In relation to the External Audit Tender, Chris provided an outline of the future provision for the external audit. The intention is to have the auditor for 2024/25 appointed by the end of the next financial year. The process will start with a soft market test to gauge interest and there are 13 local providers who will be approached at this stage. He does not anticipate that there will be much response to this initial step.

The specification would be ready in September and following the initial soft market test, a full tender exercise will be initiated by the sub-group.

3. RECOMMENDATION

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

**Report of Eric Valentine
Working Group Chair
4 August 2023**

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COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
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 is 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 (WG) 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 15 June 2023.

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

1. INTRODUCTION

The People, Engagement and Membership Working Group (PEM WG) met on 13 June 2023 and 11 July 2023.

2. GROUP ACTIVITIES

The PEM WG continues to work on communication and increasing the quantity and diversity of members. The WG does this through the quarterly Members' newsletter, Members' Events, Dame Jackie's blog, videos and networking in the community to explain the role of Governors and Members, and to feed back into the Trust. In addition, we organised our first Discussion Forum on 27 June 2023 in the newly refurbished Education Centre at the Freeman Hospital and enjoyed listening directly to our community. The PEM WG also benefited from the input of the Equality, Diversity and Inclusion (EDI) Team in July and plan to have regular 6-monthly inputs to ensure our work remains inclusive and supportive of our diverse communities.

3. ONGOING AREAS OF FOCUS

3.1 Communication

- Our upcoming summer newsletter will reflect and report on the successful Discussion Forum and look forward to the next such event, where the WG will continue to solicit ideas from Members and the public. Further items within the newsletter will include a 'Spotlight on Governors' and an article on what is required to be an effective hospital Governor.
- The PEM WG submitted a successful bid with the Newcastle Hospitals Charity for support in acquiring a media specialist to establish a social media presence to focus on Governor activities and increase our engagement in underserved communities.
- The PEM WG have provided a section for Dame Jackie's Blog.
- PEM WG members have supported both the People at our Hearts Awards and the Celebrating Excellence awards.
- PEM members supported Newcastle Hospital Charities at the NHS75 event, attended the Newcastle Pride March and will be present along with other Governors at MELA in August. We attend these events to raise the profile of Governors and to explain directly to the public what we do.

3.2 Membership

There has been an increase in youth membership and staff membership, with three new members signing up at the Discussion Forum. Governors continue to engage new members. Additionally, we have asked Quality of Patient Experience (QPE) WG members to raise membership with patients and families on their visits. Further, we have met with the Apprenticeship Team and explored the benefits of membership to apprentices who may seek employment within the Trust in the future.

We will also be speaking to the medical students who join the Trust in September to continue our engagement with currently under-represented groups.

4. RECOMMENDATIONS

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

Report of Judy Carrick
Chair of the PEM Working Group
19 July 2023

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COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
Title	Integrated Board Report						
Report of	Angela O'Brien- Director of Quality and Effectiveness.						
Prepared by	Gavin Snelson- Head Quality and Effectiveness, Joanne Field – Senior Information 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 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"/>
Link to Board Assurance Framework [BAF]	Strategic risk SO1.1 [Capacity and Demand] Strategic risk SO1.4 [Core standards – patient safety and quality of care] 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 report.						

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. Throughout the month of May 2023, the total number of Trust onset C.Difficile infections has reduced (n= 4). At the same time, the number of Trust onset Pseudomonas Aeruginosa Bacteraemias has increased (n= 7).
2. There has been a continued reduction of inpatient acquired pressure ulcers since January 2023.
3. In 2022/23 the total number of patient falls increased by 25.6%, from 2,547 in 2021-22 to 3,200 in 2022-23.
4. There were 14 serious incidents in June 2023. The Duty of Candour (DoC) process has been initiated for all cases.
5. One Never Event was reported in June 2023.
6. The Trust has opened a total of 117 (110 with identified patient activity) formal complaints up to the end of June 2023.
7. There were 48 sharps incidents reported in June 2023.
8. Baseline assessments were completed for nine national audits in June 2023.
9. Mandatory training compliance stands at 92% at end of June 2023, against an end of year target of 95%.
10. Appraisal compliance stands at 80.44% at end of June 2023, against an end of year target of 95%.
11. In the period ending 30 June 2023 the Trust incurred expenditure of £374 million and received and income of £364 million leaving a deficit of £9.9 million.

The Council of Governors is asked to receive the report.

Integrated Board Report

Quality, People and Finance

July 2023



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

Operational pressures have receded. COVID numbers are the lowest they have been at 3-4 patients and there is less pressure to board patients into Surgery. Some patients however continue to be delayed in accessing assessment and packages of care which would optimise their discharge and improve bed occupancy.

A&E performance continues to show improvement with increasing days of performance at the higher level of 80+%. There remains good management of ambulance handovers. Ongoing periods of Industrial Action continue to adversely impact on the elective programme.

Report Highlights

1. Throughout the month of May 2023, the total number of Trust onset **C.Difficile infections has reduced (n= 4)**. At the same time, the number of Trust onset **Pseudomonas Aeruginosa Bacteraemias has increased (n= 7)**.
2. There has been a **continued reduction of inpatient acquired pressure ulcers since January 2023**.
3. **In 2022/23 the total number of patient falls increased by 25.6%**, from 2,547 in 2021-22 to 3,200 in 2022-23.
4. There were **14 serious incidents in June 2023**. The Duty of Candour (DoC) process has been initiated for all cases.
5. One Never Event was reported in June 2023.
6. The Trust has **opened a total of 117 (110 with identified patient activity) formal complaints** up to the end of June 2023.
7. There **were 48 sharps incidents** reported in June 2023.
8. **Baseline assessments were completed for nine national audits** in June 2023.
9. **Mandatory training compliance stands at 92%** at end of June 2023, against an end of year target of 95%.
10. **Appraisal compliance stands at 80.44%** at end of June 2023, against an end of year target of 95%.
11. In the period ending 30 June 2023 the Trust incurred expenditure of £374 million and received and income of £364 million leaving a **deficit of £9.9 million**.

Contents: July 2023

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

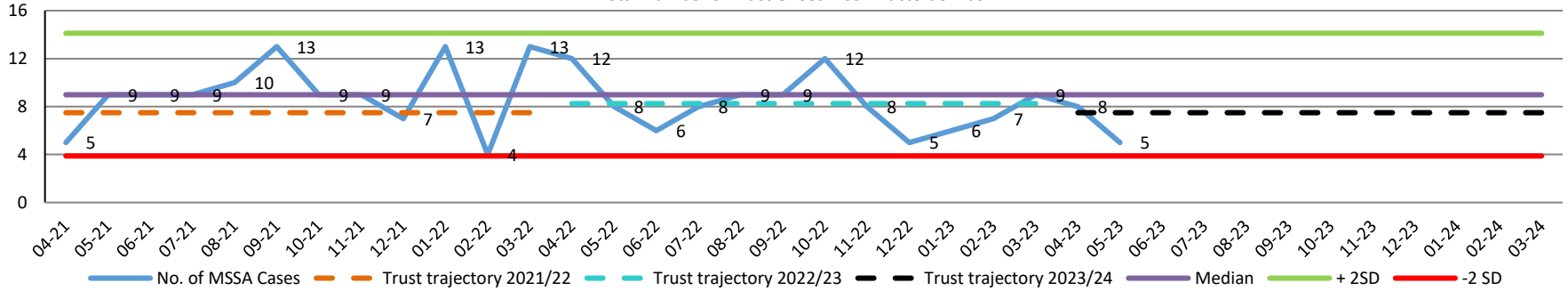
- Sickness Absence (including COVID-19)
- Equality and Diversity
- Sustainable Workforce Planning
- Excellence in Education & Training

Finance

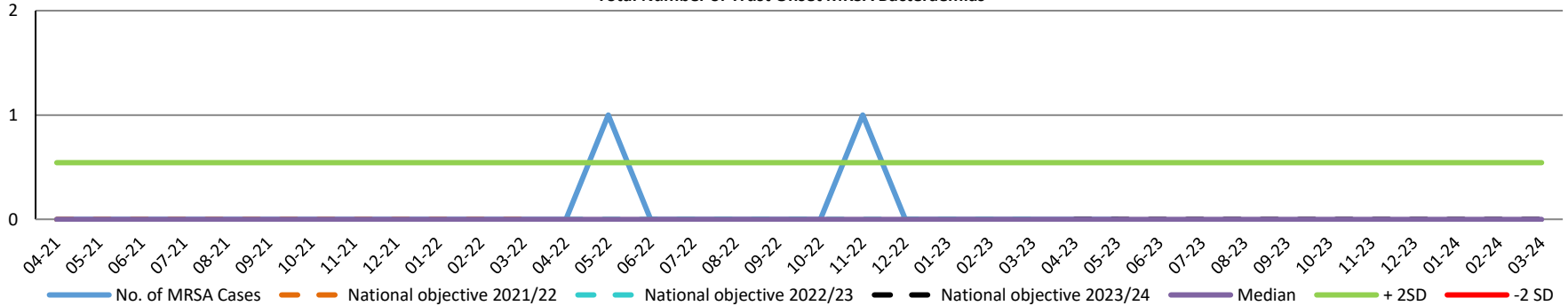
- Overall Financial Position

Quality: Healthcare Associated Infections 1/2

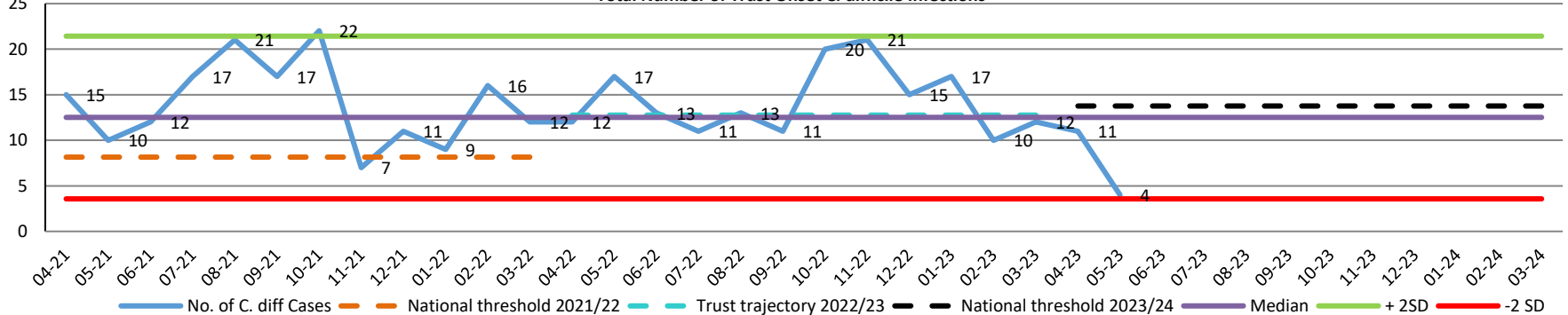
Total Number of Trust Onset MSSA Bacteraemias



Total Number of Trust Onset MRSA Bacteraemias

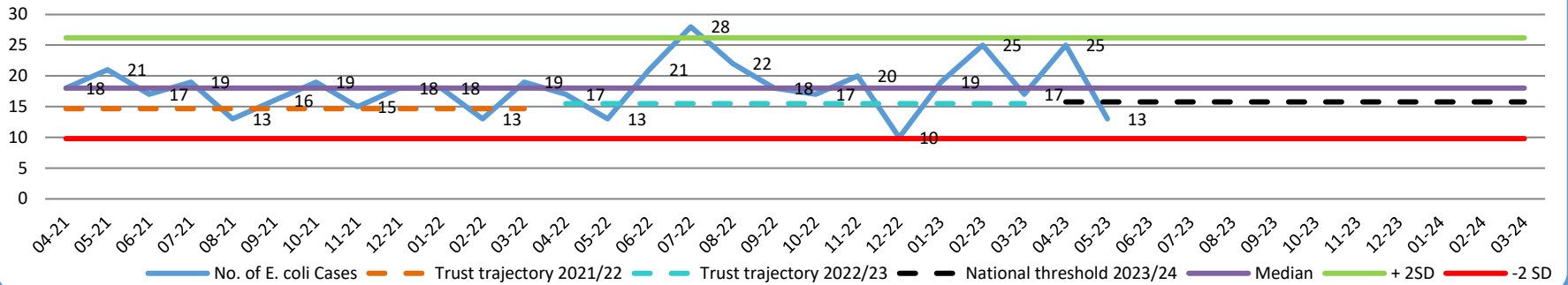


Total Number of Trust Onset C. difficile Infections

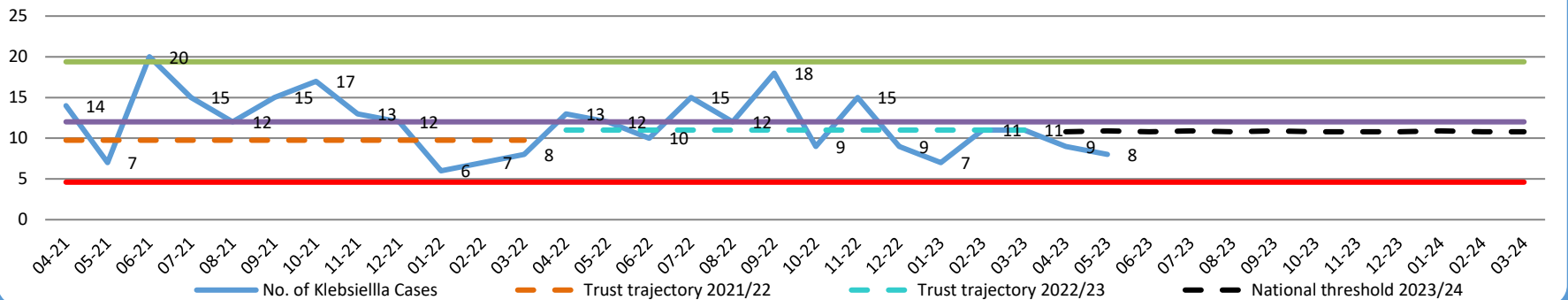


Quality: Healthcare Associated Infections 2/2

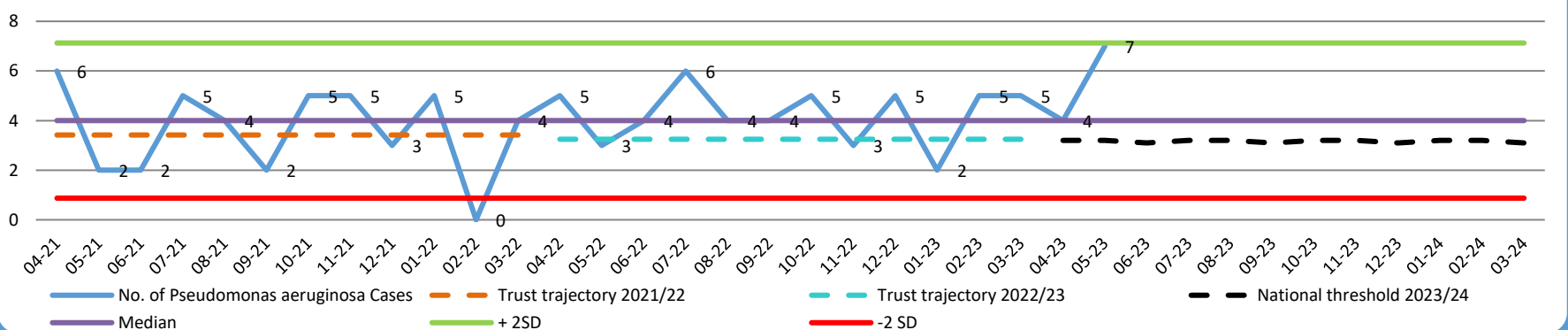
Total Number of Trust Onset E. coli Bacteraemias



Total Number of Trust Onset Klebsiella Bacteraemias



Total Number of Trust Onset Pseudomonas Aeruginosa Bacteraemias



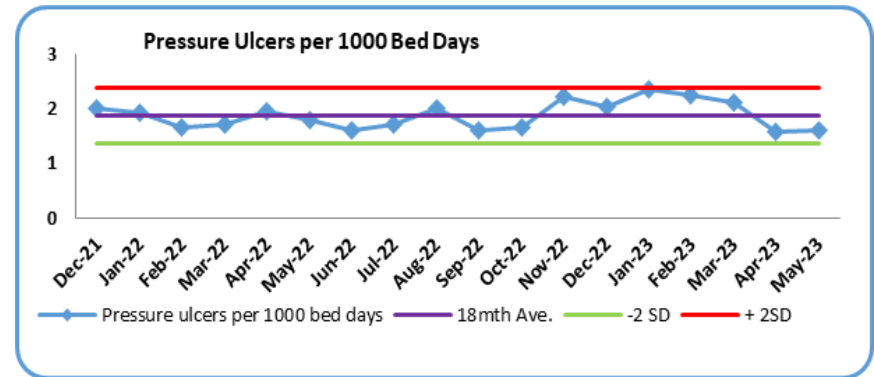
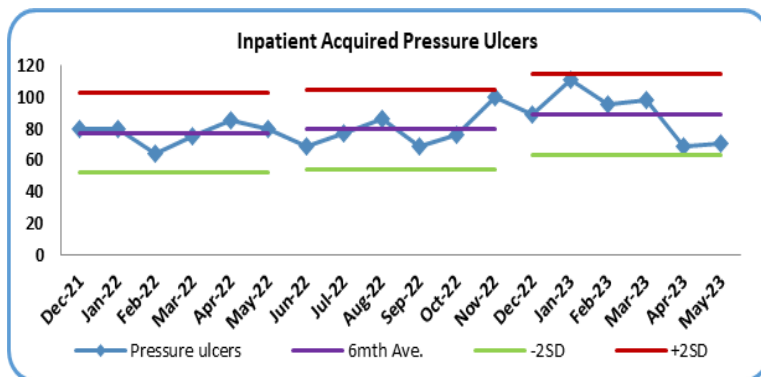
Quality: Harm Free Care – Pressure Damage

Analysis of data has demonstrated the following key points:

- There has been a continued reduction of inpatient acquired pressure ulcers since January 2023. This is both in terms of total numbers and per 1000 bed days. The figures for the last quarter also demonstrate a reduction compared to the same period in 2022.
- 97% of acquired pressure ulcers reported were Category II damage, graded low/minor harm. The remaining 3% were graded as Category III damage, and therefore are identified as serious incidents, requiring a root cause analysis (RCA) which has been completed.
- No Category IV or above damage has been reported and compared to 2021/2022 figures, there has been a 5% reduction in acquired pressure damage of Category III and above.
- There has been an increase in patients presenting to the Trust with significant existing damage. This group are at a higher risk of developing further pressure damage or deterioration of existing damage. It was highlighted through the RCA process that noted 19.3% (23 of 117) of RCAs undertaken were for patients who presented with existing damage which had deteriorated.

Current actions in place:

- On a monthly basis, each inpatient ward area receives their harm free care dashboard to guide local improvement and inform good practice.
- The tissue viability team identify areas of high incidence, undertaking focussed work where required. This includes staff education as well as examining themes of RCA's, such as ensuring patients risk factors are identified and appropriate preventative measures are put in place, as well as assessing mattress quality.
- In 2022-23 all inpatient areas (with the exception of the Great North Childrens Hospital (GNCH)) were given a 20% reduction trajectory. End of year data identified 8% achieved a 20% reduction with a number exceeding this 20% reduction. 4% had no pressure ulcers.
- A pilot has commenced to introduce a new risk assessment tool called PURPOSE T to replace the existing tool (Braden) and support staff to identify and plan care for those patients at risk of pressure damage.



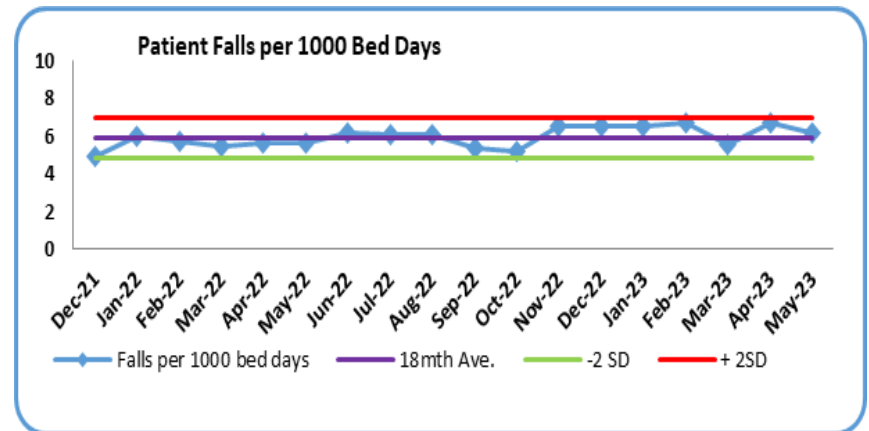
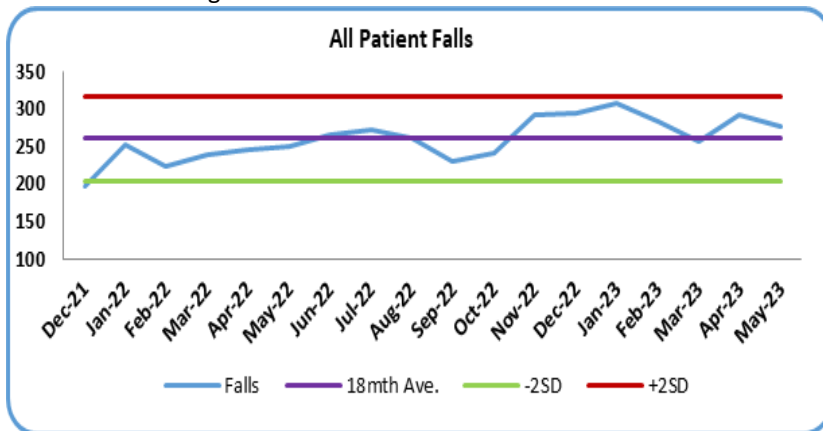
Quality: Harm Free Care - Falls

Analysis of data has demonstrated the following key points:

- In 2022-23 the total number of falls has increased by 25.6%, from 2,547 in 2021-22 to 3,200 in 2022-23.
- 98% of reported falls, are classified as low/no harm and staff are actively encouraged to report any fall/slip/trip no matter how insignificant.
- The increase in total falls is mirrored by the increase in bed occupancy and the evidence of significantly increased acuity and dependency of our patients. This is closely monitored by the Nurse Staffing and Clinical Outcomes Group to support active intervention where required.

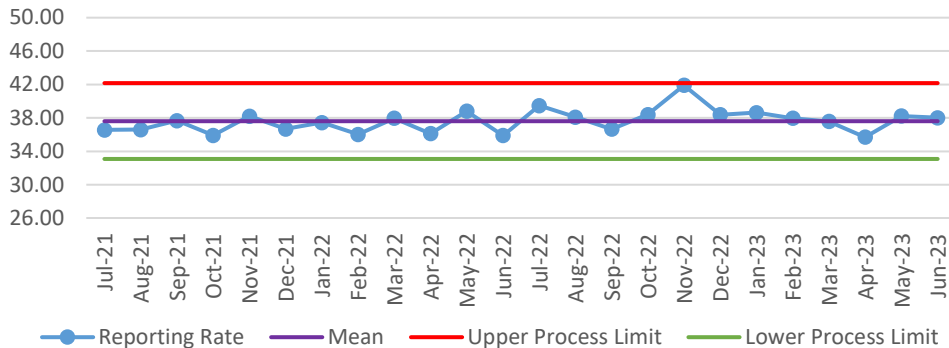
Current actions in place:

- The Falls Co-ordinator reviews ward level data on a monthly basis. Wards with the highest incidence of falls, reviewing contributing factors and identifying learning and solutions, with the aim to reduce numbers of falls in the Trust.
- Focused work has taken place promoting the importance of preventative measures such as lying and standing blood pressure measurements in patients over 65.
- In line with Trust assurance measures, focused auditing has taken place to monitor compliance with the Trust's Enhanced Level of Care (ELOC) assessments. The purpose of which, was firstly to validate that individual risk factors were correctly identified, and secondly that appropriate provision of care was implemented according to risk. This work has highlighted the requirement for focused education to take place, as well as a recap for clinical staff. Work continues on a rolling programme across the organisation.
- Work is underway in conjunction with the Dementia Specialist Nursing Team to reduce falls in patients with dementia as this group of patients are at higher risk.
- In 2022-23 all inpatient area were given a 20% reduction trajectory. 13% achieved a 20% reduction with a number exceeding this and a number demonstrating no falls.



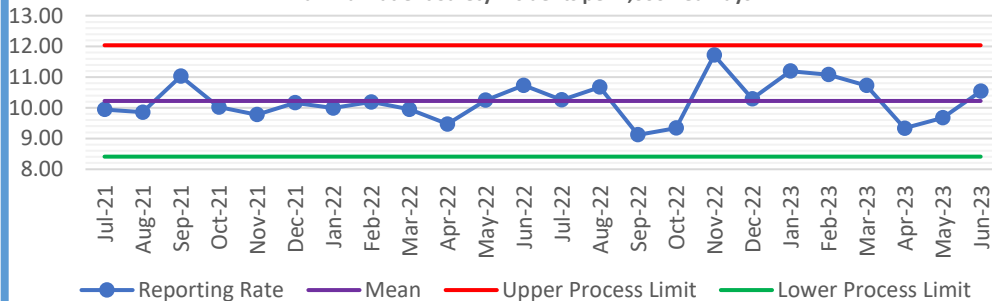
Quality: Incident Reporting

Patient Safety Incidents per 1,000 Bed Days



All patient incidents: The number of patient safety incidents reported per 1,000 bed days has remained stable in June 2023 and continues to be within close proximity to the mean.

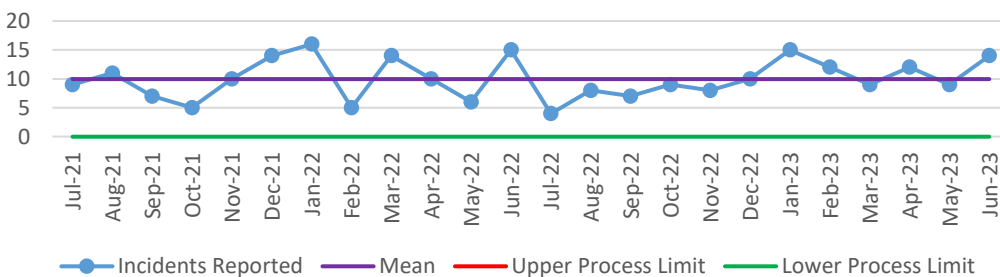
Harmful Patient Safety Incidents per 1,000 Bed Days



Harmful incidents: The number of *harmful patient safety incidents per 1,000 bed days has risen above the mean in June 2023, but is 10% lower than it was in November 2022 and remains well within the expected common cause variation. Severity grading of reported incidents may be modified following investigation and is therefore subject to change in future reports.

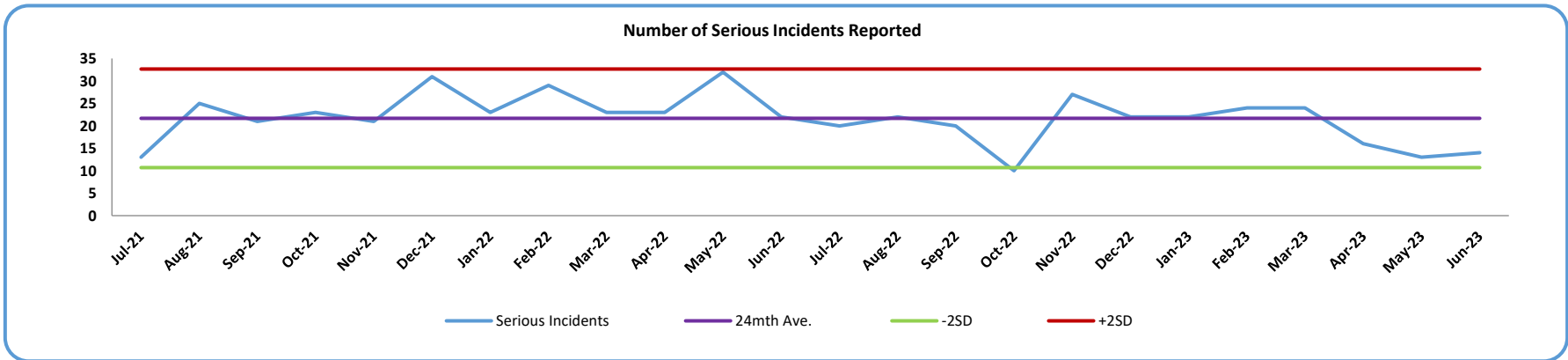
**includes all levels of harm from minor to catastrophic. Excludes patient safety incidents that resulted in no patient harm.*

Severe Harm Incidents Reported

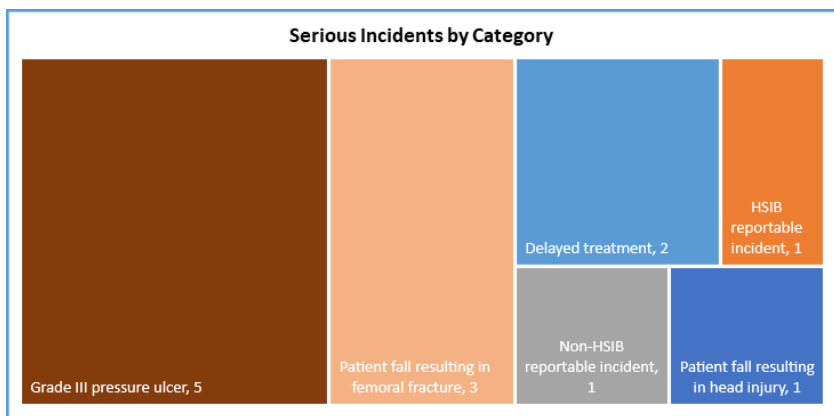


Severe harm incidents: There were 14 patient safety incidents reported that resulted in severe harm in June 2023, which is 5 more than May. However, it still remains within close proximity to the mean and well within the common cause variation. Severity grading of reported incidents may be modified following investigation and is therefore subject to change in future reports.

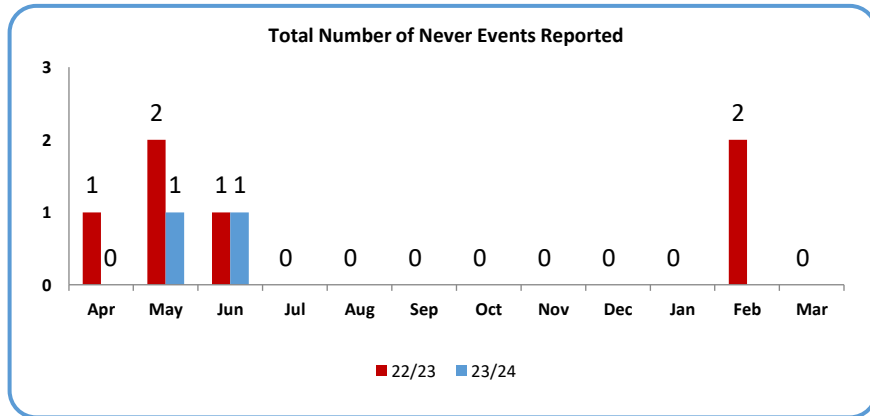
Quality: Serious Incidents and Never Events



There were 14 Serious Incidents (SIs) reported in June 2023, which is one more than May and remains below the mean and well within the accepted common cause for variation. The statutory requirement 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 for all cases reported in June 2023.



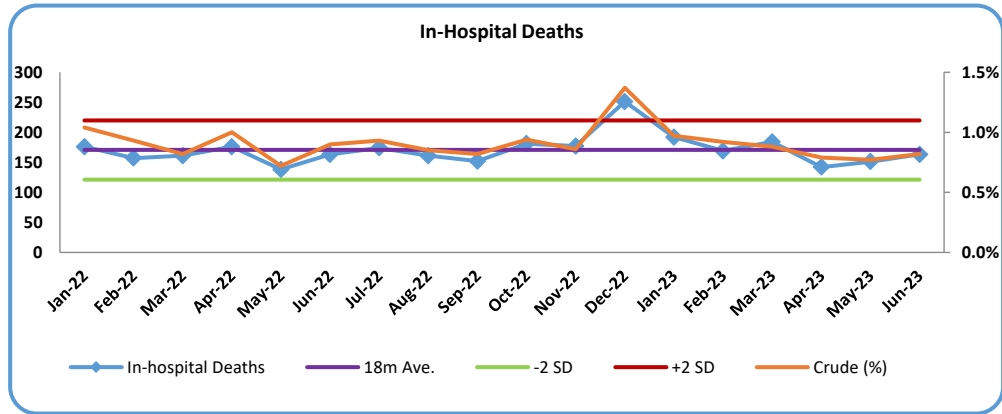
The categories of reported SIs for June 2023 are displayed in the table to the above. The highest number of SIs relate to grade III pressure damage, followed by patient falls resulting in harm.



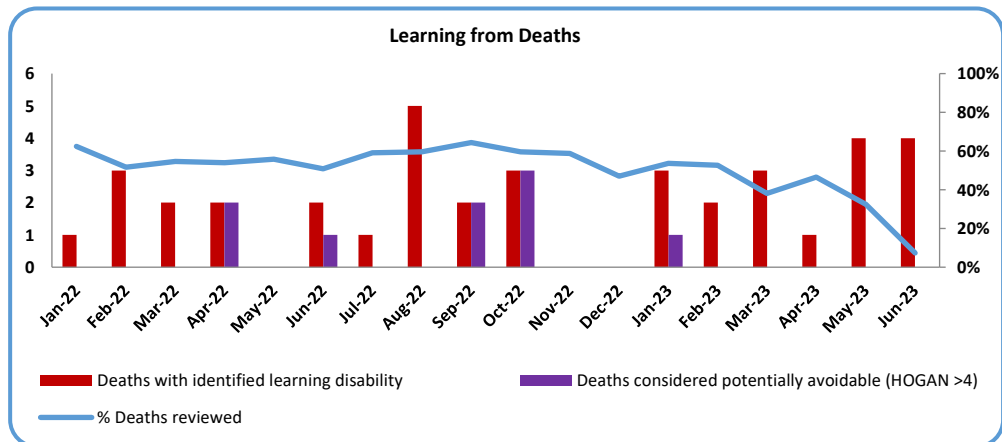
There were 6 Never Events reported in the Trust in 2022-23. One Never Event has been reported in June 2023 bringing the total number of Never Events to two for the time period of 2023-24.

Quality: Mortality Indicators 1/2

In-hospital Deaths: In total there were 163 deaths reported in June 2023, which is identical to the amount reported 12 months previously (n=163). The crude death rate is 0.82%. Nationally the deaths were high in December 2022, with influenza reported to be the main cause of death.

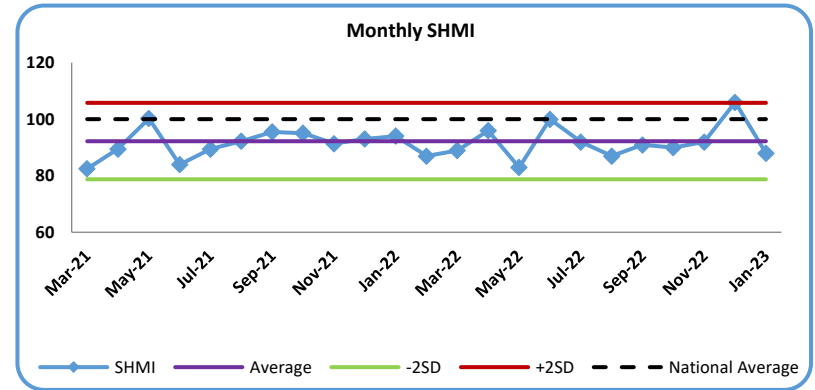
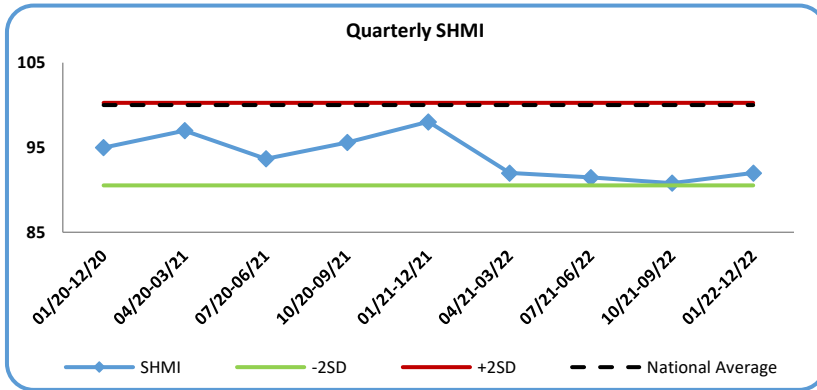


Learning from Deaths: Out of the 163 deaths reported in June 2023, twelve patients have, to date, received a level 2 mortality review. However, these figures will continue to rise due to ongoing M&M meetings held over the forthcoming months. All figures will continue to be monitored and modified accordingly. Four patients had a diagnosed learning disability.

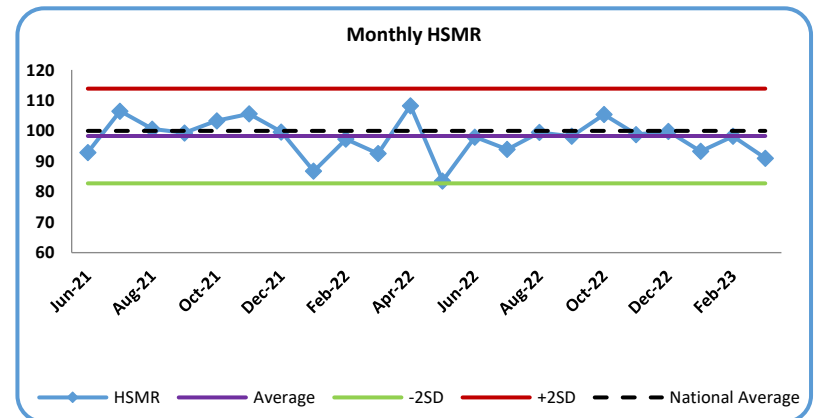
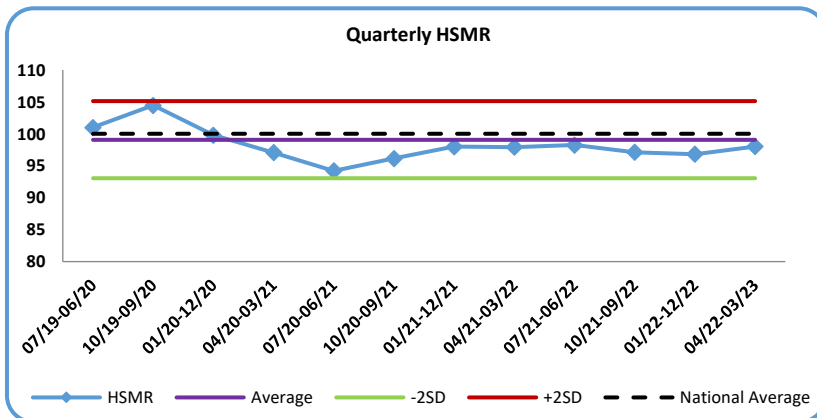


Quality: Mortality Indicators 2/2

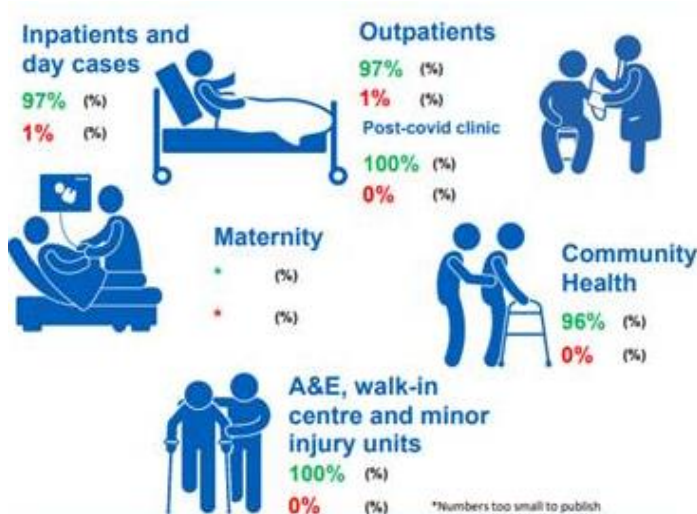
SHMI: The latest published SHMI quarterly data from NHS Digital shows the Trust has scored 92 from months January 2022 to December 2022. This is below the national average and is within the "as expected" category. Monthly SHMI data is published up to December 2022 and shows the Trust to be above the national average. This is due to the high number of deaths reported in December 2022, with influenza being the main cause of death. COVID-19 data continues to be excluded from SHMI data published from NHS England.



HSMR: The HSMR data shows a 12 month rolling HSMR score by quarter as well as monthly data up to March 2023 and is showing just below the national average. However, this number may rise or fall as the percentage of discharge coding increases. All figures will continue to be monitored and modified accordingly. Unlike SHMI data, HSMR data does not include deaths within 30 days of discharge.



Quality: FFT and Complaints



Friends and Family Test

Unpublished data to date shows that there were 2,079 responses to the Friends and Family test from the Trust in May 2023 (published April 2023) compared to 1,662 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 normally shown in brackets for comparison after the Trust data but this data is not currently available due to a technical issue with National reporting.

All data is available at: www.england.nhs.uk/fft/friends-and-family-test-data/

*numbers too small to publish

Trust Complaints 2023-24

The Trust has opened a total of 117 (110 with identified patient activity) formal complaints up to the end of June 2023.

The Trust has opened an average of 39 new formal complaints per month, which is 4 less than the average complaints for the last full financial year 2022-23.

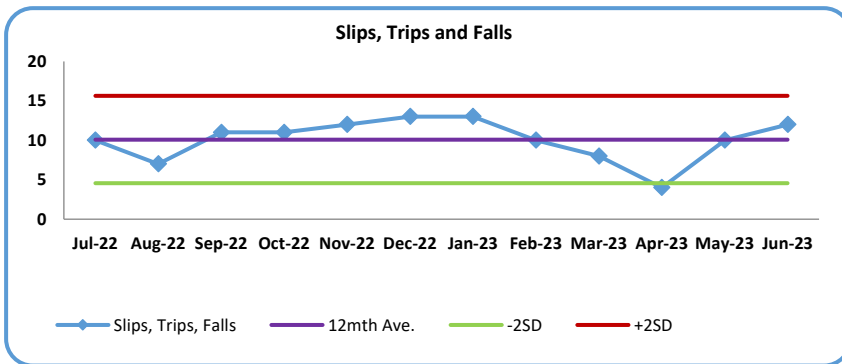
Taking into consideration the number of patients seen and areas with patient contact, the highest percentages of patients complaining to date are within Surgery with 0.05% (5 per 10,000 contacts). The lowest complaint percentages are with ePOD, Community and Cancer Services with 0.01% (1 per 10,000 contacts).

Directorates	2023-24				22-23 Ratio (Full Year)
	Complaints	Activity	Patient % Complaints	Ratio (YTD)	
Cardiothoracic	10	26,437.00	0.038%	1:2644	1:3974
Children's Services	4	18,408.00	0.022%	1:4602	1:2137
Community Services	1	15,678.00	0.006%	1:15678	1:7837
Dental	4	24,657.00	0.016%	1:6164	1:15521
Medicine	9	33,521.00	0.027%	1:3725	1:2780
Medicine (ED)	17	43,244.00	0.039%	1:2544	1:5184
ENT, Plastics, Ophthalmology & Dermatolog	12	95,359.00	0.013%	1:7947	1:8802
Musculoskeletal	6	24,212.00	0.025%	1:4035	1:3883
Cancer and Haematology	5	49,653.00	0.010%	1:9931	1:8154
Neurosciences	8	25,419.00	0.031%	1:3177	1:3280
Patient Services	10	11,128.00	0.090%	1:1113	1:544
Perioperative Care	2	8,984.00	0.022%	1:4492	1:3167
Surgery	8	15,910.00	0.050%	1:1989	1:1845
Renal	4	17,109.00	0.023%	1:4277	1:2926
Women's Services	10	34,546.00	0.029%	1:3455	1:3304
Trust (with activity)	110	444,265.00	0.025%	1:4039	1:3759

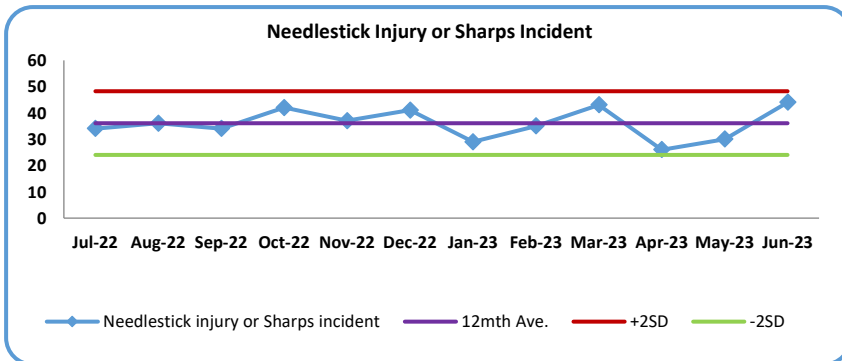
“Communication” and “Clinical Treatment – Surgery” are the highest primary subject area of complaints at 15% of all the subjects Trust wide.

Quality: Health and Safety (1/2)

There are currently 1,156 health and safety incidents recorded on the Datix system from the 1st July 2022 to 30th June 2023. This represents an overall rate of 74 per 1,000 staff. The Clinical Boards with the highest number of health and safety incidents over this period are Clinical Board 1 (159), Clinical Board 8 (156) and Clinical Board 3 (154). 37% of these incidents are linked to needlestick injuries (see below for further details). The overall trend for health and safety incidents remains relatively static with no significant increases or areas of statistical significance.

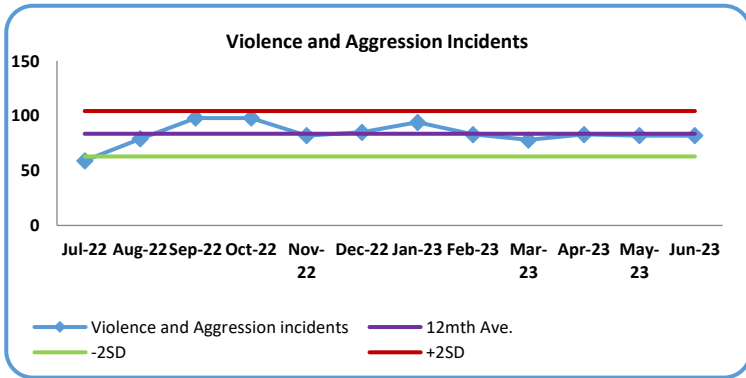


121 incidents were reported between 1st July 2022 to 30th June 2023. 59% of these incidents were related to trips and slips. The year-on-year comparison for slips, trips and falls shows a decreasing trend. Regular zonal inspections take place every month by Estates and any areas of concern are reported immediately with the Estates Helpdesk and acted upon. A Slips, Trips and Falls dashboard has been built, which provides the ability to further analyse incidents and identify key themes and trends. For example, incidents have recently been reported within Facilities, which has led to further work around appropriate footwear. There was an increase in slips, trips and falls in May 2023 and June 2023. Almost half of these incidents were related to staff slipping on wet floors across a range of services. Further analysis will be undertaken when the July 2023 data is available.



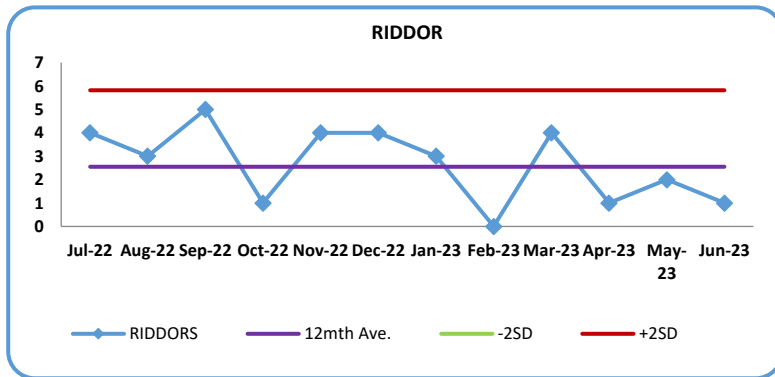
There have been 431 incidents during 1st July 2022 to 30th June 2023 (average 36 incident per month, 80% of these involve used needles) a slight increase in comparison to previous months. Further data breakdown has shown a slight increase in incidents during administration of insulin, further enquiries are being made around correct disposal of needles in this process. Detailed analysis is now possible via the Safer Sharps Incident Dashboard, which has recently been upgraded. Training around dashboard use will be rolled out in June/July 23. Non-safe sharps risk assessments have been re-evaluated and the tracker updated, covering all non-safe sharps. The format of risk assessment is currently being considered and modelled against the North Cumbria version, which has approval from Health and Safety Executive. The new Safer Sharps Training package is under development and due to be shared with the TEL team for further work to upgrade this into an e-learning package.

Quality: Health and Safety (2/2)



1,004 incidents of physical and verbal aggression against staff by patients, visitors or relatives recorded on the Datix system from 1st July 2022 to 30th June 2023. This represents an overall rate of 64 per 1,000 staff during this period. The yearly trend for physical assaults on staff shows a 28% increase in 2022-23 in comparison to 2021-22. The Trust Violence Reduction Group meets every quarter. Several initiatives to reduce these incidents are already underway, for example:

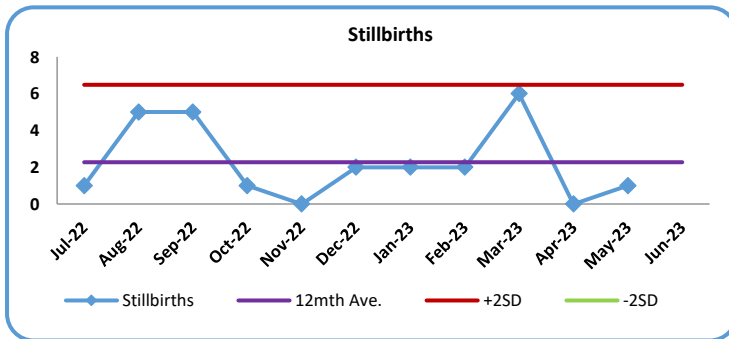
- The Trust Violence Reduction Strategy was approved at May 2023 Health and Safety Committee.
- Further improvements to our overall compliance with the National Violence Reduction Standards.
- Further development of the violence data dashboards to provide improved analysis.
- The introduction of ED Navigators in Summer 2023.
- Ward based violence and aggression risk assessments currently being re-evaluated in line with HSE expectations.
- Ward violence and aggression questionnaires have been developed and will be rolled out in June – July 2023.



Incidents reportable to the Health and Safety Executive in line with RIDDOR expectations remain relatively low. Incidents are scrutinised on a daily basis and any incidents meeting the threshold for RIDDOR are further investigated prior to information being shared with the Health and Safety Executive. A majority of the incidents reported via RIDDOR are either Slips, Trips and Falls or Moving and Handling type incidents; however, no significant themes have been identified recently. RIDDOR breakdown by incident category during the period is as follows:

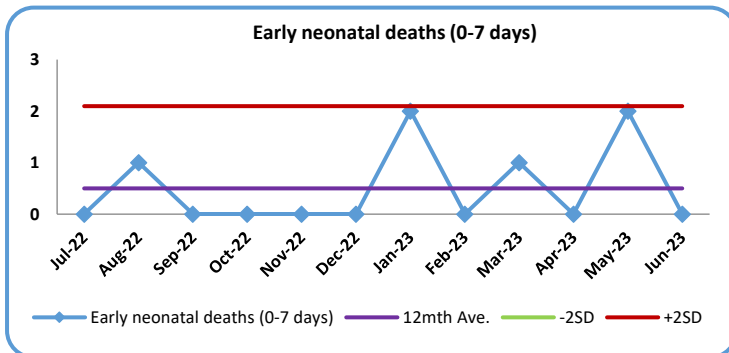
- Manual Handling – 9 incidents
- Non-Patient Slips Trips and Falls – 8 incidents
- Accident Involving Staff – 7 incidents
- Violence and Aggression – 6 incidents
- Accident (Involving patient) – 1 Incident
- Security – 1 Incident

Quality: Maternity (1/3)



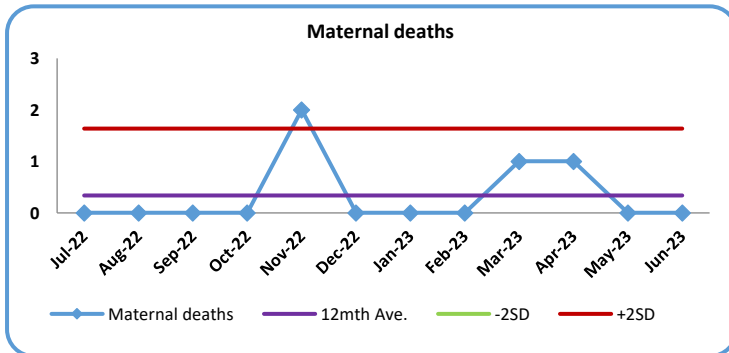
Stillbirths

As NuTH is a tertiary referral Fetal Medicine Unit, complex cases are often referred to the Trust from other units within the region, with women opting to deliver here rather than return to their local unit. This data includes termination for fetal anomalies > 24 weeks gestation. All cases undergo an initial local review and then a more detailed multidisciplinary team review including external input. Findings and actions required as a result of reviewing each case are then shared with the family involved. There were no stillbirths in June.



Early Neonatal Deaths

These figures are for term infants (born between 37 and 41 weeks) who delivered at the Trust but sadly died within the first week of life. These deaths are reported to the Child Death Review panel (as are all neonatal deaths regardless of gestation) who will have oversight of the investigation and review process. Neonatal deaths of term infants are also reported to HSIB (Healthcare Safety Investigation Branch) and the Coroner. A post mortem examination may be requested to try and identify the cause of death. In June there were no term early neonatal deaths.

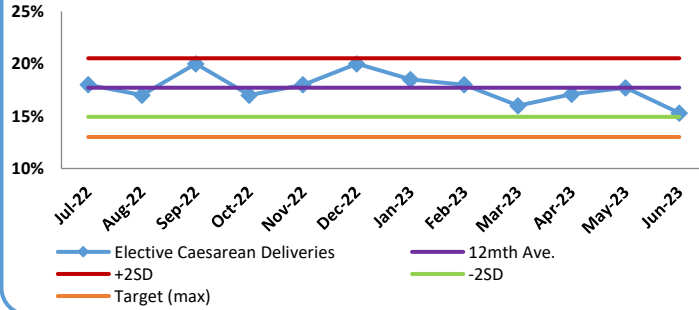


Maternal Deaths

Maternal deaths are reported to MBRRACE-UK and a national report is provided annually. Early maternal deaths are categorised as the death of a woman while pregnant or within 42 days of pregnancy (including termination of pregnancy). Late maternal deaths are reported from 42 days and within a year of pregnancy. Direct deaths are those resulting from obstetric complications of the pregnant state. Indirect deaths are those from pre-existing disease or disease that developed but has no direct link to obstetric cause, but was aggravated by pregnancy. Early maternal deaths are also reported to HSIB, investigation is dependant on certain criteria. There were no cases reported in June.

Quality: Maternity (2/3)

Elective Caesarean Deliveries

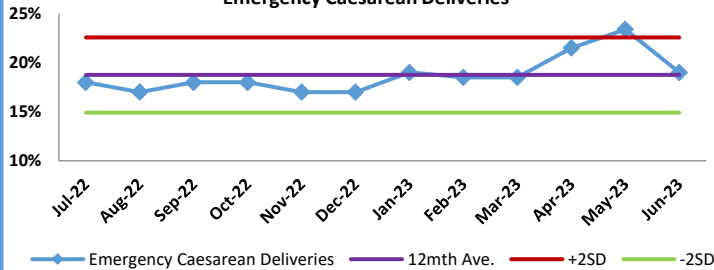


Elective Caesarean section

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

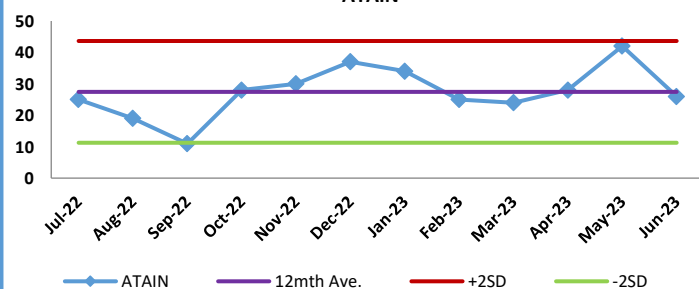
Emergency Caesarean Deliveries



Emergency Caesarean section

The emergency Caesarean section rate is comparable to other Trusts. Maternity is a consultant led service with dedicated consultant presence on Labour Ward 8am-10pm daily, consultant led multi-disciplinary ward rounds occur twice daily. The majority of obstetric consultants remain onsite overnight, from 10pm-8am and are involved with all decisions for emergency Caesarean section.

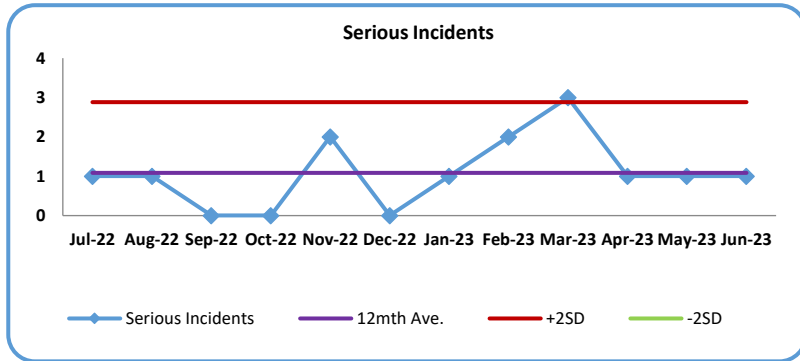
ATAIN



ATAIN

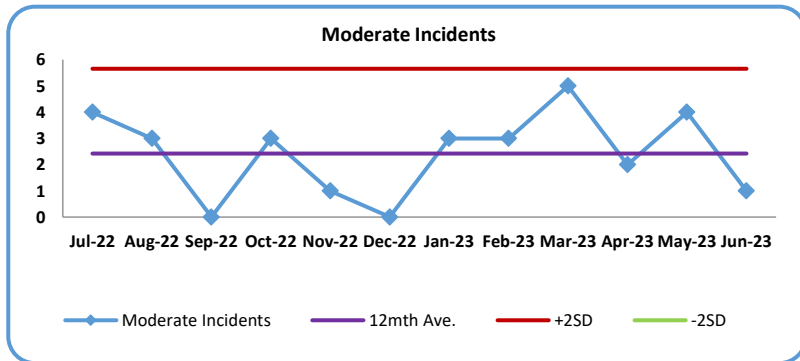
All unplanned admissions of term babies (37 – 41 weeks) into the neonatal unit are reviewed at a weekly multi-disciplinary meeting and a quarterly report is produced and shared. Some of these cases will be reviewed in more detail if they have been identified as a Serious Incident. In quarter 3 (Oct-Dec 2022-23) there was an increase in the number of term admissions and these have all been reviewed. Admissions in March and April had reduced with an increase in May. There has been a decrease in the number of admissions in June, not all cases have yet been audited, currently 3 cases have been identified as avoidable.

Quality: Maternity (3/3)



Serious Incidents

There have been 13 incidents escalated as Serious Incident's within the last 12 months. These include cases of potential or confirmed Hypoxic Ischaemic Encephalopathy (HIE), neonatal death, maternal bowel injury, intrapartum stillbirth, antepartum intrauterine death and maternal death. The HIE, Intrapartum Stillbirths, Neonatal deaths and Maternal deaths were all reported to HSIB (Healthcare Safety Investigation Branch) for external review. There has been one Serious Incident in June.



Moderate incidents

There was one moderate (and above) incident reported in Maternity this month. 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.

Quality: Audit 1/2

Audit / NCEPOD	Date of Report	Areas of Good Practice	Areas for improvement	Action Plan Developed
Trauma Audit and Research Network (TARN)	1 December 2022	<ul style="list-style-type: none"> Extended senior medical and nursing cover implemented in the Paediatric Emergency Department until 22:00. 	<ul style="list-style-type: none"> Rehabilitation staff are not available at weekends on the ward. <ul style="list-style-type: none"> ➤ Weekend provision of physiotherapists is key for early intervention to reduce length of stay. ➤ Provision of Occupational therapy. ➤ Provision of Psychology support for paediatric trauma. 	Discussed at June 2023 Clinical Audit and Guidelines Group
Paediatric Intensive Care Audit Network (PICANet)	9 March 2023	<ul style="list-style-type: none"> Mortality is within the expected range. Actual mortality below expected mortality on funnel plot. Emergency readmissions rate (0.8) lower than national average (1.0). 	<ul style="list-style-type: none"> Timeliness of data submission (52% submitted within timeframe vs 87.7% national average). 	Discussed at June 2023 Clinical Audit and Guidelines Group
National Audit of Pulmonary Hypertension (PH)	19 January 2023	<ul style="list-style-type: none"> 78% of patients seen or discharged within 30 days (76% national average). 99% of patients had quality of life scores recorded (88% national average). 100% of patients receiving a PH drug had an annual consultation (96% national average). 	<ul style="list-style-type: none"> No recommendations were made, and Trusts were not assessed against national targets due to COVID-19 recovery. 	Discussed at June 2023 Clinical Audit and Guidelines Group
Case Mix Programme (CMP)	17 February 2023	<ul style="list-style-type: none"> No recommendations or Trust level data published, only national data 		Discussed at June 2023 Clinical Audit and Guidelines Group
Learning Disability Mortality Review Programme (LeDeR)	27 April 2023	<ul style="list-style-type: none"> No recommendations or Trust level data published, only national data 		Discussed at June 2023 Clinical Audit and Guidelines Group

Quality: Audit 2/2

Audit / NCEPOD	Date of Report	Areas of Good Practice	Areas for improvement	Action Plan Developed
UK Cystic Fibrosis Registry	1 September 2023	<ul style="list-style-type: none"> No recommendations or Trust level data published, only national data 		Discussed at June 2023 Clinical Audit and Guidelines Group
Breast and Cosmetic Implant Registry	2 March 2023	<ul style="list-style-type: none"> No recommendations or Trust level data published, only national data 		Discussed at June 2023 Clinical Audit and Guidelines Group
Serious Hazards of Transfusion (SHOT)	1 July 2023	<ul style="list-style-type: none"> Major haemorrhage protocol (MHP) and blood provision in major haemorrhage is exemplar. Local anticoagulant reversal policy used locally by other regional trusts. Trust invested heavily in Transfusion IT systems. Run a Cell-free fetal deoxyribonucleic acid (cffDNA) system within midwifery and obstetrics department. Developed a transfusion reaction order set. Paediatric MHP developed. Haemoglobinopathy MDT for both paediatrics and adults. 	<ul style="list-style-type: none"> Regional Laboratory Information Management System (LIMS) project. Staffing vacancies within the Haematology/ Blood Transfusion section of Blood Sciences at the Freeman. 	Discussed at July 2023 Clinical Audit and Guidelines Group
National Lung Cancer Audit (NLCA)	12 April 2023	<p>Data completeness better than national average for the following indicators:</p> <ul style="list-style-type: none"> Disease stage (90% vs 86%) Performance status (86% vs 83%) Basis of diagnosis (95% vs 90%) Ethnicity (99% vs 97%) Clinical Nurse Specialist (64% vs 59%) 87.6% of patients with stage I/II PS 0–2 NSCLC underwent curative treatment vs 79.3% national average 72% of patients with stage IIIB-IV and PS 0-1 received systemic anti-cancer therapy vs 61.1% national average 99.2% of patients seen by CNS vs 92.3% national average 	<ul style="list-style-type: none"> Resource lung cancer MDTs according to the commissioning guidance set out by the Lung Cancer Clinical Expert Group, and update the guidance to reflect current best practice. 	Discussed at July 2023 Clinical Audit and Guidelines Group

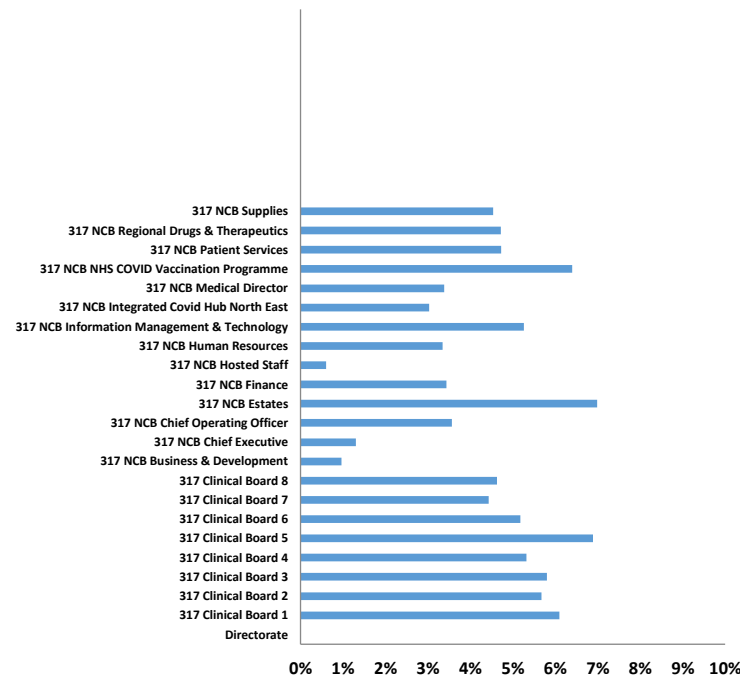
People: Sickness Absence 1/2

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

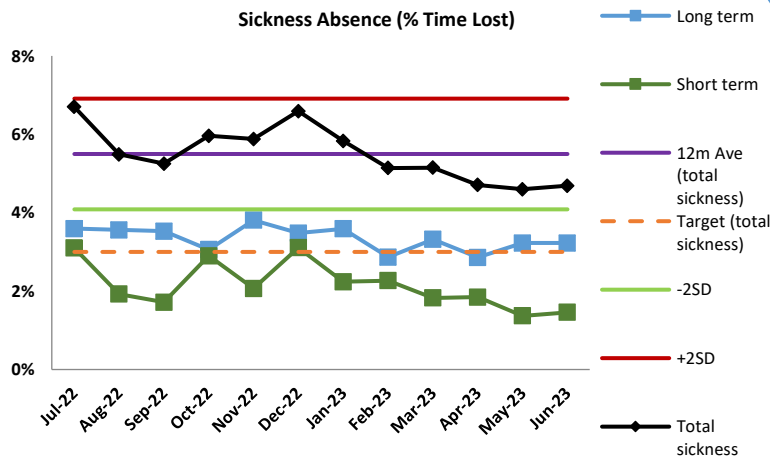
	Jun-22	Jun-23	
Long-term	3.90	3.50%	↓
Short-term	2.68	2.00%	↓
Total	6.58	5.50%	↓

- 271,438 FTE working days were lost due to sickness (including COVID-19 related sickness) in the year to June 2023, compared to 329,985 for the previous year.
- Overall sickness absence (including COVID-19 related sickness) is 5.50%, which is down from end of June 2022 position of 6.13% (% FTE Time Lost).
- The top three reasons for non-COVID related sickness absence are Anxiety/stress/depression/other psychiatric illnesses (28%), Other Musculoskeletal (10%), and Cold, Cough, Flu (10%).
- The top reason for “Other” absences is Maternity Leave (50% of total absence).

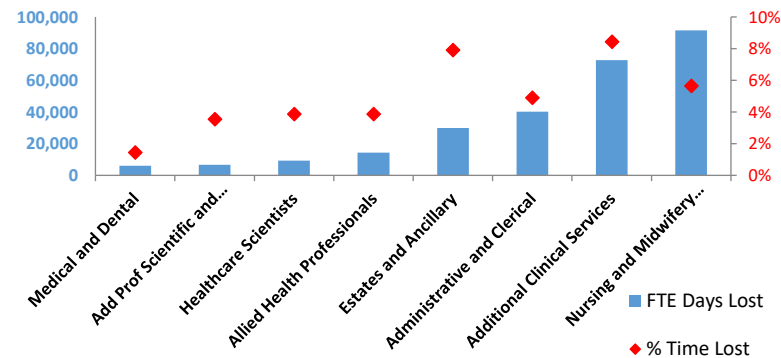
Sickness Absence (% Time Lost) by Directorate



Sickness Absence (% Time Lost)

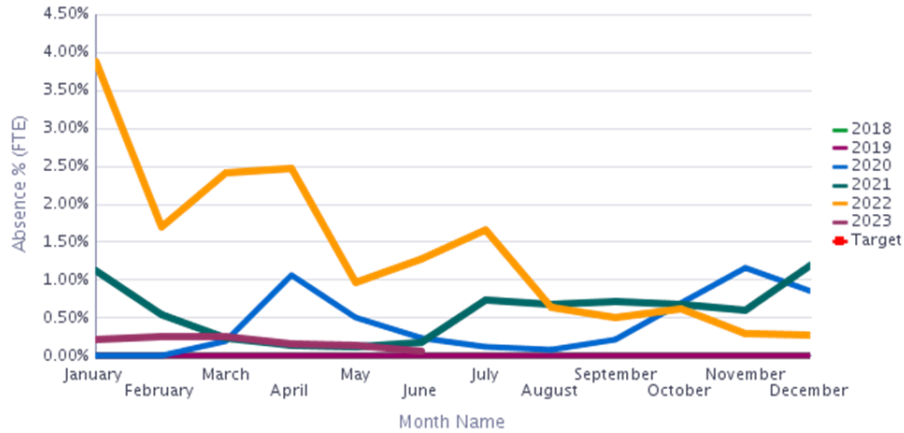


Sickness Absence by Staff Group

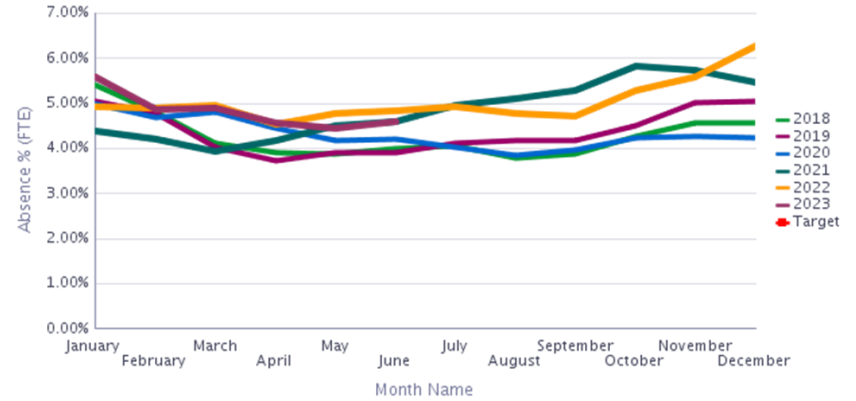


People: Sickness Absence 2/2

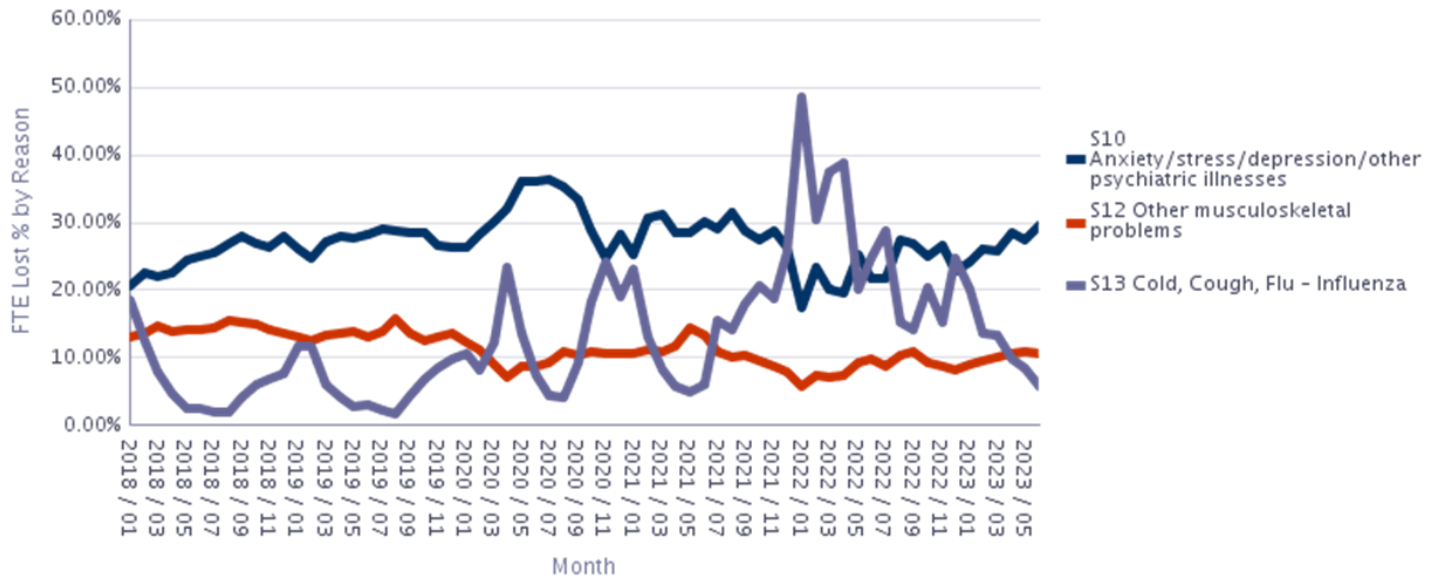
COVID-19 Related Sickness Jan 2018 – June 2023 (%FTE)



Non-COVID-19 Related Sickness Jan 2018 – June 2023 (%FTE)

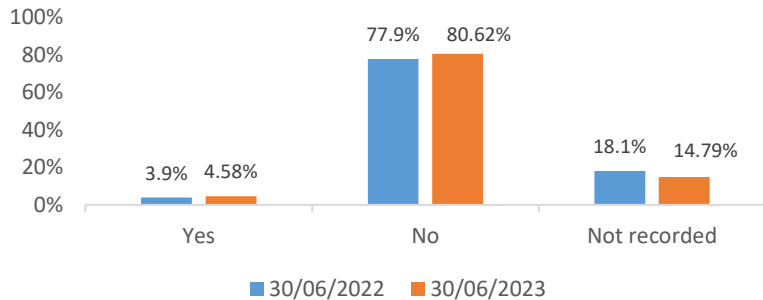


Top 3 Sickness Reasons Jan 2018 - June 2023 (%FTE)
S13 includes Covid sickness

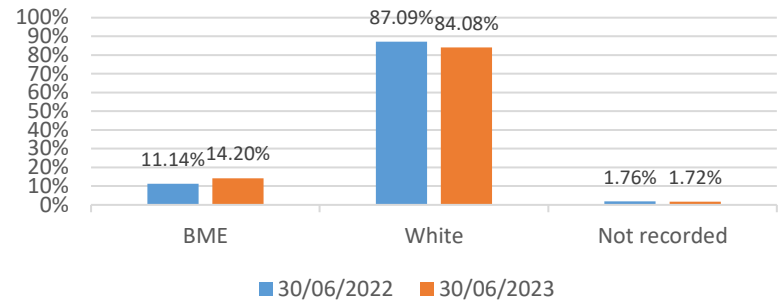


People: Equality and Diversity

Disability %

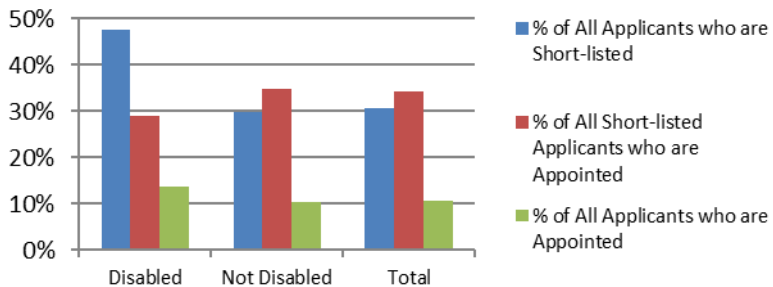


Ethnicity %

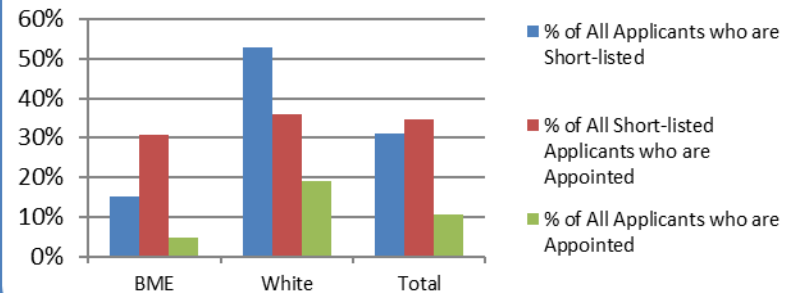


- The graphs above identify, by disability and ethnicity, the recruitment outcome of applicants during the twelve months ending June 2023.

Analysis of Recruitment Activity by Disability

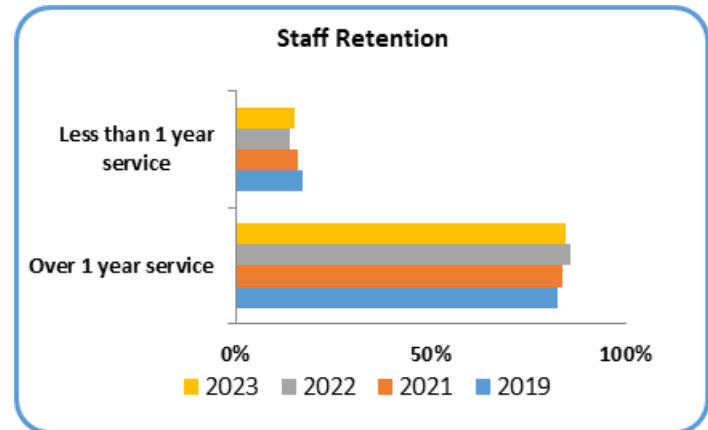
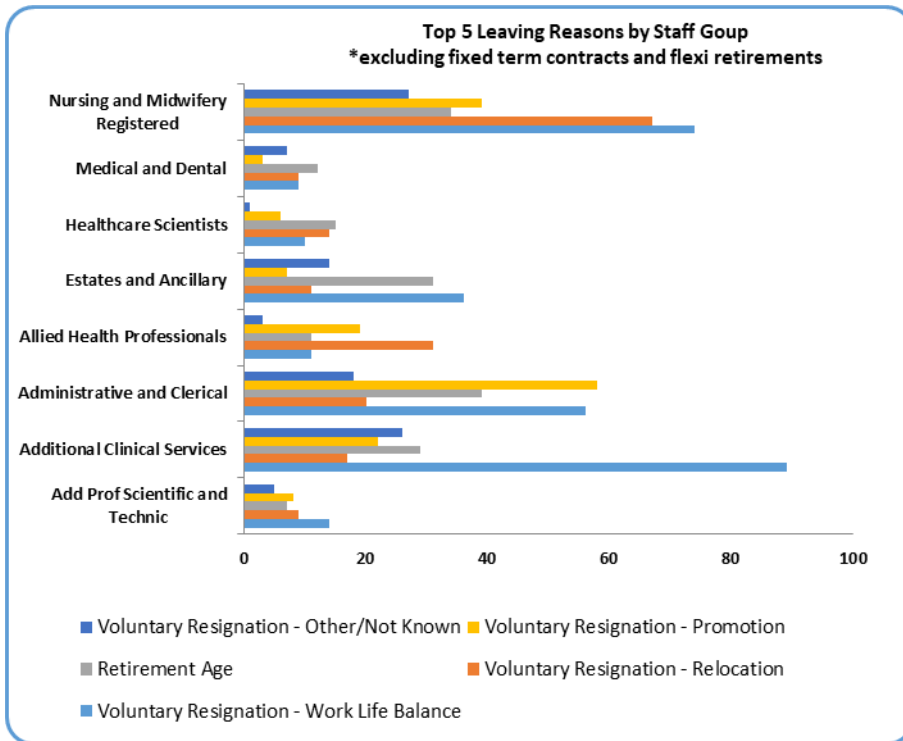
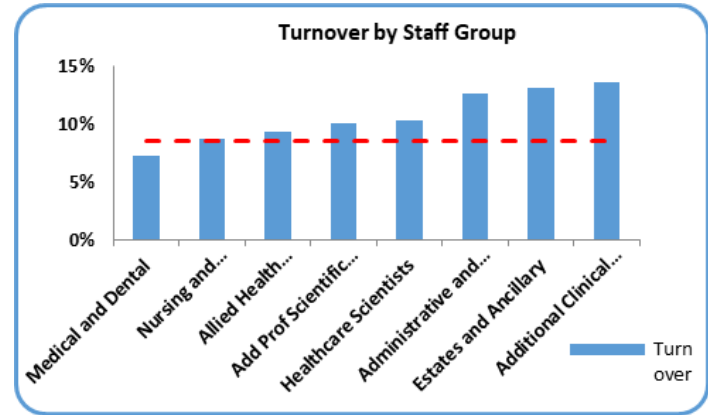
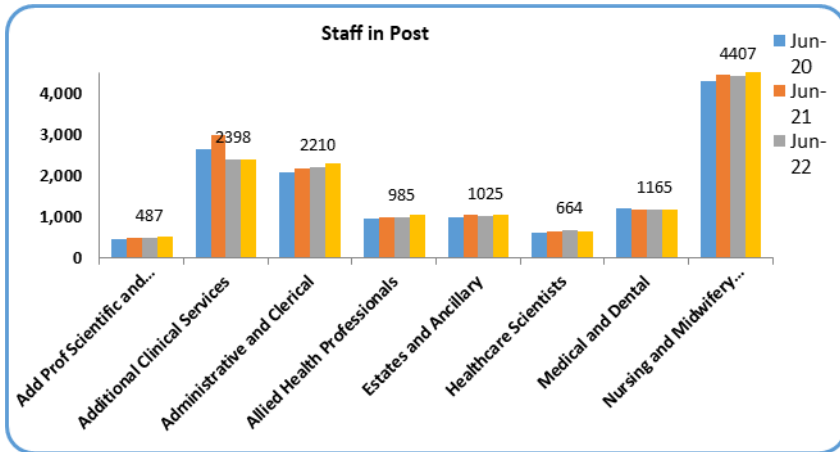


Analysis of Recruitment Activity by Ethnicity



- The graphs above identify, by headcount, the percentage of staff in post in July 2022 and July 2023 by disability and ethnicity. The percentage of staff employed disclosing a disability has increased from 3.94% to 4.58% and the percentage of BAME staff has increased from 11.14% to 14.20%.

People: Workforce 1/3



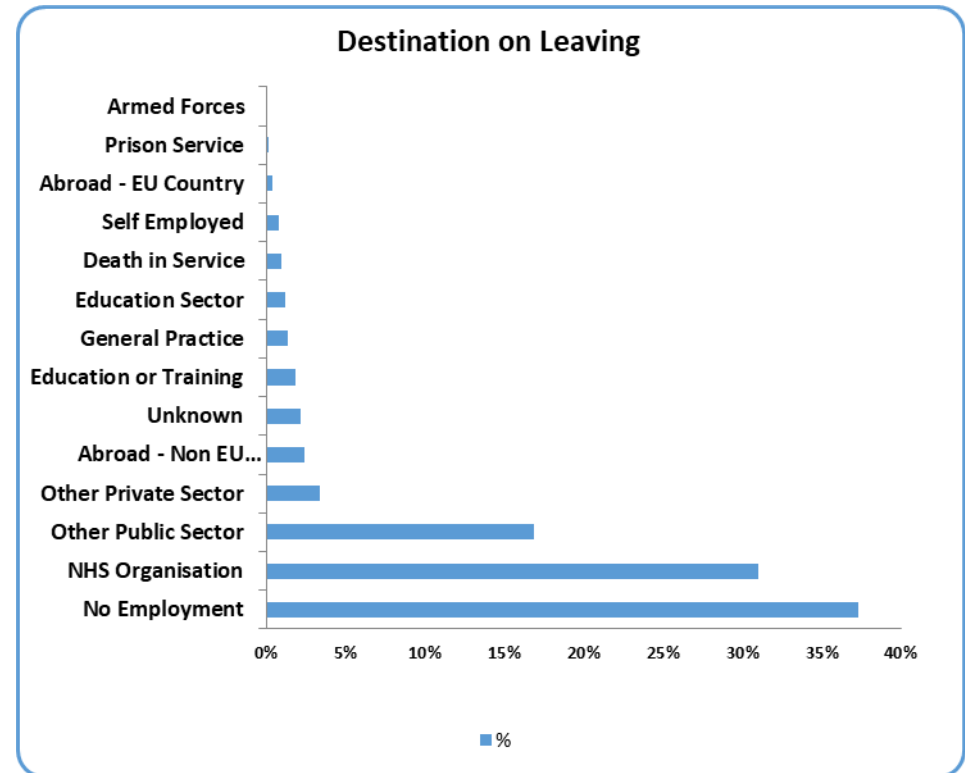
- Staff in post has increased by 3.22% since June 2020. The staff groups with the largest increase are Add Prof Scientific and Technic and Administrative and Clerical.
- Staff turnover has decreased from 16% in June 2022 to 11% in June 2023, against a target of 8.5%.
- The total number of leavers in the period July 2022 to June 2023 was 1,624.
- Retention for staff over 1 year service is 84.8%, a decrease from 86.6% in June 2022.

People: Workforce 2/3

Turnover by Clinical Board

- Only 31% of leavers across the Trust disclosed they were going to another NHS organisation.

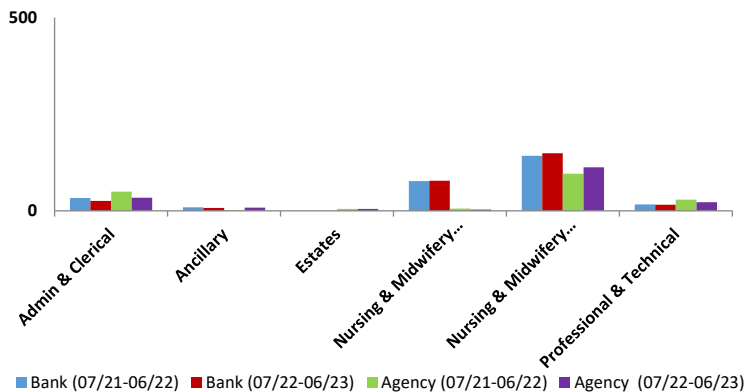
Directorate	Turnover
NCB Regional Drugs & Therapeutics	5.80%
NCB Patient Services	8.44%
NCB Chief Operating Officer	9.73%
Clinical Board 3	10.06%
Clinical Board 7	10.71%
Clinical Board 5	11.11%
Clinical Board 6	11.92%
Clinical Board 2	11.97%
Clinical Board 4	12.11%
NCB Business & Development	12.53%
Clinical Board 8	12.58%
Clinical Board 1	12.79%
NCB Estates	14.02%
NCB Supplies	14.20%
NCB Information Management & Technology	14.46%
NCB Chief Executive	15.93%
NCB Medical Director	18.04%
NCB Finance	18.92%
NCB Human Resources	19.11%
NCB Hosted Staff	22.89%
NCB Integrated Covid Hub North East	38.60%
Trust Total	11.54%



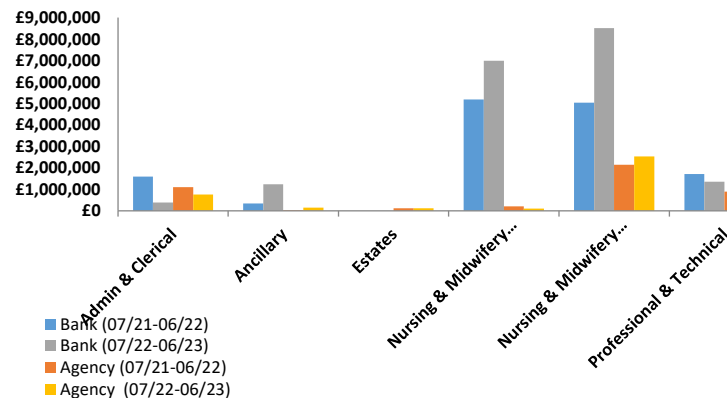
Please refer to the key on the last slide for the full list of Clinical Board names

People: Workforce 3/3

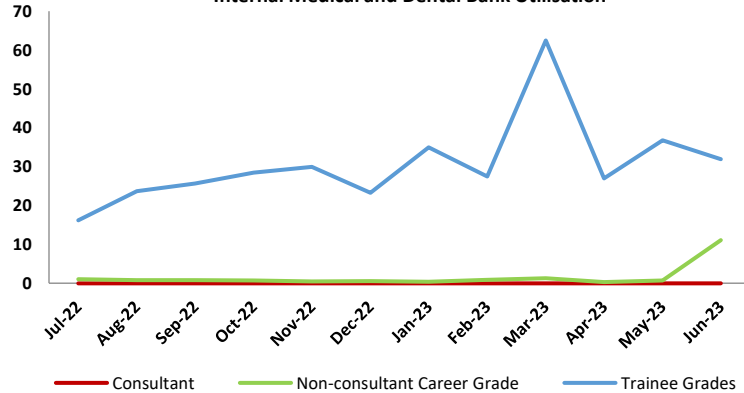
Bank and Agency Utilisation by Staff Group (FTE)



Bank and Agency Utilisation by Staff Group (Cost)

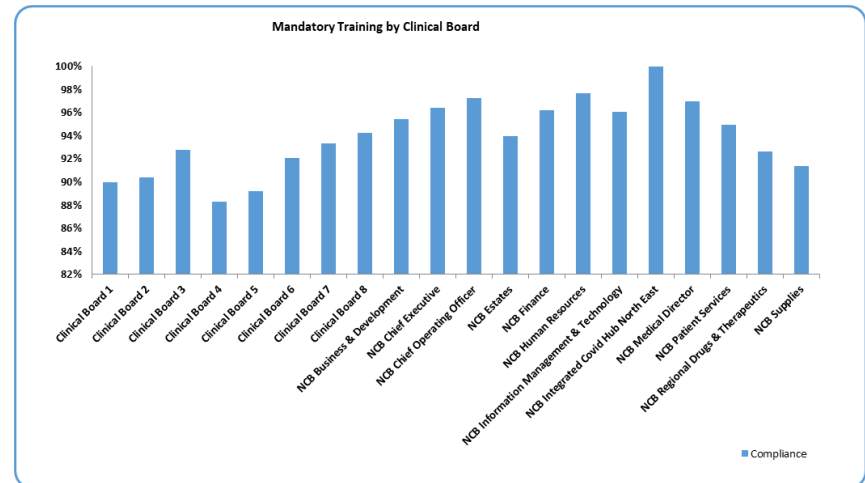
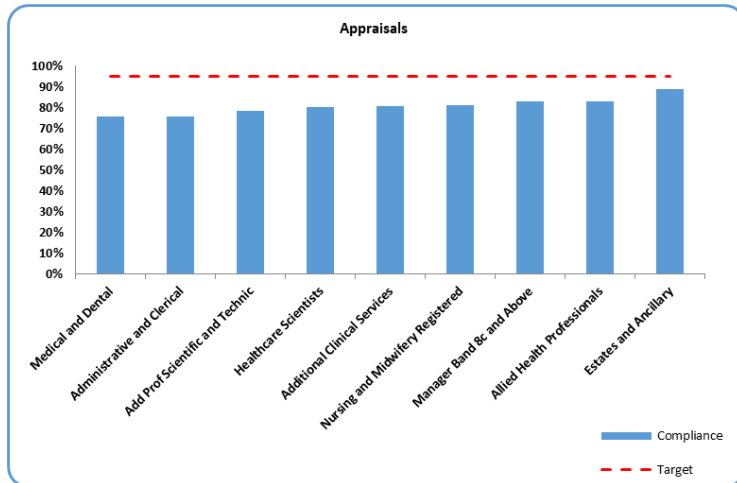
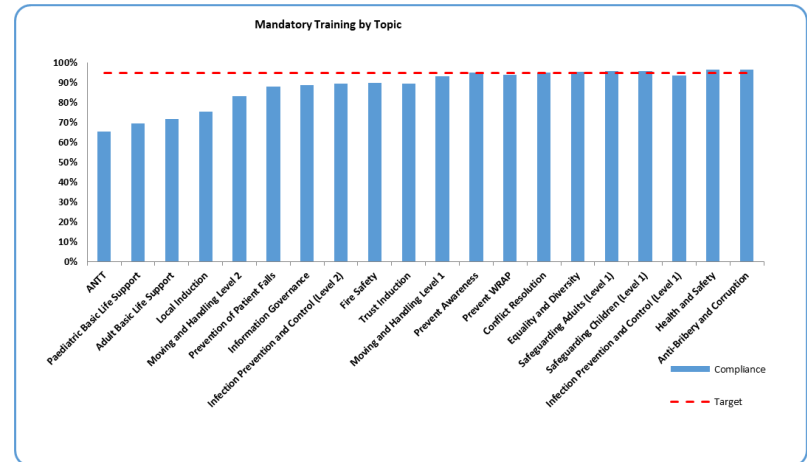
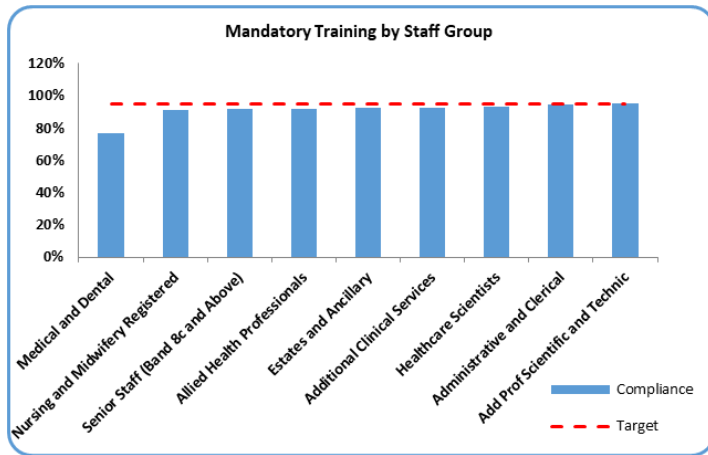


Internal Medical and Dental Bank Utilisation



Comparing the periods July 2021 – June 2022 to July 2022 – June 2023, overall bank utilisation decreased from 277 wte to 274 wte and agency utilisation has decreased from 184 wte to 183 wte.

People: Delivering Excellence in Education & Training



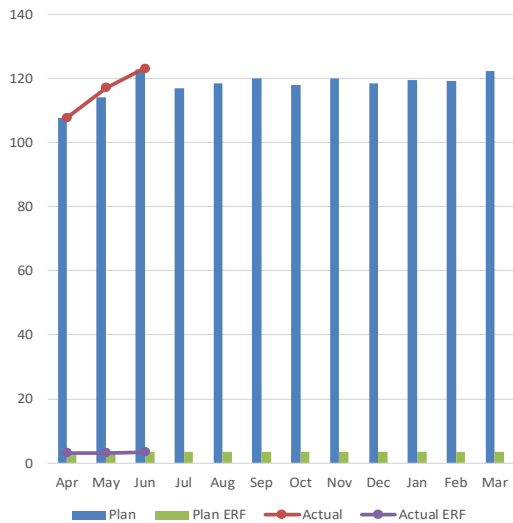
- Mandatory training compliance stands at 92% at end of June 2023, against an end of year target of 95%. The June 2022 position was 87.96%.
- Medical and Dental are the staff group with the lowest training compliance at 76.9% in June 2023 compared to 71.6% in June 2022.
- Appraisal compliance stands at 80.44%, at end of June 2023, against an end of year target of 95%. The June 2022 position was 73.57%. Interventions are in hand to improve this position.

Finance: Overall Financial Position

Financial Overview as at 30th June 2023

Income

2023/24 Income - Plan vs Actual £m



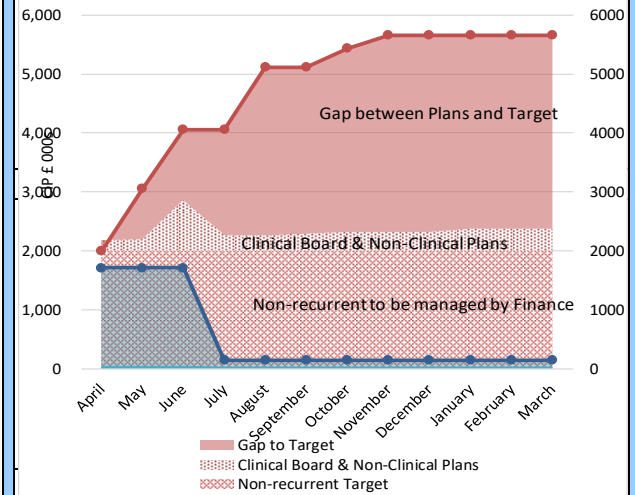
Expenditure

2023/24 Pay & Non Pay - Plan vs Actual £m



Cost Improvement Analysis

CIP 23/24 at Month 3

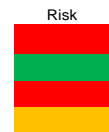


Commentary

This page summarises the financial position of the Trust for the period ending 30 June 2023. The Trust has agreed a Financial Plan for 2023/24 with a break-even position. As at Month 3 the Trust is reporting an adverse variance of £1.56 millions against the agreed Financial Plan. This mainly relates to the financial impact of industrial action that is apparent within the spend trajectory. The Trust incurred expenditure of £374 million and received income of £364 million, leaving a deficit of £9.9 million.

The delivery of the plan relies on a number of factors which are subject to significant risk

- Delivery of required levels of activity compared with 2019/20 activity levels. This target is subject to change due to the impact of industrial action on activity plans.
- Reliance on non-recurrent income and expenditure benefits
- Achievement of CIP targets
- Assumptions relating to inflation, subject to change and unfunded



Capital Expenditure

The Plan for June is £7.6 million and the year to date expenditure is £2.5 million creating a variance of £5 million to date. This is expected to catch up.



Key: Clinical Board Names

Clinical Board	Clinical Board Name
1	Family Health Clinical Board
2	Surgical and Specialist Services (mainly Royal Victoria Infirmary)
3	Peri Operative and Critical Care
4	Cardiothoracic Services
5	Medicine and Emergency Care
6	Surgical and Associated Services (mainly Freeman Hospital)
7	Cancer and Haematology Board
8	Clinical and Research Services

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The Newcastle upon Tyne Hospitals
NHS Foundation Trust

COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
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 of Governors on the Trust’s elective recovery progress as well as performance against NHS England (NHSE) priorities for 2023/24 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"/>
Link to Board Assurance Framework [BAF]	Strategic Risk SO1.1: [Capacity and demand pressures] Strategic Risk SO5.8 [Activity delivery] Details compliance against NHSE plan priorities for 2023/24. Details compliance against national access standards which are written into the NHS standard contract.						
Reports previously considered by	Regular report.						

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 2023/24 planning round.

- Overall, activity delivery levels for June dropped across all points of delivery compared to May, and therefore remain short of both trajectory and target.
- The Trust delivered day case activity equivalent to 97.5% of the re-based 2019/20 baseline in June (adjusted for working days and changes in service provision), with overnight elective activity delivery measured at 73.3%.
- New outpatient activity was delivered at an equivalent of 99.7% of 2019/20. Outpatient procedure delivery is currently being recorded at 75.9% for June - although this figure is subject to potential improvement as the Trust is currently managing a slight coding backlog.
- Future editions of this report will detail value-weighted activity (VWA) delivery, for which the Trust will be measured against a target of 109% of 2019/20 activity delivery.
- Newcastle Hospitals achieved the 76% 4-hour Accident and Emergency (A&E) standard in June with overall performance of 79.5%.
- Six out of nine cancer standards fell short of target in May 2023, however the 28 Day Faster Diagnosis Standard was achieved for the seventh month in a row.
- Among these nine cancer standards, Newcastle Hospitals did not meet the key operational standard that 85% of patients wait no more than 62 days from urgent GP referral to first cancer treatment, as only 53.9% of patients were treated within 62 days. Urology (20.7%), Lower GI (25.0%), Gynae (28.6%) and Lung (28.6%) were the lowest performing tumour groups against the 85% target. Based on a sample queue of 100 cancer patients waiting at Newcastle Hospitals, the 50th patient would have been treated after 60 days, with the 85th patient ultimately treated after 98 days. 2/3 of the patients waiting longer than 98 days were referred from other Trusts. This reflects a particular issue with late tertiary referrals, as around 50% are received from other Trusts after their 38 day target.
- NHS England's 2023/24 planning guidance stated the requirement for Newcastle Hospitals to reduce the backlog of cancer patients waiting over 62 days to 200 by March 2024 (below pre-pandemic volumes). The volume of patients waiting >62 days for cancer treatment decreased in May to 259, only slightly above trajectory (253). The tumour groups with the biggest >62 day backlogs are Urology (68), Upper GI (46), Lung (46) and Skin (43). The Trust's longest waiting patient is at 259 days, with this patient's pathway impacted by unique co-morbidities. The median patient waiting within the >62 day backlog has waited 90 days.
- At the end of May the Trust still had 13 patients waiting >104 weeks, with 11 of these patients waiting for spinal surgery which has nationally acknowledged capacity issues.
- 103 patients had a waiting time of >78 weeks, with 54 of these waiting for non-Spinal care – the Trust had been asked by NHSE to reduce waiters in this category to

Agenda item 10.2

zero by the end of June 2023. The Trust's trajectory is to achieve this instead by the end of August 2023.

- Newcastle Hospitals did not meet the standard that 92% of patients on incomplete Referral to Treatment (RTT) pathways wait less than 18 weeks, as compliance was 67.0% in June.

The Council of Governors is asked to receive the report.

Trust Performance Board Report

Produced: July 2023

Data: June 2023



Healthcare at its best
with people at our heart

NHSE Plan Requirements 2023/24

Metric	Requirement	Mar-23	Apr-23	May-23	Jun-23	RAG Rating: Jun-23*	
						Trajectory	Target
Cumulative Activity Delivery (Spec. Acute)							
Day Case	109% of 19/20 value-weighted activity (overall, monthly cumulative) N.B. Currently being reported by volume, not VWA	96.3%	104.3%	104.5%	101.9%	108.7%	109.0%
Elective Overnight		79.4%	80.6%	81.3%	78.5%	107.1%	109.0%
Outpatient New		98.9%	97.8%	101.1%	100.6%	101.0%	109.0%
Outpatient Procedures		101.5%	89.6%	90.7%	85.3%	101.6%	109.0%
Total		98.4%	95.6%	97.5%	94.7%	103.0%	109.0%
Urgent & Emergency Care							
A&E Arrival to Admission/Discharge	>=76% under 4 hours (by Mar-24)	75.6%	77.5%	77.1%	79.5%	80.1%	>=76%
Adult General & Acute Bed Occupancy	<=92%	93.3%	89.3%	88.6%	88.1%	91.7%	<=92%
Urgent Community Response Standard	>=70% under 2 hours	90.0%	89.0%	85.0%	TBC	N/A	>=70%
Cancer Care							
>62 Day Cancer Waiters	Reduce to <=200 (by Mar-24)	197	231	278	259	253	<=200
28 Day Faster Diagnosis	>=75% (by Mar-24)	82.7%	77.6%	81.9%	TBC	75.0%	75.0%
Elective Care							
>104 Week Waiters	Zero	21	21	17	13	12	0
>78 Week Waiters	Zero	159	164	170	103	62	0
>65 Week Waiters	Zero (by Mar-24)	1,075	1,051	1,078	1,090	1,179	0 (Mar-24)
>52 Week Waiters	Reduction (Zero by e/o Mar-25)	3,627	3,877	4,149	4,135	4,050	0 (Mar-25)
Diagnostics							
Diagnostic Activity**	Appropriate levels to reduce waits	98.0%	111.0%	110.4%	103.9%	105.4%	N/A
>6 Weeks Waiters	<=5% (by Mar-25)	21.1%	21.6%	23.0%	23.9%	N/A	<=5%
Outpatient Transformation							
PIFU Take-up	>=5% of all OP atts. (by Mar-24)	1.3%	1.7%	2.0%	2.3%	1.75%	5.0% (Mar-24)
Outpatient Follow-up Reduction	<=75% of 19/20	102.6%	102.1%	109.5%	98.4%	97.9%	<=75%

* 1 month prior for 28 Day FDS

** CT, MRI, Non-obs US, Endoscopy & ECHO.

Operational Standards

Metric	Standard	Mar-23	Apr-23	May-23	Jun-23	RAG Rating: Jun-23*
Urgent & Emergency Care						
Ambulance Handovers	Zero over 60 mins	14	8	10	7	
A&E Arrival to Admission/Discharge	>=76% under 4 hours (by Mar-24)	75.6%	77.5%	77.1%	79.5%	
	<2% over 12 hours	2.5%	1.6%	0.9%	0.8%	
Urgent Community Response Standard	70% under 2 hours	90.0%	89.0%	85.0%	TBC	
Cancer Care						
Two Week Wait (Suspected Cancer)	93%	84.5%	78.2%	77.4%	TBC	
Two Week Wait (Breast Symptomatic)	93%	43.7%	32.3%	37.6%	TBC	
28 Day Faster Diagnosis	75% (by Mar-24)	82.7%	77.6%	81.9%	TBC	
31 Days (First Treatment)	96%	86.3%	86.6%	85.7%	TBC	
31 Days (Subsq. Treat. - Surgery)	94%	57.6%	61.4%	71.8%	TBC	
31 Days (Subsq. Treat. - Drugs)	98%	96.1%	97.7%	98.1%	TBC	
31 Days (Subsq. Treat. - Radiotherapy)	94%	100.0%	97.4%	96.6%	TBC	
62 Days (Treatment)	85%	60.4%	61.1%	53.9%	TBC	
62 Days (Screening)	90%	85.0%	85.1%	86.5%	TBC	
Elective Care						
18 Weeks RTT	92%	67.4%	66.5%	67.6%	67.0%	
>65 Week Waiters	Zero (by Mar-24)	1,075	1,051	1,078	1,090	
>6 Weeks Diagnostic Waiters	<=1%	21.1%	21.6%	23.0%	23.9%	
Cancelled Ops. Rescheduled >28 Days	Zero	10	4	3	7	
Urgent Ops. Cancelled Twice	Zero	0	0	0	0	
Other						
Duty of Candour	Zero	0	0	0	0	
Mixed Sex Accommodation Breach	Zero	112	70	65	70	
MRSA Cases	Zero	0	0	0	0	
C-Difficile Cases	<=165 (FY Cumulative)	172	11	15	28	
VTE Risk Assessment	95%	97.1%	96.0%	96.1%	TBC	
Sepsis Screening Treat. (Emergency)	>=90% (of sample) under 1 hour	66.0%	91.0%	91.0%	91.0%	
Sepsis Screening Treat. (All)		59.0%	66.0%	66.0%	66.0%	

* 1 month prior for Cancer Care

Other Metrics (1/2)

Metric	Mar-23	Apr-23	May-23	Jun-23
Emergency Care				
Ambulance Arrivals	3,016	2,967	2,978	2,822
Ambulance Handovers <15 mins	74.0%	76.2%	68.8%	74.5%
Ambulance Handovers <30 mins	94.8%	94.8%	93.5%	94.5%
Ambulance Handovers <60 mins	99.5%	99.7%	99.7%	99.8%
Type 1 Performance (A&E 4 hour)	60.2%	63.7%	62.5%	66.9%
Type 1 Attendances (Main ED)	12,258	11,182	12,539	11,768
Type 2 Attendances (Eye Casualty)	1,677	1,426	1,598	1,589
Type 3 Attendances (UTC)	5,359	4,933	5,655	5,089
Patient Flow				
Covid Inpatients (average)	59	46	23	11
Emergency Admissions	6,382	5,734	6,189	6,102
G&A Bed Occupancy	93.3%	89.3%	88.6%	88.1%
Critical Care Bed Occupancy	71.5%	67.0%	66.2%	67.5%
Bed Days Lost (average)	50	36	27	56
Medical Boarders	116	105	87	46
Length Of Stay >7 Days	807	759	782	747
Length Of Stay >21 Days	383	353	352	349

Other Metrics (2/2)

Metric	Mar-23	Apr-23	May-23	Jun-23
Cancer Care				
2WW Appointments	2,260	2,197	2,425	TBC
Cancer First Treatments	604	516	561	TBC
Planned Care				
2WW Referrals	2,662	2,298	2,826	3,254
Urgent Referrals	5,842	5,029	6,102	5,864
Routine Referrals	26,562	21,378	25,857	26,514
Specialist Advice Requests (% of New OP Atts.)	9.3%	8.7%	8.9%	9.2%
Day Case Activity (Specific Acute (SA))	11,266	9,358	10,436	10,591
Overnight Elective Activity (SA)	1,823	1,445	1,653	1,750
New Outpatient Attendances (SA)	22,803	18,690	22,356	23,419
Outpatient Procedure Activity (SA)	19,030	13,893	15,300	14,717
Review Outpatient Attendances (SA)	65,216	53,844	63,028	63,170
Diagnostic Tests	20,512	17,657	19,792	20,777
Outpatient DNA Rate	7.9%	7.6%	8.3%	8.6%
Virtual Attendances	14.4%	14.2%	14.4%	14.1%
RTT Waiting List Size	100,156	101,000	106,847	106,801

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COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
Title	Update from Committee Chairs						
Report of	Non-Executive Director Committee Chairs						
Prepared by	Mrs Lauren Thompson, Corporate Governance Manager / Deputy Trust Secretary Mrs Gillian Elsander, PA to Chairman and Trust Secretary / Corporate Governance 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 Council of Governors in June 2023:</p> <ul style="list-style-type: none"> • Charity Committee – 8 June 2023; • People Committee – 22 June 2023; • Quality Committee – 18 July 2023; • Finance Committee – 26 July 2023; and • Audit Committee – 28 June 2023 [EXTRAORDINARY] and 25 July 2023. 						
Recommendation	The Council of Governors is asked to (i) receive the update and (ii) note the contents.						
Links to Strategic Objectives	Links to all strategic objectives						
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"/>
Link to Board Assurance Framework [BAF]	No direct link.						
Reports previously considered by	Regular report to Trust Board and Council of Governors.						

UPDATE FROM COMMITTEE CHAIRS

EXECUTIVE SUMMARY

This report provides an update to the Council of Governors 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 2023.

UPDATE FROM COMMITTEE CHAIRS

1. CHARITY COMMITTEE

A meeting of the Charity Committee took place on 8 June 2023. The meeting was convened primarily to discuss several grant applications in advance of the next formal meeting.

During the meeting, the Committee approved applications which totalled £ 238,295.00 as follows:

- Children Services: The Teapot Trust – Art therapy provision for paediatric rheumatology patients at the Great North Children’s Hospital - £79,758.00
- Peri-Operative & Critical Care: Creating and installing information boards within the four NUTH adult critical care units - £26,664.00
- Peri-operative & Critical care: Difficult airway management training equipment for anaesthetist staff - £30,373.00
- People First: The People First (PF) Café: a place of ‘happiness and hope’ - £51,500.00
- Radio Tyneside: Digital Technology Studio Upgrade - £50,000.00

The next meeting of the Committee will take place on 10 August 2023.

2. PEOPLE COMMITTEE

A meeting of the People Committee took place on 22 June 2023. During the meeting, the main areas of discussion included:

- An industrial action status update was provided.
- The annual Trade Union Facility Time report which was approved.
- The Chief People Officer presented the planning and actions taken against the People Priorities.
- A detailed update in relation to Statutory and Mandatory Training was provided.
- The Guardian of Safe Working provided a comprehensive quarterly update and the annual report.
- The People and Culture dashboard was received and discussed.
- The NHS Equality Diversity and Inclusion Improvement plan was received.

The next formal meeting of the Committee will take place on 22 August 2023.

3. QUALITY COMMITTEE

A meeting of the Quality Committee took place on 18 July 2023. During the meeting, the main areas of discussion included:

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- The Head of Corporate Risk and Assurance presented the Quality Committee Risk Report.
- The following management group reports were received and discussed:
 - Clinical Outcomes and Effectiveness Group annual report; and
 - Clinical Outcomes and Effectiveness Group Chairs regular report.
- The Deputy Chief Operating officer presented the Intensive Support Team Report.
- The Director of Quality and Effectiveness and Director of Midwifery presented the CNST quarterly report.
- A comprehensive Newcastle Improvement update was received.
- An update was provided in relation to the Trust's response to the recent Care Quality Commission (CQC) inspections.
- The Deputy Director of Estates provided an update on the Patient-Led Assessments of the Care Environment (PLACE) assessments.
- The Committee received an update on leadership walkabouts and spotlights on services.

The next meeting of the Committee will take place on 19 September 2023.

4. FINANCE COMMITTEE

A meeting of the Finance Committee took place on 26 July 2023. During the meeting, the main areas of discussion included:

- The Chief Finance Officer provided an update on the month 3 finance position.
- The Productivity and Efficiency programme was discussed.
- The Executive Director of Business, Development and Enterprise presented the performance report and activity plan progress.
- The Director of Estates provided an update on Capital including projects.
- Tenders and Business Cases were presented for approval.
- The Committee received the Integrated Covid Hub North East (ICHNE), Nightingale Hospital North East (NHNE) and Day Treatment Centre (DTC) close out report.

The next meeting of the Committee will take place on 25 September 2023.

5. AUDIT COMMITTEE

An extraordinary meeting of the Audit Committee took place on 28 June 2023 to approve the annual report and accounts for 2022/23.

A meeting of the Audit Committee took place on 25 July 2023. During the meeting, the main areas of discussion included:

- The Head of Corporate Risk and Assurance presented the Audit Committee Risk Report.

Agenda item 10.3

- The Standards of Business Conduct Annual Report, including the Chairman's Fit and Proper Persons Statement.
- The draft Charity Annual Financial Statements.
- A detailed review of the Scheme of Delegation, Standing Financial Instructions and Standing Orders.
- A review of the Clinical Audit Process.
- External audit, internal audit and counter fraud reports.
- The Modern Slavery and Human Trafficking Act Annual Statement.
- The Committee received a number of reports including:
 - Debtors and creditors balances;
 - Schedule of losses and Compensation; and
- A review of the performance of external audit, internal audit and counter fraud reports.

The next meeting of the Committee will take place on 24 October 2023.

6. RECOMMENDATIONS

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

Report of Lauren Thompson

Corporate Governance Manager / Deputy Trust Secretary

28 July 2023

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The Newcastle upon Tyne Hospitals
NHS Foundation Trust

COUNCIL OF GOVERNORS

Date of meeting	17 August 2023						
Title	Non-Executive Director (NED) Activity Report						
Report of	Professor Sir John Burn, Chairman						
Prepared by	Lauren Thompson, Corporate Governance Manager / Deputy Trust Secretary Gillian Elsener, Corporate Governance Officer / PA to Chairman and 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 type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		
Summary	<p>A recommendation was made at a previous Nominations Committee meeting that a report be developed detailing Chair and Non-Executive Director (NED) activities for sharing at the Council of Governors meetings twice-yearly (for information). The aim being to demonstrate the breadth of Chair and NED activity, as well as engagement, across the Trust.</p> <p>This report therefore details the Chairman and Non-Executive Director roles and activity from 1 December 2022 to 31 May 2023.</p>						
Recommendation	The Council of Governors is asked to note the content of the report.						
Links to Strategic Objectives	Performance – Being outstanding, now and in the future. Putting patients at the heart of everything we do. Providing care of the highest standard focussing on safety and quality.						
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 type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Impact detail	Impacts on those highlighted at a strategic and reputational level.						
Reports previously considered by	Presented to the Council of Governors twice a year. The first report was shared/discussed at the Council of Governors held in February 2023. This report, being the second report was shared at the Nominations Committee meeting on 1 August, in advance of the 17 August Council meeting.						

NON-EXECUTIVE DIRECTOR (NED) ACTIVITY REPORT TEMPLATE

EXECUTIVE SUMMARY

This report provides an update on the Chairman and Non-Executive Director roles and activity from 1 December 2022 to 31 May 2023 including:

- Board of Directors;
- Board Development Workshop;
- Committee meetings;
- Spotlight on Services;
- Leadership Walkabouts;
- Governor Working Groups; and
- Other Trust meetings / activity.

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

NON-EXECUTIVE DIRECTOR (NED) ACTIVITY REPORT

1. CHAIRMAN AND NON-EXECUTIVE DIRECTOR ROLES

- Sir John Burn [SJB]:
 - Chair of the Board of Directors, Council of Governors, Nominations Committee, Annual Members Meeting and Research Innovation and Infrastructure Projects Group;
 - Member of Appointments and Remuneration Committee, North Integrated Care Partnership (ICP) Chairs Meeting, North East and North Cumbria Integrated Care System (ICS) Foundation Trust Chairs Meeting; and
 - Participates in the North ICP Chief Executive and Chair Meeting, NHS Confederation Chairs Group Meeting, Local Authority Leaders Meeting, Voluntary and Community Sector Representatives Meeting.

- Bill Macleod [BM]:
 - Chair of the Audit Committee;
 - Deputy Chair of the Appointments and Remuneration Committee;
 - Member of the Finance Committee, Charity Committee, Appointments and Remuneration Committee and the Research and Innovation Infrastructure Projects Group;
 - Senior Digital Briefing Group (Member);
 - Participates in the Local Clinical Excellence Awards Committee; and
 - NED Lead for Emergency Preparedness and Security Management.

- Kath McCourt [KM]:
 - Member of the Quality Committee, People Committee and Appointments and Remuneration Committee;
 - NED Lead for learning from deaths; and
 - NED Lead for Maternity – including Maternity Board Safety Champion and Breastfeeding Guardian.

- Graeme Chapman [GC]:
 - Chair of the Quality Committee and Commercial Strategy Group;
 - Member of the Finance Committee (and undertook the role of Interim Chair between February and May 2023), Charity Committee and Audit Committee;
 - Sir Bobby Robson Foundation (Member);
 - Community Diagnostic Centre – Strategic Oversight Group (Vice Chair);
 - Senior Digital Briefing Group (Member);
 - Newcastle Health Innovation Partners (Strategy Board Chair, Advisory Board Chair); and
 - Cyber Security Network (External Member).

- Jill Baker [JB]:
 - Chair of the Charity Committee; and

Agenda item 10.4

- NED Lead for Palliative Care and End of Life.
- Jonathan Jowett [JJ]:
 - Chair of the People Committee and Appointments and Remuneration Committee; and
 - Member of the Audit Committee and the Nominations Committee.
- Steph Edusei [SE]:
 - Member of the Quality Committee and People Committee; and
 - Freedom to Speak Up NED lead; and
 - Wellbeing Guardian.
- Liz Bromley [LB]:
 - Interim Finance Committee member.
- Christine Smith [CS]:
 - Chair of the Finance Committee; and
 - Member of the Audit Committee.
- David Burn [DB] (Associate NED – Non-voting, non-remunerated):
 - Substantive role as Pro-Vice-Chancellor of the Faculty of Medical Sciences at Newcastle University;
 - Director of Newcastle Health Innovation Partners; and
 - Member of the Strategic Research Group.
- Pam Smith [PS] (Associate NED – Non-voting, non-remunerated):
 - Substantive role as Chief Executive of Newcastle City Council.

A number of the NEDs also participate in the Well led Group (a Task and Finish Group).

As part of robust succession planning, there will be some small changes in NED Committee membership which will be detailed in the next activity report.

2. CHAIRMAN AND NON-EXECUTIVE DIRECTOR ACTIVITY

The Chairman and NEDs attended several meetings during the period, apologies were received as follows:

- Private and Public Board of Directors – Extraordinary to approve CNST declaration.
 - NED apologies received from Jill Baker.

Private and Public Board of Directors – 26 January 2023.

- NED apologies received for Private Board: Graeme Chapman and Pam Smith.
- NED apologies received for Public Board: Graeme Chapman, Pam Smith and David Burn.

Private and Public Board of Directors – 23 March 2023.

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- NED apologies received for Private Board: David Burn.
- NED apologies received for Public Board: Jill Baker and David Burn.

Private and Public Board of Directors – 25 May 2023.

- NED apologies received for Private Board: Pam Smith.
- NED apologies received for Public Board: Jonathan Jowett, Pam Smith and David Burn.

- Board Development Workshop – 9 February 2023.

- NED apologies received from Jill Baker, Steph Edusei, Liz Bromley and David Burn.

Board Development Workshop – 27 April 2023.

- NED apologies received from Pam Smith.

- Trust Committee meetings:

- Quality Committee – 17 January 2023, 21 March 2023 and 16 May 2023;
- Quality Committee Deep Dive - 21 February 2023 – Outpatients and Service Provision for Children and Young People with Mental Health Problems;
- Finance Committee – 19 January 2023, 22 March 2023 and 24 May 2023;
- People Committee – 6 January 2023, 21 February 2023 and 18 April 2023;
- Audit Committee – 24 January 2023 and 25 April 2023;
- Charity Committee – 16 February 2023; and
- Charity Committee Grants Meeting – 10 March 2023 and 6 April 2023.

For the Audit, Quality, Finance and People Committees the Corporate Governance Office hold an agenda setting meeting prior to each Committee meeting with the Chair of each Committee.

- Spotlight on Services:

- Endoscopy – 13 December 2022 (Chairman and 3 NEDs attended);
- Paediatric Immunology – 19 January 2023 (Chairman and 4 NEDs attended);
and
- Dental Labs – 22 May 2023 (Chairman and 1 NED attended).

- Leadership Walkabouts conducted with NEDs:

- Oral and Maxillofacial Surgery Department (RVI);
- Ward 43 (RVI);
- Neurology, Critical Care, Ophthalmology; and
- Colorectal Surgery.

- Governor Working Groups:

- Business and Development (B&D) Working Group – 13 April 2023.
Bill Macleod attended.
- People, Engagement and Membership (PEM) Working Group – 14 March 2023.
Jonathan Jowett attended.
- People, Engagement and Membership (PEM) Working Group – 11 April 2023.

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- Kath McCourt and Jill Baker attended.
- People, Engagement and Membership (PEM) Working Group – 9 May 2023.
Kath McCourt attended.
- Quality of Patient Experience (QPE) Working Group – 3 January 2023.
Graeme Chapman attended.
- Other Trust meetings / activity which Trust Chairman and NEDs participated in during the quarter:
 - Nominations Committee.
 - Board Briefing – Therapy Services.
 - Board Briefing – Industrial Action.
 - Well Led Sub Group.
 - Lead Governor and Working Group Chairs pre-meet before Council of Governors.
 - Strategic Leadership Programme.
 - Non-Executive Director short videos.
 - Governor Induction / Training Task and Finish Group.
 - Modern Slavery Review meeting.
 - Charity Governance Working Group.
 - Sir Bobby Robson Foundation meetings.
 - Directorate Strategy Workshop (Estates).
 - Non-Executive Director Recruitment.
 - Cardio Oversight Group.
 - Clinical Ethics Advisory Group.
 - Strategic Leadership Programme.
 - Local Maternity and Neonatal meetings.
 - Maternity Safety Champion meetings.
 - Industrial Tribunal Appeals.
 - Regular meetings with Executive Directors regarding Information Governance/Data Security and Protection.
 - Senior Digital Briefing Group.
 - Cyber Security Network meetings.
 - Newcastle Health Innovation Partners.

3. RECOMMENDATIONS

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

Lauren Thompson
Corporate Governance Manager / Deputy Trust Secretary

Gillian Elsander
Corporate Governance Officer / PA to Chairman and Trust Secretary

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