

# Council of Governors General Meeting (held in public)

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05 March 2019, 10:00 to 12:00  
Conference Rooms, Walkergate Park

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## Agenda

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- 1. Welcome and Introductions** 5 minutes  
Verbal  
Ken Jarrold, Chair
- 2. Apologies for absence**  
- David Arthur, Non-Executive Director Verbal  
Ken Jarrold, Chair
- 3. Minutes for approval** 5 minutes  
Verbal  
Ken Jarrold, Chair
-  CoG Mtg Public 6 Nov 2018.pdf (5 pages)
- 4. Matters arising not included on the agenda**  
Verbal  
Ken Jarrold, Chair
- 5. Declarations of Interest**  
Verbal  
Ken Jarrold, Chair

## Business Items

- 6. Chair's Report** 5 minutes  
- External Audit Appointment  
- Non-Executive Director Appointments Verbal  
Ken Jarrold, Chair
- 7. Chief Executive's Report** 5 minutes  
Information  
John Lawlor, Chief Executive
-  CEO report 5 March 2019.pdf (7 pages)
- 8. Annual Declarations of Interest update**

 8 - Annual Declarations of Interest update.pdf (4 pages)

- 9. Quality Priorities** 10 minutes  
Decision  
Lisa Quinn

 CoG Quality Priorities development update March 2019.pdf (2 pages)

 CoG March 2019 Quality Accounts CoG audit shortlist paper.pdf (2 pages)

- 10. Cumbria update** 20 minutes  
Verbal  
Lisa Quinn

- 11. Annual Plan and Finance update** 20 minutes  
Discussion  
James Duncan

 Finance Update 18'19 and Op Plan 19'20 (CoG March 19).pdf (4 pages)

- 12. Governors' Questions** Verbal  
Note: Questions relating to the agenda and papers may be asked at the meeting. For issues not covered by this meeting, questions must be submitted at least 3 working days in advance by emailing [corporateaffairs@ntw.nhs.uk](mailto:corporateaffairs@ntw.nhs.uk)  
Ken Jarrold, Chair

*Break if required*

- 13. Research and Development** 40 minutes  
Simon Douglas  
Head of Research, Innovations & Clinical Effectiveness

## **Governor Feedback, including:**

- 14. Feedback from Governor Representatives on Board Committees**

- 14.1. Feedback from Resource and Business Assurance Committee**

Verbal  
Victoria Bullerwell & Bob Waddell,  
Governor Representatives

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|--------------|--|--|
| <b>14.2.</b> | <b>Feedback from Audit Committee</b>                         | Verbal<br>Victoria Bullerwell, Governor<br>Representative            |
| <b>14.3.</b> | <b>Feedback from Quality and Performance Committee</b>       | Verbal<br>Margaret Adams & Anne Carlile,<br>Governor Representatives |
| <b>14.4.</b> | <b>Feedback from Mental Health Legislation Committee</b>     | Verbal<br>Fiona Grant Governor                                       |
| <b>15.</b>   | <b>Feedback from Governors Working Groups and Committees</b> | Verbal<br>Committee Representatives/<br>Working Group Chairs         |
| <b>15.1.</b> | <b>Update from the Nominations Committee</b>                 | Verbal<br>Ken Jarrold/ Margaret Adams,                               |
| <b>15.2.</b> | <b>Update from the Governors Steering Group</b>              | Verbal<br>Ken Jarrold  |
| <b>15.3.</b> | <b>Update from the Governors Quality Group</b>               | Verbal<br>Margaret Adams, Chair                                      |
| <b>16.</b>   | <b>Feedback from External Events and Meetings</b>            |  |
| <b>16.1.</b> | <b>Feedback from the Governor Advisory Committee</b>         | Verbal<br>Anne Carlile   |

**Items for information (discussion by exception only)**

- |              |                                    |                                   |
|--------------|------------------------------------|-----------------------------------|
| <b>17.</b>   | <b>Board of Directors Minutes:</b> | Information<br>Ken Jarrold, Chair |
| <b>17.1.</b> | <b>24 October 2018</b>             |                                   |

 Item 17.1 Board of Directors Meeting minutes 24  
October 2018.pdf (7 pages)

**17.2. 28 November 2018**

 Item 17.2 Board of Directors Meeting minutes 28  
November 2018.pdf (6 pages)

**18. Any other business**

Ken Jarrold, Chair

**19. Date, time and venue of next meeting:**

The next Council of Governors meeting held in public Tuesday, 14 May 2019, 2  
pm to 4 pm. Walkergate Park, Benfield Road, Newcastle, NE6 4QD.

Ken Jarrold, Chair

**Council of Governors Meeting (held in public)  
Tuesday, 6 November 2018, 2.30 – 4.00 pm  
Conference Rooms, Walkergate Park, Newcastle**

**DRAFT Minutes**

**Present:**

Ken Jarrold	Chair
Margaret Adams	Public Governor, South Tyneside
Anne Carlile	Carer Governor, Adult Services
Cath Hepburn	Public Governor, North Tyneside
Claire Keys	Staff Governor, Clinical
Annie Murphy	Community & Voluntary Services Governor
Denise Porter	Community & Voluntary Services Governor
Lucy Reynolds	Service User Governor, Neurological Services
Bill Scott	Public Governor, Northumberland

**In Attendance:**

Dr Les Boobis	Non-Executive Director
Alexis Cleveland	Non-Executive Director
Jennifer Cribbes	Corporate Affairs Manager
James Duncan	Deputy Chief Executive/Executive Director of Finance
Miriam Harte	Non-Executive Director
Adele Joicey	Communications Lead
John Lawlor	Chief Executive (part-time)
Wendy Pinkney	Corporate Affairs Officer (notes)
Lisa Quinn	Executive Director of Commissioning and Quality Assurance
Lynne Shaw	Acting Executive Director of Workforce and Organisational Development

**Public/Governor Support:**

Lisa Manley, PA to Lucy Reynolds

**Apologies:**

Colin Browne	Carer Governor, Older People's Services
Victoria Bullerwell	Staff Governor, Non-Clinical
Michael Butler	Public Governor, Sunderland
Andrew Fothergill	Service User Governor, Adult Services
Fiona Grant	Service User Governor, Adult Services (Lead Governor)
Cllr Margaret Hall	Local Authority Governor, North Tyneside
Cllr Veronica Jones	Local Authority Governor, Northumberland County Council
Cllr Felicity Mendelson	Local Authority Governor, Newcastle City Council
Dr Rajesh Nadkarni	Executive Medical Director
Prof Daniel Nettle	Newcastle University Governor
Rachel Simpson	Service User Governor, Learning Disability Services
Lynne Shaw	Acting Executive Director of Workforce and Organisational Development
Gary O'Hare	Executive Director of Nursing and Operations
Peter Studd	Non-Executive Director
Bob Waddell	Staff Governor, Non Clinical
Jack Wilson	Service User Governor, Children and Young People's Services
Cheryl Wright	Public Governor, Gateshead

Item	Discussion
114/18	<p><b>Welcome and Introductions</b> Ken Jarrold, Chair, welcomed everyone to the meeting and introduced Adele Joicey, Acting Deputy Director of Corporate Relations and Communication.</p> <p>Ken congratulated Anne Carlile on her recent appointment as Deputy Chair of the Governor Advisory Committee.</p> <p>As the meeting was not quorate, Ken advised that absent governors will be contacted by email to formally approve the two decisions reached in the previous closed meeting.</p>
115/18	<p><b>Apologies for absence</b> Apologies for absence were received as recorded above.</p>
116/18	<p><b>Council of Governors - Minutes for approval – 11 September 2018</b> It was noted that Miriam Harte’s attendance had not been recorded. The minutes of the meeting of 11 September 2018 were approved as an accurate and true record, with the above amendment.</p>
117/18	<p><b>Matters arising not included on the agenda</b> None.</p>
118/18	<p><b>Declarations of interest – None stated.</b></p>
119/18	<p><b>Chief Executive’s report</b> (brought forward)</p> <p><b>Trust Updates:</b> John Lawlor spoke to the enclosed Chief Executive’s report to update the Council on Trust, Regional and National issues. Further details were provided in relation to:</p> <ul style="list-style-type: none"> <li>• <b>Seasonal ‘Flu vaccination uptake</b> – The campaign is going well with over 50% of staff now vaccinated.</li> <li>• <b>Staff Survey</b> – Over 50% of staff have now completed the survey.</li> <li>• <b>Senior Operations Team</b> – Following recent changes, Antony Deery is returning to the Trust and will replace Vida Morris in the South locality.</li> <li>• <b>Clinical Waste Contract</b> - concerns around storage capacity but little impact on the Trust.</li> <li>• <b>ICS across North Cumbria and North East (NCNE)</b> – meetings continue, including a workshop to work through the CCGs role for the future. No change to statutory organisations.</li> <li>• <b>NHS Providers Annual Conference and Exhibition 2018</b> – Russell Patton attended with Lynne Shaw who stated that the focus was on innovation and change to drive transformation in the NHS, whilst moving forward with a new long term view.</li> <li>• <b>NHSI and NHSE Joint Guidance on Approach to Planning</b> – John had received a letter from Chief Executives Simon Stevens, NHS England and Ian Dalton, NHS Improvement, issuing guidance on approach to planning, timetable, payment reform, incentives and sanctions, alignment of commission and provider plans and good governance. Detailed guidance is expected by 24 December. A full approach will be presented to the January Board meeting.</li> </ul>

	<ul style="list-style-type: none"> <li>• <b>Department of Health and Social Care Planning Guidance for Brexit</b> – Guidance on planning for a no-deal Brexit has been issued with the main feature being around workforce supply and retention and a new UK-wide recognition decision procedure for EAA professionals. A second guidance concerns the EU Settlement Scheme pilot. John referred to the recent budget announcement and the £2billion commitment to Health Services. Debate continues around the need to ensure existing services are sustainable. All Trust CEOs have been contacted by the Secretary of State outlining the need to ensure continuity of supply of goods and services.</li> </ul> <p>Discussion ensued around potential impact of a no-deal Brexit and the challenges ahead. Alexis Cleveland proposed that both Non-Executive Directors (NEDs) and Governors need to prepare and decide how they are going to discharge their responsibilities within the new arrangements.</p> <p>John Lawlor, CEO, left the meeting at this point.</p>
120/18	<p><b>Chair’s Report</b> Ken Jarrold highlighted the following:</p> <p><b>Reorganisation</b> – NEDs are attending Council of Governors meetings and governors are also welcome to attend Board meetings to observe the Board in action.</p> <p><b>NED Recruitment</b> – The process is underway to appoint two new NEDs with dates secured for shortlisting, discussion and final interviews to conclude before Christmas.</p>
121/18	<p><b>Governors’ Questions</b> No Governors’ questions were received.</p> <p>Lynne Shaw spoke of a programme with NHSI on the reduction of the clinical workforce. A number of different stages are in place to recruit and retain both clinical and non-clinical staff and Lynne will give a future presentation on the exit process and the 8-9% turnover rate.</p>
122/18	<p><b>Non-Executive Director re-appointment</b> Margaret Adams representing the Nominations Committee, advised on the re-appointment of Peter Studd as a NED. Nominations Committee members had access to Peter’s appraisal and submitted questions for the interview, where Peter gave a good account of his term in office, including the NTW Solutions establishment and his appointment as Chair. He is also Chair of RBAC, a member of the Audit Committee and Les Boobis’ ‘buddy’, as well as regularly attending Council of Governors meetings.</p> <p>Margaret advised that the Nominations Committee recommended that Peter be re-appointed for a further term of three years and governors present unanimously approved the re-appointment.</p> <p><b>Action:</b> As the Council was not quorate, all non-attending governors to be contacted for approval of the decision.</p>

123/18	<p><b>Lead Governor Re-appointment</b></p> <p>As no further nominations for the Lead Governor position had been received, it was proposed in the closed meeting that Fiona Grant be re-appointed for a further term of three years and governors present unanimously approved the re-appointment.</p> <p><b>Action:</b> As the Council was not quorate, all non-attending governors to be contacted for approval of the decision.</p>
124/18	<p><b>Council of Governors Elections</b></p> <p>Ken Jarrold informed the Council of the following re-appointments:</p> <ul style="list-style-type: none"> <li>• Professor Kim Holt has replaced Revd Professor Pauline Pearson as Northumbria University appointed governor.</li> <li>• Cllr Helen Haran has been appointed as Gateshead Council governor.</li> </ul> <p>Ken gave an update on the present governor elections:</p> <ul style="list-style-type: none"> <li>• Anne Carlile - re-elected as unopposed Adult Carer Governor.</li> <li>• Diane Kirtley – re-elected as unopposed Neurological Carer Governor.</li> <li>• Andrew Davison, Learning Disability Service User – elected unopposed (returning governor)</li> <li>• Janice Santos – elected as unopposed Children and Young People’s Carer Governor.</li> <li>• Dr Uma Ruppa Geethanath – elected unopposed as Staff Medical Governor.</li> <li>• There are six elections in the following constituencies:  Service User – Neurological Services  Carer – Learning Disability Services  Public – Newcastle/Rest of England and Wales  Public – Sunderland  Staff – Clinical (2 seats)  Staff – Non-Clinical</li> </ul> <p>Voting closes at 5pm on Friday, 30 November 2018.</p>
125/18	<p><b>External Audit Engagement Letters and Specific Service Agreements</b></p> <p>At the 11 September 2018 meeting, the Council of Governors had approved the re-appointment of Mazars LLP as Trust Auditors to continue until 1<sup>st</sup> June 2019. Miriam Harte, NED, advised that the re-appointment had been accepted by Mazars and the formal papers were now presented.</p> <p>The Council of Governors accepted and noted the formal papers.</p>
126/18	<p><b>Governor Feedback, including:</b></p> <p><b>Feedback from Governor representatives on Board Committees:</b></p> <ul style="list-style-type: none"> <li>• <b>RBAC</b> – No governor representative present.</li> <li>• <b>Audit Committee</b> – No governor representative present.</li> <li>• <b>Q&amp;P Committee</b> - Margaret Adams and Anne Carlile reported they had both attended the last meeting and commented that the Agenda size was somewhat problematic, as there were 400+ pages of information and they found it difficult to ask questions due to the volume of work involved. Margaret added that the meetings usually allowed a lot of in depth questioning. It was noted that Alexis Cleveland, NED, would be taking over as Chair from Ruth Thompson, NED.</li> <li>• <b>Mental Health Legislation</b> – No feedback reported.</li> </ul>

127/18	<p><b>Governor Feedback, including:</b>  <b>Committee and Working Groups Update, Working Group Chairs:</b></p> <ul style="list-style-type: none"> <li>• <b>Nominations Committee</b> – As reported previously.</li> <li>• <b>Steering Group</b> – Margaret Adams advised that the 2019 dates were confirmed.</li> <li>• <b>Quality Group</b> – Margaret Adams reported on a very interesting meeting involving three presentations from Anne Moore on Nursing Workforce Planning, Russell Patton on Improving the In-patient Experience and Anna Foster on Waiting Times. Margaret advised that the next meeting is 15 November at 9.30 am and of a Setting Additional Quality Standards meeting on 12 December from 10am – 12pm.</li> <li>• <b>Audit Working Group</b> – No meeting held.</li> </ul>
128/18	<p><b>Governor Feedback, including:</b></p> <p><b>Feedback from Events/Meetings:</b></p> <ul style="list-style-type: none"> <li>• <b>Governor Advisory Committee</b> – Anne Carlile reported on attending her first meeting in September. There were two nominations for election of a Chair which proved a difficult decision. Anne was then elected as unopposed Deputy Chair. Ken Jarrold congratulated Anne on behalf of the governors.</li> </ul>
129/18	<p><b>Board of Directors Meeting Minutes</b></p> <p>The Council of Governors noted the Board minutes of:  25 July 2018  26 September 2018</p>
130/18	<p><b>Any other business</b></p> <p>a) Margaret Adams and Anne Carlile reported on their recent visit to East London NHS FT. They were both very impressed by their way of working with their governors and around inclusion. Although a similar geographical area, they are not categorised and have a lot of service user and carer governors and a People Involvement Lead. Both Margaret and Anne proposed an invitation be extended to the key staff involved to present to the Council of Governors in Spring 2019.  Ken Jarrold commented that it is good to learn from outside Trusts.</p> <p>b) It was noted that Jack Wilson, Service User Governor for Children and Young People since the age of 16, was soon to celebrate his 21<sup>st</sup> birthday and the Council wished to pass on their best wishes to Jack.</p>
131/18	<p><b>Close</b></p> <p>There being no further business to discuss, the Chair declared the meeting closed.</p>
132/18	<p><b>Dates, times and venues of next meetings:</b></p> <p>Council of Governors and Board of Directors joint meeting  <b>Tuesday, 4 December 2018</b> - (12.00 – 3.00 pm)  Venue: Keswick House, St Nicholas' Hospital  Council of Governors meeting (in public)  <b>Tuesday, 5 March 2019</b> – (10.00 am – 12.00 pm)  Venue: Conference Rooms, Walkergate Park</p>

**Northumberland, Tyne and Wear NHS Foundation Trust  
Council of Governors Meeting (held in Public)**

**Meeting Date:** 5 March 2019

**Title and Author of Paper:** Chief Executive's Report  
John Lawlor, Chief Executive

**Paper for Debate, Decision or Information:** Information

**Key Points to Note:**

**Trust updates**

1. Better Health at Work Award
2. Staff Awards
3. Thematic Review of the use of restraint, prolonged seclusion and segregation for people with mental health problems, learning disabilities and/or autism
4. Enhanced Bed Management and The Trusted Assessors
5. Cadabams visit
6. Court Room Skills, Continuing Professional Development (CPD) Event
7. Centre for Ageing and Vitality

**Regional updates**

8. Food Poverty in Newcastle upon Tyne
9. Obesity: Made in England – the Annual Report of the Director of Public Health in Gateshead

**National updates**

10. Operational Plan update
11. Brexit Readiness Assessment

**Outcome required:** For information

## Chief Executive's Report 5 March 2019

### Trust updates

#### 1. Better Health at Work Award

Following a recent re-assessment it has been confirmed that the Trust has achieved 'Maintaining Excellence' standard with the Better Health at Work Award (BHAWA) for 2018. This is a regional award scheme which recognises and endorses workplaces that motivate workers in developing a sustainable culture of health and wellbeing. Retaining this award demonstrates the Trust's ongoing commitment to the health and wellbeing of our staff.

#### 2. Staff Excellence Awards

The 10th annual Staff Excellence Awards will be held on Friday 8 March at Newcastle Civic Centre which will see 400 staff come together to celebrate the dedication, hard work and achievements of both the Trust and NTW Solutions staff who have made a real difference to service users, carers or work colleagues.

The 19 available categories are:

- Rising Star Award
- Behind the Scenes Award – Individual (two awards: NTW and NTW Solutions)
- Behind the Scenes Award – Team (two awards: NTW and NTW Solutions)
- Clinical Team of the Year (three awards: north, central and south)
- Clinician of the Year (three awards: north, central and south)
- Healthcare Worker of the Year
- Knowledge, Safety and Innovation
- Working Together
- Leadership Award
- Manager of the Year
- Unsung Hero
- Lifetime achievement award

In addition to the above awards, Chair and Chief Executive's Awards will also be awarded on the evening to an individual or team who continually deliver above and beyond what is expected of them.

This year a record number of 730 entries were received and it was a difficult decision for the judges to shortlist due to the high calibre of nominations.

#### 3. Thematic Review of the use of restraint, prolonged seclusion and segregation for people with mental health problems, learning disabilities and/or autism

A review of the use of restraint, prolonged seclusion and segregation for people with mental health problems, a learning disability and/or autism has been commissioned by Secretary of State for Health and Social Care, Matt Hancock and will be undertaken by the CQC.

The Trust has recently responded to a CQC data request, providing restraint, seclusion and segregation data for November 2018 for eight Child and Adolescent Mental Health Service (CAMHS) and nine adult learning disability/autism wards.

It is envisaged that the CQC will report on its interim findings in May 2019, with a full report being published nationally by March 2020.

#### **4. Enhanced Bed Management & the Trusted Assessors**

The Trust has recently supported the development of an Enhanced Bed Management (EBM) service to provide our patients with an improved admission, treatment and discharge process. The key elements of the team's role being;

- Utilising the skills and competencies of senior medical staff to work with our Multi-Disciplinary Teams (MDTs) to support the flow and discharge processes.
- Having a real-time identification of potential delays, discharge dependencies and bed availability, allowing our patients to be moved through their care pathway more quickly and efficiently.
- Having a more effective discharge process through real-time allocation and pre-allocation, once again ensuring that lengths of stay for our patients are appropriate.
- Help sustain the Trust's position of having a reduced reliance on out of area beds.

These four developments have resulted in an enhanced bed management service which has created flow, efficiencies and productivity within the system. Implementation of new IT systems, processes and of course our staff, have all helped in contributing to the success of this innovative project.

In addition the EBM service has adopted the national role of Trusted Assessment (TA) into mental health services. NTW is the first mental health Trust to have implemented this role. The role of the Trusted Assessor is to work with MDTs to facilitate an appropriate, timely and safe discharge.

As part of the service evaluation of this role the medical team have developed a pilot study which is examining the feasibility, effectiveness and findings of such a role over an 8-month period. A workshop with medical colleagues has been arranged to discuss their views as to the validity of this role going forward.

#### **5. Cadabams**

Mr Sandesh Cadabams, Chief Executive of Cadabams Mental Healthcare Services, Bangalore, and Dr Sunil, Medical Director visited the Trust and services including Hopewood Park, Walkergate Hospitals and Ferndene in February. They had an opportunity to meet members of staff and members of the Executive Team.

The purpose of the visit followed an introduction from the British High Commission and an NTW visit to Bangalore last year, and provided an opportunity to build on our shared set of values to develop collaborative care pathways which will provide safer, higher quality and more effective care for all patients.

The aim is to develop cost effective, culturally appropriate programmes of care. In addition we explored the possibility of clinical exchange programmes and academic initiatives. There was agreement to take forward three areas of work: the introduction of areas of good practice from NTW to Cadabams and vice versa; provision of training and development in specialised areas such as addictions, children's mental health and adult community services; and exploring opportunities which arise from initiatives of the Indian government and states which are geared to providing mental health care to the poorest 40% of the population.

The Chief Executive of the Trust and Cadabams have signed a high level agreement to work to explore opportunities of mutual benefit. Arrangements are being made for the NTW team to visit colleagues in Bangalore in early April.

## **6. Court Room Skills, Continuing Professional Development (CPD) Event - 22 January 2019**

This specific programme was facilitated by DAC Beachcroft for senior NTW staff. The key issues discussed included report writing, giving evidence, cross-examination, being robust in opinion, the importance of awareness of legal issues in documentation (RiO, reports to GPs, Tribunals, etc.).

An update was also provided on Mental Health Tribunals and the Court of Protection. Feedback received has been very positive with requests for more regular training within our annual CPD programme. We now deliver a suite of training and educational events for doctors (GPs, Psychiatrists, and Neurologists) and other healthcare staff, focussed on meeting the requirements of revalidation.

## **7. Centre for Ageing and Vitality**

On 12th February 2019, Newcastle University, in partnership with Newcastle upon Tyne Hospitals NHS Foundation Trust (NuTH) issued a press release regarding the ambitious vision to re-develop the Centre for Ageing and Vitality (the former Newcastle General Hospital site) in the West End of Newcastle.

This follows an agreement by NuTH to sell the majority of the site to the University whilst retaining two areas for existing services and development of new facilities. We have been given assurance that Northumberland Tyne and Wear NHS Foundation Trust services at the Centre for Ageing and Vitality, including the Hadrian Clinic, will remain on site for up to three years to enable the changes proposed in the 'Deciding Together' process to be agreed and implemented.

There are currently refurbishment works under way at the Hadrian Clinic for the Adult Mental Health Services which will raise the standard of the existing accommodation, as well as enabling the plans to work towards the development of state-of-the-art adult acute mental health facilities on the St. Nicholas hospital site.

The Trust also provides older people's services in Akenside and Castleside within the Centre for Ageing and Vitality and these services will continue from their present location during this time. There will also be no change at the present time to the accommodation at the Centre for Ageing and Vitality where Community Older People's Services are based.

## Regional updates

### 8. Food Poverty in Newcastle upon Tyne

The Newcastle Community and Voluntary Support (CVS) sector has produced a report into food poverty in Newcastle. The latest study on food poverty shows that too many children and adults go to bed hungry in Newcastle. This report highlights the worrying trends in rising food poverty in Newcastle and focuses on the response from local voluntary and community groups in Newcastle.

The key findings include: a noticeable increase in food poverty in the last six years; those people affected by food poverty are no longer just those associated with homelessness and people falling on 'hard times'; many of the people who use foodbanks today are employed, working people; and there is particular concern around children going hungry.

The report shares stories where the voluntary sector have been able to offer help but acknowledged that there remain those who still require support. A number of organisations avoid over-publicising their activities around food poverty due to the resulting in demand. Many organisations reported increasingly handing out food informally when it is known someone is in need.

Newcastle CVS suggests that the key issue is not response, creativity, generosity and kindness, but one of policy. The full report: Food Poverty in Newcastle: The Voluntary and Community Sector view and response, is available at the following link:

[https://www.cvsnewcastle.org.uk/images/Publications/Food\\_Poverty\\_in\\_Newcastle.pdf](https://www.cvsnewcastle.org.uk/images/Publications/Food_Poverty_in_Newcastle.pdf)

### 9. Obesity: Made in England - the Annual Report of the Director of Public Health in Gateshead

This report highlights the increasing prevalence of obesity across the Borough, with two in every three adults classified as overweight and one in four classified as obese. Perhaps more worryingly, one in five children enters school overweight or obese rising to one in three by year 6. The report highlights a number of causes including ready access to, and promotion of, cheap sugar and fat rich foods, and the decline in exercise of over 20% since the first recorded baseline in 1961.

The report also recognises that prevalence is higher in vulnerable and deprived groups, including those experiencing significant mental health issues, where the risk of being obese is double that of the general population. It goes on to highlight that in many ways obesity is a normal response to an abnormal environment and makes a number of recommendations for how we should collectively look to address the issue.

When the report was presented to the Gateshead Health and Wellbeing Board all partners committed to work together to address the recommendations and the Trust will consider how it can build on the considerable work already undertaken to support this approach. The report can be found at:

<https://www.gateshead.gov.uk/article/1821/Health>

## National updates

### 10. Operational Plan Update

The Trust submitted its draft Operational Plan on 12<sup>th</sup> February in line with the national timetable. This follows substantial work internally and work at both an Integrated Care Partnership and Integrated Care System Level. It is recognised at this stage that there remains considerable work across the organisation and across partner organisations to finalise the plan which will be presented to the Board in March.

At this stage we have worked on the assumption that the Mental Health Investment Standard will be applied to the Trust in full, although this remains a subject of continuing discussion with commissioners. As part of this submission, the Trust has indicated that it will sign up to its control total, which as previously discussed with the Board, gives us a target of breaking even for 2019/20 excluding Provider Sustainability Funding (PSF). Work also continues to deliver a sustainable and deliverable plan both for next year and looking forward into our longer term planning. For the first time Integrated Care Partnership and Integrated Care System draft plans have also been prepared, and the Trust has been fully engaged in their development.

Work is ongoing on developing our collective approach to managing system wide risk, with a particular focus on managing the delivery of financial control totals across a wider Integrated Care Partnership footprint. At an Integrated Care System level, the Mental Health Work Stream will play a key role in developing the narrative around mental health, and the Trust is in a strong position to influence this. Again, as previously reported to the Board, final plans are due to be submitted by 4<sup>th</sup> April 2019.

### 11. Brexit Readiness Assessment

The Department of Health and Social Care released guidance on the 21<sup>st</sup> December 2018 on preparing for an EU Exit. The guidance required all Health and Social Care organisations to undertake a risk assessment and prepare supporting action plans. This is an internally managed process, however our findings will be shared, where appropriate, with the NHS England (North) – EU Exit Team and Emergency Preparedness, Resilience and Response (EPRR) Team. The guidance also required nomination of a Board Lead as Senior Responsible Officer (SRO), within NTW. This role is held by the Executive Director of Nursing and Chief Operating Officer.

The required assessment covers seven key areas of risk that have been identified nationally, with two further areas of assessment around governance and financial impact. The baseline assessment as of the end of December 2018 position was completed and will be reviewed on a monthly basis. All risks were identified as having a low to moderate level of impact.

At a national level there have been widespread plans put in place across government departments to ensure minimal business interruption, and this has also seen the establishment of a communication route between health and other agencies that represent Local Authorities, Commissioning etc.

At the beginning of February 2019 a letter was received from Professor Keith Willett, Medical Director for Acute Care and Emergency Preparedness in his role as NHS EU Exit Strategic Commander, with the request for all NHS organisation attendance at regional events. The Trust was represented, and is currently reviewing the Brexit Risk

Assessment in light of this and other information received in relation to key areas of risk. The Trust was also advised to expect more information imminently, with the key message from Professor Willet being that, if all plans produced to date, at a regional and national level, then there should be little impact on health care delivery. It has also been agreed that the established EPRR approach of “situation reporting” will be enacted as appropriate for any new and unknown risks impacting within the NHS.

The Board is aware that there has been an increase in Freedom of Information requests over the past month. These will be considered in line with current legislative requirements around any exemptions, however it is expected that this may attract further media attention specific to the NHS in the run up to 29<sup>th</sup> March 2019.

The Trust continues to adopt an EPRR approach to the preparation for no deal EU exit.

# Northumberland, Tyne and Wear NHS Foundation Trust

## Council of Governors Meeting

<b>Meeting Date:</b> Tuesday, 5 March 2019
<b>Title and Author of Paper:</b> Declaration of Interest Annual Update Jennifer Cribbes, Corporate Affairs Manager
<b>Paper for Debate, Decision or Information:</b> Information
<b>Why is this paper coming to the Council of Governors?</b>  As stated within the Governors Code of conduct section of the 'NTW Governors information Handbook' (provided to all Governors within induction), the Trust's Constitution requires all governors to "Complete an annual declaration of interests".  To comply with this requirement, all governors are required to complete the attached declaration form. Please note that a "nil return" is required if you have no declarable interests.

Left blank intentionally

## Declaration of Interests of Directors and Governors

### 1. Directorships or Positions of Authority

Do you or any member of your immediate family hold a position of Director (executive or non-executive) or other position of responsibility in any public or private organisation that carries on business, or has carried on business over the last three years, or is likely to carry on business with the Trust or the wider NHS?

NO  YES  If yes then please provide details of the name and nature of the organisation and the position held

### 2. Employment and Consultancy

Are you or any member of your immediate family employed or engaged as consultants by any public or private organisation that carries on business, or has carried on business over the last three years, or is likely to carry on business with the Trust or the wider NHS?

NO  YES  If yes then please provide details of the name and nature of the organisation and the position held

### 3. Commercial Interests

Do you or any member of your immediate family have a commercial interest such as the holding of shares in any company that carries on business, or has carried on business over the last three years, or is likely to carry on business with the Trust or the wider NHS?

NO  YES  If yes then please provide details of the name and nature of the organisation and the nature of the interest. (A holding of shares with a nominal value of less than 5% of the issued share capital in a company can be ignored for this purpose as can any holding in a pension fund provided that the holder is unable to exercise control over the fund.)

**4. Membership of any public body, organisation (voluntary or otherwise), charity or pressure group**

Are you or any member of your immediate family a member of a public body, organisation, charity or pressure group whose work is related to, or will be related to, the business of the Trust or the wider NHS?

**NO**       **YES**       **If yes then please provide details of the name of the organisation and the nature of its activities**

**5. Donations and Sponsorship**

Do you or any member of your immediate family receive donations or sponsorship from any organisation that carries on business, or has carried on business over the last three years, or is likely to carry on business with the Trust or the wider NHS?

**NO**       **YES**       **If yes then please provide details of the name of the organisation, the nature of its activities and the purpose of the donation and sponsorship**

**6. Other Interests**

Do you or any member of your immediate family have any other interests that you consider are relevant and should be declared?

**NO**       **YES**       **If yes then please provide details.**

**Please note that a “nil return” is required if you have no declarable interests.**

<b>Name:</b>	
<b>Signature:</b>	
<b>Position Held:</b>	
<b>Date:</b>	

**Please return this form to Jennifer Cribbes, Corporate Affairs Manager.**

**NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST**

**COUNCIL OF GOVERNORS MEETING**

**Meeting Date:** 5<sup>th</sup> March 2019

**Title and Author of Paper:** Developing Quality Priorities for 2019-20:  
Update Report

Anna Foster, Deputy Director of Commissioning & Quality Assurance

**Paper for Debate, Decision or Information:** Information

**Key Points to Note:**

A new quality priority is being developed to identify and remove barriers that prevent people we serve from being treated equally.

**Outcome required:** To be aware of the current progress in developing a new quality priority for the financial year 2019-20.

**Council of Governors**  
**5 March 2019**  
**Developing Quality Priorities for 2019-20: Update Report**

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1. There are four existing quality priorities which support the three long term quality goals included in the NTW strategy. These are:
  - a. Improving the inpatient experience
  - b. Waiting times
  - c. Embedding Triangle of Care
  - d. Embedding Trust Values
  
2. A new quality priority is being developed for 2019-20, linked to the Equality, Diversity & Inclusion Strategy. The aim is to ensure that everybody can access services, regardless of their personal circumstances and to remove any barriers that may prevent people from accessing services. This quality priority will focus upon barriers to accessing services that may be experienced by people with protected characteristics such as:

Disability	Age	Race
Sex	Sexual Orientation	Religion or Belief
Gender Reassignment	Pregnancy & Maternity	Marriage & Civil Partnership

3. Ideas were discussed at a stakeholder event in December 2018 and via an online survey in December 2018 and January 2019, based on the following questions:
  - a. How can we understand the communities we serve?
  - b. How will we know if we're meeting their needs?
  
4. The feedback received can be summarised into the following themes: communication, listening, accessibility and community engagement/events.
  
5. An action plan is being developed with the locality groups, linked to these themes. This will be co-ordinated by the Equality & Diversity Lead, Chris Rowlands and will involve different departments across the trust, such as the communications team, the Academy, Staff Networks etc alongside the locality groups, who will consider how they can improve links with different communities.
  
6. This will be presented to the Trust Board for final approval in March 2019.

Anna Foster  
Deputy Director of Commissioning & Quality Assurance  
March 2019

**NORTHUMBERLAND, TYNE AND WEAR NHS FOUNDATION TRUST**

**COUNCIL OF GOVERNORS MEETING**

**Meeting Date:** 5<sup>th</sup> March 2019

**Title and Author of Paper:** Quality Account 2018/19

Lisa Quinn, Executive Director of Commissioning & Quality Assurance

**Paper for Debate, Decision or Information:** Decision

**Key Points to Note:**

- It is a requirement that NHS Trusts ask their Council of Governors to select an existing Quality Priority to be audited.
- A shortlist of Quality Priorities is included within this paper.
- Governors are asked to vote for their preferred Quality Priority.

**Outcome required:** To vote on the preferred Quality Priority to be audited as part of the 2018/19 Quality Account assurance process.

## COUNCIL OF GOVERNORS

5<sup>th</sup> March 2019

### Quality Account 2018/19

In May 2019 we will be publishing our annual Quality Account. This is a report which sets out our view of the quality of our services, and how we have progressed against our quality priorities. Quality priorities are the areas we have chosen to focus upon each year.

There is a requirement for Governors to choose a current Quality Priority to be audited to make sure that our processes are robust and that the information we publish in our Quality Account is accurate.

The current list of quality priorities is below:

	<b>Aim/objective</b>	<b>Is the impact of this Quality Priority Trust wide?</b>	<b>Is this Quality Priority quantitative, specific and measureable?</b>	<b>Vote:</b>
1	Improving the Inpatient experience	Adult & Older People's mental health inpatient services	Yes	
2	Waiting Times	All Community Services	Yes	
3	Embedding Triangle of Care	Yes	No	
4	Embedding Trust Values	Yes	No	

Governors are asked to choose which one of the above 4 quality priorities should be audited, by means of a voting process. Please indicate in the table above which quality priority you would like to be audited.

The Quality Priority audited last year (2017-18) was "Embedding the Positive and Safe Strategy" and the waiting times quality priority was audited the previous year (2015-16).

**Lisa Quinn**  
**Executive Director of Commissioning & Quality Assurance**  
**March 2019**

Northumberland, Tyne and Wear NHS Foundation Trust  
Council of Governors Meeting

**Meeting Date:** Tuesday, 5 March 2019

**Title and Author of Paper:**

Financial Position 2018/19 & Planning 2019/20

James Duncan, Deputy Chief Executive & Director of Finance

**Paper for Debate, Decision or Information:** Information

**Why is this paper coming to the Council of Governors?**

This paper provides an update on the Trust's financial position as reported to the Trust Board and NHS Improvement as at month 10 (January 19) and a forecast of the year-end position for 2018/19.

This paper also provides a briefing on the keys points of the Planning Guidance for 2019/20 and an update on the Trust's position in planning for 2019/20.

## Council of Governors Briefing - 5<sup>th</sup> March 2019

### Financial Position 2018/19 & Planning 2019/20

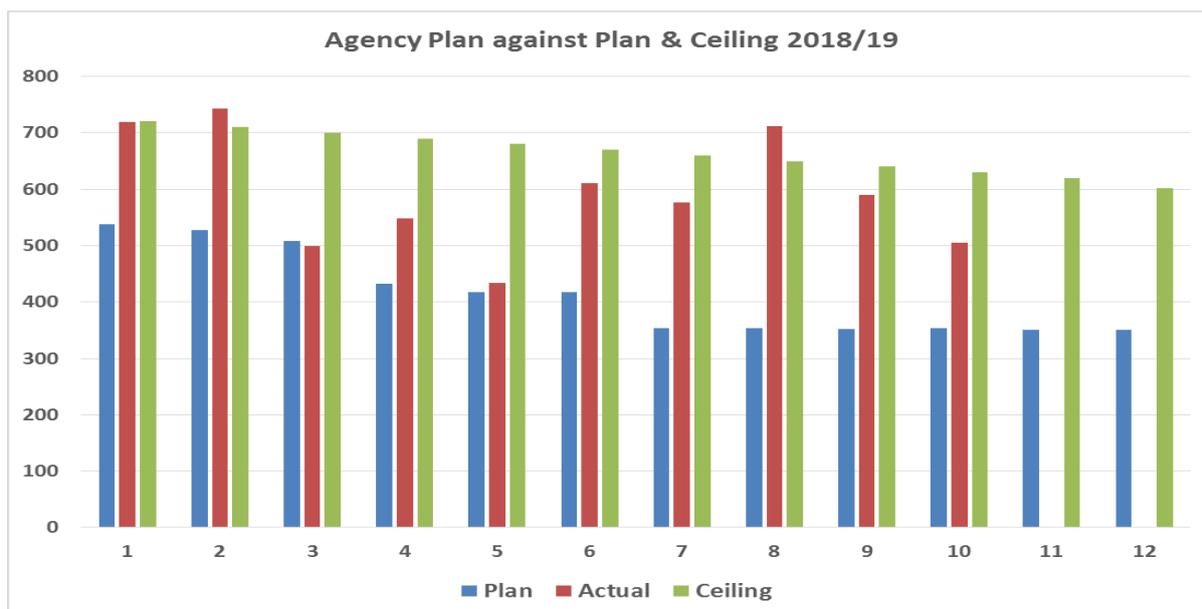
#### 2018/19

The Trust has delivered a £2.9m surplus at month 10 (January), which is £1.0m ahead of plan and is forecasting to deliver the agreed Control Total of £3.5m by the end of the financial year. The table below summarises the Trust's key financial measures for 2018/19: -

Key Financial Targets	Year to Date			Year End		
	Plan	Actual	Variance/ Rating	Plan	Forecast	Variance/ Rating
Finance Risk Rating	3	1	Green	3	3	Amber
I&E – Surplus /(Deficit)	£1.9m	£2.9m	£1.0m	£3.5m	£3.5m	£0.0m
FDP - Efficiency Target	£9.4m	£9.4m	£0.0m	£12.6m	£12.6m	£0.0m
Agency Ceiling	£6.7m	£5.9m	(£0.8m)	£8.0m	£7.1m	(£0.9m)
& Plan	£4.2m	£5.9m	£1.7m	£4.9m	£7.1m	£2.2m
Cash	£18.9m	£19.2m	£0.3m	£19.6m	£19.6m	£0.0m
Capital Spend	£10.2m	£5.1m	(£5.1m)	£13.2m	£7.7m	(£5.5m)
Asset Sales	£0.3m	£0.3m	£0.0m	£0.3m	£2.0m	£1.7m

Points of Note: -

- Pay spend at Month 10 is £211.5m which is £0.5m more than plan. Staffing numbers are still significantly above establishment in some areas. A significant amount of work is being undertaken to manage agency and bank spend going forward
- The Trust are given a maximum expenditure ceiling on agency staff by NHS Improvement. For NTW this is £8m, however the Trust was planning to spend just £4.9m on agency in the current year. Agency spend at Month 10 is £5.9m which is £0.8m below our targeted ceiling, but £1.7m above the Trust's planned spend.
- The Trust has in place a range of measures to deliver on our plan in the current year, but many of those do not result in year on year savings. This leaves us with a bigger challenge to deliver our plan in 2019/20



## **2019/2020 Planning Guidance**

The planning guidance for 2019/20 was first published on 22<sup>nd</sup> December and has since been updated with more details and technical guidance. The key points to note are: -

- A shift towards system planning through integrated care systems
- Development for the first time of System Control Totals – requiring organisations to work together to balance the finances of the whole system
- Organisations are to receive inflation funding of 3.8%, including the impact of the pay award from 2018/19, but this is partly offset by an efficiency requirement of 1.1%
- There has been a change to how funds are allocated across the country, which now includes greater emphasis on Community & Mental Health needs
- CCGs must continue to invest more in Mental Health by meeting the mental health investment standard (MHIS). This must be equal to the total amount of growth in CCG funds plus 0.7%. For NTW this would represent around 6% on average
- Focus for efficiency to be transformation of outpatients, productivity in Community & Mental Health, availability of staff, procurement, estates, pharmacy & corporate

## **NTW Draft Operational Plan 2019/20**

The Trust has been issued with a control total of break-even by NHS Improvement, which, if delivered will give us access to £2.654m in Provider Sustainability Funding which will leave the Trust with a corresponding surplus. As required we

have submitted a draft operational plan to deliver this control total while meeting all of the quality and operational requirements of the Trust. Key forecast financial data for next year is shown in Table 2.

Key Forecast Financial Data	2019/20 £m
Income (including PSF)	326.1
Income & Expenditure Surplus (excl PSF)	0.0
Provider Sustainability Funding (PSF)	2.5
Surplus / Control Total (including PSF)	2.5
Risk Rating	2
Efficiency Target	8.4
Cash Balance	19.6
Capital Programme	12.0
Asset Sales	2.6
PDC Funding	6.3
Loan/PFI/Lease Repayments	(4.8)

To develop this plan we have taken a bottom up approach. Operational groups have identified that going into next year, and without adjusting for growth funding or savings to be delivered, there is a gap between income and expenditure of around £13m. Work is ongoing to finalise plans to close this gap through two key areas:

- Using some of the growth funding from the Mental Health investment standard to underpin core services
- Reducing costs through further reductions in bank and agency staffing, changes across a small number of in-patient areas, reducing corporate costs and requiring savings from NTW Solutions

The draft submission provided to NHS Improvement includes plans to close the financial gap of £13m with £5m benefit from funding from the MHIS and £8m from cost reduction schemes. This position is continually changing as plans for next year are finalised. We will continue to update Governors on progress

This represents again a significant challenge to the Trust with a number of areas contributing to the gap:

- In-year efficiency requirement of 1.1%
- Impact of Northumberland Recovery Programme
- Impact of loss of income through the Transforming Care Programme
- Savings carried forward from 2018/19

This is a major focus for the operational and Executive team to enable a fully developed plan to be approved by the Board of Directors on 28<sup>th</sup> March and submitted to NHSI on 4<sup>th</sup> April.

# Board of Directors Meeting (PUBLIC)

24 October 2018, 13:30 to 15:30

Conference Rooms 1 & 2, Ferndene, NE42 5PB.

## Attendees

### Board members

Ken Jarrold (Chair) , John Lawlor (Chief Executive) , Les Boobis (Non-Executive Director) , Alexis Cleveland (Non-Executive Director) , Martin Cocker (Non-Executive Director) , James Duncan (Executive Director of Finance and Deputy Chief Executive) , Miriam Harte (Non-Executive Director) , Rajesh Nadkarni (Executive Medical Director) , Gary O'Hare (Executive Director of Nursing and Chief Operating Officer) , Lisa Quinn (Executive Director of Commissioning and Quality Assurance) , Lynne Shaw (Acting Executive Director of Workforce and Organisational Development) , Peter Studd (Non-Executive Director) , Ruth Thompson (Non-Executive Director)

### In attendance

Jennifer Cribbes (Corporate Affairs Manager) , Anne Moore (Group Nurse Director, Safer Care) , Bruce Owen (Consultant Psychiatrist) , Tony Gray (Head of Safety & Security, Patient Safety)

## Meeting minutes

### 1. Service User/Carer Experience

Verbal

Ken Jarrold opened the meeting and welcomed those in attendance.

Paul Farley delivered a verbal presentation to share his personal experience of using NTW services.

In response to a question raised by James Duncan, Paul advised that he had received good support from his CPN and Community Mental Health Team for approximately 3 years.

John Lawlor advised that it was important for Recovery Colleges to be independent and asked Paul to advise him if he felt there were any gaps between the support provided at Recovery Colleges and NTW's professional services.

In response to a question raised by Peter Studd, Paul explained that he felt the Recovery College was a very supportive environment that offers a variety of courses delivered by volunteers and students.

Ken Jarrold on behalf of the Board, thanked Paul for sharing his story.

### 2. Apologies

Verbal

No apologies were received for this meeting.

Chair

### 3. Declarations of Interest

Verbal

There were no conflicts of interest declared for this meeting.

Chair

### 4. Minutes of the previous meeting: Wednesday 26 September 2018

Decision

[Item 14 - Integrated Commissioning and Quality Assurance Report \(Month 5\)](#)

Chair

The sentence at the end of the second paragraph to be changed to read 'Gary confirmed that Cumbria Partnership NHS Foundation Trust reported much lower sickness rates of around 4%', not 2% as previously stated.

The Board agreed that the minutes, as amended, of the 26 September 2018 were a true and accurate record of the meeting.

 4. Draft Minutes Board PUBLIC 26.09.18.pdf

## 5. Action list and matters arising not included on the agenda

Discussion  
Chair

### Action list

#### Item 8 - Annual Security Management Report

Gary O'Hare advised that the action had been completed. An update of the progress in relation to lone working devices was included in the Safer Care report for quarter 2, agenda item 8.

#### Item 17 - Board Assurance Framework and Corporate Risk Register

Lisa Quinn advised that the action had been completed and the involvement with Cumbria was included in the Corporate Risk Register as provided for item 14 of this agenda.

The Board reviewed and noted the action check list.

 5 - Action List.pdf

## 6. Chair's Remarks

Verbal  
Chair

Ken Jarrold provided a verbal update and referred to the services he had visited since the last meeting and stated that he continued to be impressed by everywhere visited and the people he meets.

Ken further highlighted changes in relation to the implementation of the Integrated Care System and advised that while NTW must be engaged and play a full part in the change, we must stay focused on delivering the best services that we can.

## 7. Chief Executive's Report

Information  
Chief Executive

John Lawlor spoke to the enclosed Chief Executive's report to provide the Board with Trust, Regional and National updates.

John provided further details in relation to the seasonal Flu vaccination, staff survey, senior operations team, clinical waste contract issues, Integrated Care System, planning guidance and Brexit.

In relation to the clinical waste contract issues, James Duncan advised that there has been no impact on NTW services to date and there is no impact expected. However, contingency plans are in place.

Lynne Shaw advised that work had been conducted to understand how many EU nationals work within the Trust. Lynne advised that there are approximately 120 identified so far who the Trust will engage with to provide support with the settlement process.

The Board received and noted the contents of the Chief Executive's report.

 7.1 VERSION 2 CE Report Oct 2018 FINAL.pdf

 7.2 VERSION 2 Appendix 1. NHSE I Joint Planning Update Letter.pdf

## Quality, Clinical and Patient Issues

## 8. Safer Care Report (Q2)

Executive Director Of  
Nursing/ Chief Operating  
Officer

Anne Moore spoke to the enclosed report to update the Board on safety related activity for the period July to September 2018. Anne provided further details in relation to the thematic review, reduction in restraint and staff assault during the quarter, complaints relating to children's services and subsequent actions, areas of good practice and the pilot of a body-cam project.

Miriam Harte raised concerns in relation to the waiting times for Children and Young People's Services. Anne advised that significant discussions had taken place at the Business Delivery Group to understand how the waiting times can be improved.

In response to a question raised by Martin Cocker in relation to lone working devices, Gary O'Hare advised that the lone working device is a dual system and the GPS Tracker can identify where staff are located for safety purposes.

John Lawlor advised that a Trust at the HSJ Mental Health Awards judging presented a project where they had piloted staff wearing body-cams on two wards. The project was said to be very successful and received good feedback from both staff and service users.

James Duncan and Lisa Quinn requested a further review to understand the reduction in the use of restraint and assaults on staff. Anne agreed to review this further with the Positive and Safe team.

Ken Jarrold commented on the importance of the Learning and Improvement Group. Anne advised that the Learning and Improvement Group meetings had been very well received by clinical teams and that individuals are now able to join the meeting via Skype to broaden the exposure in the Trust.

The Board received and noted the contents of the Safer Care Report for quarter 2.

 8. Q2 Safer Care Report (including Learning From Deaths) Board of Directors....pdf

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## 9. Safer Staffing Levels (Q2)

Executive Director Of  
Nursing/ Chief Operating  
Officer

Anne Moore spoke to the report to provide the Board with an update in relation to safer staffing compliance for quarter 2. This included the ratio of qualified to unqualified staff and exceptions.

Anne provided details in relation to the process for planning establishments, areas experiencing pressures, new nurses commencing work and a recent recruitment campaign.

In response to a question raised by Miriam Harte regarding the bank and agency usage, it was agreed that the graph in question would be amended.

The Board received and noted the contents of the Safer Staffing Levels report for the quarter 2 period.

 9.1 Safer Staffing Q2 report - v1.pdf

 9.2. Safer Staffing Quarter 2 data 2018-19.pdf

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## 10. Guardians of safe working hours (Q2)

**Discussion**  
Executive Medical Director

Rajesh Nadkarni introduced Bruce Owen, Consultant Psychiatrist and Director of Postgraduate Education who spoke to the enclosed report to update the Board on safe working hours of Junior Doctors, July to September 2018.

Bruce highlighted the months of July and August due to the number of junior doctor vacancies and advised that the Trust had to use emergency cover. Discussion took place relating to the reasons for the vacancies and the Junior doctors rotation and annual leave were considered to be contributing factors.

Further discussion took place relating to the pros and cons of setting up a doctors' staff bank. Concerns were raised in respect of doctors breaching safe working hours.

Miriam Harte referred to a discussion that took place at the Board away day in relation to level loading holidays.

The Board received the Guardian Report on Safe Working Hours for the quarter 1 period.

 10. Safe Working Hours Report.pdf

## 11. Service User and Carer experience (Q2)

Lisa Quinn spoke to the enclosed report to update the Board on the service user and carer experience feedback received for quarter 2. Lisa highlighted that the overall score for quarter 2 was 89%, which was a slight increase on the previous quarter's score of 88%. The score was further confirmed to be in line with the National average.

Discussion took place relating to the methods of gaining feedback and how the Trust can improve to gain more feedback from service users and carers.

The Board received and noted the Service User and Carer Experience report for quarter 2.

 11. BoD Service User and Carer Report Q2.pdf

**Discussion**  
Executive Director Of  
Commissioning And Quality  
Assurance

## 12. Emergency Preparedness , Resilience and Response (EPRR) Annual Report 2017/18 (Including NHS England Core Standards Assessment 2018 / 19)

Tony Gray, Head of Safety, Security and Resilience spoke to the enclosed report to provide assurance on the Trust's Emergency Preparedness, Resilience and Response.

Tony further referred to the enclosed NHS England core standards submission 2018/19 and advised that substantial assurance had been identified with three minor actions to report.

The Board received the Emergency Resilience and Response Annual Report 2017/18 (Including NHS England Core Standards Assessment 2018 / 19).

 12. EPRR - Board of Directors - Annual Report 2017 - 2018.pdf

**Discussion**  
Executive Director Of  
Nursing And Chief Operating  
Officer

## 13. Commissioning and Quality Assurance Report (Q2, Month 6)

Lisa Quinn spoke to the report to update the Board in relation to the Trust's position against the Single Oversight Framework (SOF). Lisa advised that there had been little change since last month and waiting times continue to be a key challenge which are one of the Trust's quality priorities.

Lisa further advised that the final position in relation to staff sickness for September had decreased to 5.8 % from 5.9 % that was reported last month.

James Duncan provided an update on the Trust's financial position detailed within the report and confirmed that the Trust is broadly on track with the 2018/19 financial plan. James advised that the Trust's strategy to reduce the use of agency staff remains under tight review and that the Trust is focusing on delivering a sustainable position going forward.

The Board received the Integrated Commissioning and Quality Assurance report.

 13. BoD Monthly Commissioning Quality Assurance Report Month 6.pdf

**Discussion**  
Executive Director Of  
Commissioning And Quality  
Assurance

## 14. Board Assurance Framework and Corporate Risk Register (Q2)

Lisa Quinn spoke to the Board Assurance Framework and Corporate Risk Register to update the Board on the Quarter 2 position. Lisa advised that all risks had been reviewed by the relevant executive leads and committees during the Quarter and that there had been little change from the previous quarter.

Lisa further advised that she was working with Martin Cocker on the Board Assurance Framework and Corporate Risk Register to look at how further assurance can be provided.

The Board received and noted the Board Assurance Framework and Corporate Risk Register.

 14.1 Board of Directors Trust-Wide Risk Management Report October 2018.pdf

 14.2 Q2 BAF CRR 2018 - 2019 V1.pdf

**Discussion**  
Executive Director Of  
Commissioning And Quality  
Assurance

## 15. Visit feedback themes (Q2)

Gary O'Hare presented the report to update the Board on visits that have been reported as having been undertaken by Senior Managers during the last quarter and the issues raised. Gary advised that the comments within the reports have been taken directly from submissions and are generally positive.

**Decision**  
Executive Director Of  
Nursing/ Chief Operating  
Officer

**Alexis Cleveland requested a visits programme for non-executive directors.**

In response to a question raised by Miriam Harte, Gary O'Hare advise that he would follow up the comment regarding a band 8b post with the individual.

In response to a question raised by Peter Studd, Gary O'Hare advised that a lot of work is been conducted to support staff working in Children and Young People's services.

The Board recieved and noted the visit feedback themes for the quarter 2 period.

 15. Feedback from Service Visits (Q2 - July to Sept 2018).pdf

## 16. The First Tier Tribunal Report

Ruth Thompson spoke to the First Tier Tribunal (Health, Education and Social Care Chamber) Report on the Practice, Procedure and Operation of the Mental Health Tribunal in the NHS and NTW Foundation Trust. Ruth advised that the report highlights practice changes, areas for improvement and current good practice.

**Discussion**  
Mental Health Legislation  
Committee Chair

Rajesh Nadkarni, informed the Board that the report had received very good feedback from the steering group. James Duncan agreed and stated that it was a very useful report that details interesting changes that will impact on tribunals going forward.

Ken Jarrold highlighted the importance of conducting tribunals to the highest standard.

The Board recieved and noted the contents of the First Tier Tribunal Report.

 16.1. The First tier Tribunal report.pdf

 16.2. Tribunal report for committee 4th version 120718.pdf

## Strategy and Partnerships

### 17. Sunderland's All Together Better Alliance Executive, Briefing Paper and Terms of Reference

Lisa Quinn spoke to the enclosed briefing paper to update the Board on the progress made in relation to the establishment of the All Together Better Alliance in Sunderland that aims to achieve an integrated Out of Hospital Health and Care Model.

**Discussion**  
Executive Director Of  
Comissioning And Quality  
Assurance

Lisa advised that NTW would have responsibility for leading the part of the alliance that delivers Mental Health and Learning Disability services.

The Board formally supported the recommendations as set out within the briefing paper, including the new ATBA Terms of Reference.

 17.1 BoD - ATBA Briefing Paper and Terms of Reference Sept 18.pdf

 17.2 BoD - ATBA Briefing Paper and Terms of Reference Sept 18 - Appendix 1.pdf

### 18. Applied Research Collaboration

Rajesh Nadkarni spoke to the report to update the Board on the NENC Applied Research Collaboration application. Rajesh reminded the Board that NTW is the host organisation for the North East and North Cumbria ARC application which is worth £9m over five years. It was explained that a decision on whether the application is successful is expected to be made in December.

**Discussion**  
Executive Medical Director

The Board recieved the Applied Research Collaboration update for information.

 18.1. NIHR ARC application update front sheet Oct Board.pdf

 18.2. NIHR ARC NENC Executive summary final v2.pdf

## 19. 2018 Education and Training Self-Assessment Report

**Decision**  
Executive Medical Director

Bruce Owen and Anne Moore spoke to the enclosed reports and delivered a presentation to update the Board on how the undergraduate and postgraduate medical training and multi-professional training delivered in the Trust meets the GMC and HEE quality standards.

In response to a question raised by Martin Cocker regarding the quality and accuracy of the data provided, Bruce and Anne described the various streams of data that are used to confirm that the data is correct. This included data gathered from the GMC survey, students progression, feedback from trainers, incidents, patient feedback, student feedback and various meeting forums.

Bruce Owen assured Peter Studd that external reviews of standards are also conducted.

Lisa Quinn raised the issue of gender imbalance in relation to nursing staff. Anne Moore advised that it was a priority to attract and recruit more male nursing staff.

Alexis Cleveland asked if the Board could receive an assurance map that demonstrates the various levels of assurance when being asked to formally sign off a report.

In response to a question raised by Martin Cocker, Bruce advised that the scoring is published publically and that a good rating for the training delivered in the Trust is likely to attract more doctors to apply.

The Board approved the 2018 Education and Training Self Assessment report.

 19. Board 24.10.18 SAR18.pdf

 19.1. NTW Self-Assessment Report (SAR) 2018.pdf

 19 - PRESENTATION SAR board 2018.pdf

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## Workforce

### 20. Staff Friends & Family Report

**Discussion**  
Acting Executive Director Of  
Workforce And  
Organisational Development

Lynne Shaw spoke to the enclosed report to update the Board on the quarter 2 results of the Staff Friends and Family Survey. Lynne highlighted that the Trust remains above the national average in relation to the proportion of staff recommending NTW to friends and family as a place to work and results had slightly decreased in the quarter from 72% to 70%.

Discussion took place to understand the data and consider any further actions that could be taken to make the position better.

The Board received and noted the Staff Friends and Family Report for quarter 2.

 20. BoD Staff Friends and Family Test Qtr2 (2018-19).pdf

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## Regulatory

### 21. Quarterly Report to NHS Improvement and submissions

**Discussion**  
Executive Director Of  
Commissioning And Quality  
Assurance

Lisa Quinn referred to the enclosed report that provides an update in relation to the Trust's position against the Single Oversight Framework in quarter 2.

The Board received and noted the Trust's quarter 2 position.

 21. BoD Quarterly Report on NHS Improvement (Single Oversight Framework) Q2 2018-19.pdf

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## Minutes/Papers for Information

### 22. Committee updates

**Information**  
Non-Executive Directors

#### Audit Committee

Martin Cocker advised that the Trust will be going out to tender for external auditors in the near future.

There were no further updates for the Board.

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## 23. Council of Governors' Issues

Verbal  
Chair

Ken Jarrold provided a verbal update on the Council of Governors current issues. These included the ongoing Governor Elections, the recent presentation on Trust Innovations and valued care delivered to a meeting of the Council of Governors and a Governor visit to East London NHS Trust.

Ken further advised that Anne Carlile, Carer Governor for Adult services had been appointed as Deputy Chair of the NHS Providers Governor Advisory Committee.

Miriam Harte requested that Governors be reminded that they can attend Board of Directors meetings held in public.

The Board received the Chair's update on Council of Governor issues.

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## 24. Any other Business

Verbal  
Chair

### Flu Campaign

Anne Moore, Group Nurse Director provided a verbal update in relation to the Trust's Flu campaign and advised that 41% of staff had been vaccinated to date.

There was no further business to note for this meeting.

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## 25. Questions from the Public

Discussion  
Chair

There were no questions raised from members of the public in attendance.

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## Date, time and place of next meeting:

**26. Wednesday, 28 November 2018, 13:30 pm to 3:30 pm, Large Training Room, Hopewood Park, SR2 0NB.**

Information  
Chair

# Board of Directors Meeting (PUBLIC)

28 November 2018, 13:30 to 15:30

Training Room 4, Hopewood Park, SR2 0NB.

## Attendees

### Board members

Ken Jarrold (Chair) , John Lawlor (Chief Executive) , Les Boobis (Non-Executive Director) , Martin Cocker (Non-Executive Director) , Alexis Cleveland (Non-Executive Director) , James Duncan (Executive Director of Finance and Deputy Chief Executive) , Miriam Harte (Non-Executive Director) , Rajesh Nadkarni (Executive Medical Director) , Lisa Quinn (Executive Director of Commissioning and Quality Assurance) , Lynne Shaw (Acting Executive Director of Workforce and Organisational Development) , Peter Studd (Non-Executive Director)

### In Attendance

Jennifer Cribbes (Corporate Affairs Manager) , Fiona Regan (Member of the Public / Carer) , Alison Chalmers (Member of the Public / Carer) , David Muir (Group Nurse Director) , Caroline Wills (Clinical Development Lead) , Chris Rowlands (Equality & Diversity Lead) , Kay Gwynn (Modern Matron)

### Apologies

Gary O'Hare (Executive Director of Nursing and Chief Operating Officer) , Ruth Thompson (Non-Executive Director)

## Meeting minutes

### 1. Service User/Carer Experience

#### Information

Fiona Regan/Caroline Wills

Ken Jarrold opened the meeting and welcomed those in attendance.

Fiona Regan delivered a verbal presentation to share her personal experience of being the carer of her son who uses NTW services. Fiona delivered a very detailed overview of her experience of Care and Treatment Review meetings and services at Rose Lodge.

Ken Jarrold thanked Fiona for sharing her story and assured her that her views would be taken very seriously.

Fiona Regan, Alison Chalmers and Caroline Wills left the meeting.

### 2. Apologies

#### Information

Chair

Apologies were received from:

Gary O'Hare, Executive Director of Nursing and Chief Operating Officer.

Ruth Thompson, Non-Executive Director.

### 3. Declarations of Interest

#### Information

Chair

John Lawlor advised the Board that he had registered a new interest as his wife Julie Lawlor is working in Cumbria on a part time basis.

There were no conflicts of interest declared for this meeting.

### 4. Minutes of the previous meeting: Wednesday 24 October 2018

#### Decision

Chair

The Board agreed that the minutes of the 24 October 2018 were a true and accurate record of the meeting.

 4. DRAFT minutes - Board held in Public 28 November 2018.pdf

### 5. Action list and matters arising not included on the agenda

#### Discussion

Chair

Item (5) Crisis Team phone lines

The Board agreed to defer this action to allow information to be collated. Peter Studd and Miriam Harte requested further information in relation to Crisis Team call abandonment rates.

 5 - Action List.pdf

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## 6. Chair's Remarks

## Information

Chair

Ken Jarrold provided a verbal update and referred to the NHS Long Term Plan and restructure of the NHS. Ken advised that it was important for the Trust to continue to influence changes wherever possible on behalf of the interests of the people we serve.

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## 7. Chief Executive's Report

## Information

Chief Executive

John Lawlor spoke to the enclosed Chief Executive's report to provide the Board with Trust, Regional and National updates. John provided further details in relation to the local Integrated Care System (ICS) and advised that the Trust is working towards becoming part of a Shadow ICS from 1 April 2019.

John advised that the NHS Long Term plan was expected to be published in the near future.

The Board received and noted the contents of the Chief Executive's report.

 7.1 - CE Report Nov 2018 FINAL.pdf

 7.2 Appendix 1 - NHS Providers Briefing - October 2018 Budget.pdf

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## Quality, Clinical and Patient Issues

### 8. Commissioning and Quality Assurance Report (Month 7)

## Decision

Executive Director Of  
Commissioning And Quality  
Assurance

Lisa Quinn spoke to the Commissioning and Quality Assurance report to update the Board in relation to the Trust's position against the Single Oversight Framework (SOF). Lisa explained that the report had been reduced to provide a high-level overview as previously requested. Lisa further advised that the full report was still being presented and reviewed at the Trust's Quality and Performance Committee.

Lisa confirmed that the Trust's regulatory position against the Single Oversight Framework (SOF) was 1 and the CQC currently have no material concerns. The Board was reminded of the 3 outstanding CQC 'must do' areas.

It was confirmed that all CQUINs had been assessed and achieved at the end of October and there had been a small improvement in waiting times.

In relation to staff sickness, Lisa advised that there had been a reduction in October which was against the seasonal trend.

James Duncan spoke to the finance section of the report and it was noted that there had been no significant change since the previous month.

Ken Jarrold thanked Lisa and James for the report and commended the new format.

The Board received the Integrated Commissioning and Quality Assurance report.

 8. BoD Monthly Commissioning Quality Assurance report Month 7.pdf

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### 9. 'Flu Assurance Report

## Decision

Executive Nursing Director /  
Chief Operating Officer

Kay Gwynn spoke to the enclosed Flu Vaccination Assurance report to update the Board on the Trust's position in relation to NHS England's request to achieve a 100% Flu Vaccination uptake for care workers who have direct patient contact.

Kay referred to the enclosed best practice management checklist and explained the risks associated with frontline staff who are not vaccinated. The measures in place to mitigate the risks were explained. Kay advised that the Department of Health will collect the reason why staff refuse to be vaccinated via an anonymous survey and the results will be collated nationally.

Further discussion took place in relation to why frontline workers refuse the vaccination and the risks involved.

In response to a question raised by Peter Studd, Kay advised that 73% of staff had been vaccinated the previous year.

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 9.1 Flu Board Assurance paper- front sheet.pdf

 9.2 healthcare worker flu vaccination best practice checklist.am.pdf

 9.3 49125\_20180907-hcw-flu-vaccination-letter-final.pdf

## 10. CQC Community Mental Health Survey

Lisa Quinn spoke to the enclosed CQC Community Mental Health Survey report to inform the Board of the recently published results.

Lisa advised that in relation to the overall survey, there had been a National decline in experience from 34% to 30%. Lisa explained that the result for NTW was 36% which is above the National average but is a small deterioration from previous results in 2017. Despite this, NTW has seen an improvement in the area of respect and dignity where Nationally that area had declined.

Lisa referred to the appendix which showed the responses for each of the questions asked. Lisa highlighted areas where NTW had scored the highest in the Country.

Lisa further explained that the survey correlates closely with the result of the Trust's Points of You questionnaires.

The Board received and noted the CQC Community Mental Health Survey Report.

 10.1 Board CQC Service User Survey November 2018 FINAL.pdf

 10.2 Board CQC Service User Survey November 2018 FINAL Appendix 6.pdf

### Information

Executive Director Of  
Commissioning And Quality  
Assurance

## 11. No Waste

James Duncan spoke to the enclosed No Waste Report to update the Board on the national issue relating to clinical waste disposal. James reminded the Board of the discussion held at October Closed Board meeting where it was explained that NTW did procure some services from the company. However, NTW were experiencing no issues due to having a low level of clinical waste. James advised that there may be a small risk to NTW as a consequence of the national controversy.

The Board received and noted the position in relation to Clinical Waste Disposal.

 11. No Waste.pdf

### Information

Deputy Chief Executive/  
Executive Director Of  
Finance

## Strategy and Partnerships

### 12. Gateshead Health and Care partnership : Memorandum of Understanding

James Duncan spoke to the enclosed report; Gateshead Health and Care Partnership Memorandum of Understanding and reminded the Board of the discussions held at the July Board Development session.

In response to a question raised by Peter Studd regarding decision making, James advised that in instances where organisations cannot come to a consensus, decisions may go to a vote and ultimately an organisation may consider withdrawing from the Partnership.

Ken Jarrold summed up and commented that the local partnership approach is very powerful and it is important for NTW to be involved to shape the services provided to the local population.

The Board approved and supported the Gateshead Health and Care Partnership Memorandum of Understanding.

The Board authorised the Trust's management team to work with partner organisations on the detailed terms of reference and working arrangements.

 12. Gateshead Health and Care Partnership MOU Board Paper November 2018.pdf

### Decision

Executive Director Of  
Finance/ Deputy Chief  
Executive

### 13. Charity Committee Annual Report and Accounts

Martin Cocker spoke to the enclosed Charity Committee Annual Report and Accounts and reminded the Board members of their delegated responsibility as trustees of the Charity. Martin advised that Mazars had conducted a full independent review and audit on the annual report and accounts of the Charity and there were no issues to report.

The Board approved the Charitable Funds annual report and accounts for the year ended March 31, 2018.

The Board further received and noted the annual report of the Chairman of the Charitable Funds sub-committee.

 13.1 Charity Cover page 2018.pdf

 13.2 Charity Committee report October 2018 final.pdf

 13.3 Charity Annual Report and Accounts 2018 FINAL.pdf

### Decision

Deputy Chief Executive/  
Executive Director Of  
Finance

## Workforce

## 14. Freedom to Speak Up - 6 month update

Lynne Shaw spoke to the enclosed Freedom to Speak Up Guardian Report to update the Board on concerns raised and logged by the Freedom to Speak Up Guardian and Central Workforce Team between 1 April 2018 and 30 September 2018. Lynne advised that there had been 21 cases reported and logged during the period which was identical to the number reported during the previous six months. Lynne brought the Board's attention to Appendix 1 which detailed each case and confirmed that there had been no trends identified.

The Board received and noted the Freedom to Speak up 6 month update report.

 15. FTSUG report - Nov 2018.pdf

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## 15. Freedom to Speak Up Self-Assessment

Lynne Shaw spoke to the enclosed Freedom to Speak Up Self-Review Report to update the Board on the Trust's position against the NHS Improvement and National Guardian's Office criteria.

Lynne advised that the self-assessment had been completed by Neil Cockling, Freedom to Speak up Guardian, Les Boobis, Non-Executive Director with the responsibility for FTSU and herself. Lynne explained the format of the report and areas for further development.

It was confirmed that James Duncan is the Executive Lead, for FTSU.

The Board received and noted the Freedom to Speak Up Self -Assessment report.

 16. Freedom to Speak Up Self-Review Tool.pdf

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## 16. Workforce Directorate Quarterly update

Lynne Shaw spoke to the enclosed Workforce Quarterly Update report to advise the Board on the key work and developments made since the last meeting.

Lynne provided further information in relation to the EU Settlement Scheme and NHS Improvement Direct Support Retention Programme. Lynne advised that NTW was participating on Cohort 3 of the NHSI Direct Support Retention Programme and brought the Board's attention to the action plan that was enclosed within the report.

The Board received and noted the Workforce Directorate Quarterly update.

 14.1 Quarterly Workforce Report - Nov 2018.pdf

 14.2 Quarterly Workforce Report - Appendix 1 Retention Action Plan Version 7 ...pdf

 14.3 Quarterly Workforce Report - Appendix 2 Workforce Retention KPI Dashboar....pdf

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## 17. Fit and Proper Person Test update

Lynne Shaw spoke to the enclosed Fit and Proper Person Test report to update the Board on the Trust's current position. Lynne advised that all tests had been conducted in September and that no issues had been found in any of the areas.

The Board received and noted the Trust's position in relation to compliance with the Fit and Proper Person requirement.

 17. FPPT - Board November 2018 (002).pdf

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### Discussion

Acting Executive Director Of  
Workforce And  
Organisational Development

### Discussion

Acting Executive Director Of  
Workforce And  
Organisational Development

### Discussion

Acting Executive Director Of  
Workforce And  
Organisational Development

## 18. Equality and Diversity Strategy

Chris Rowlands spoke to the enclosed Equality and Diversity Strategy 2018 - 2022 and reminded the Board that the Strategy is part of the Trust's legal obligations under the Public Sector Equality Duties.

Chris advised the Board that the Equality Act requires the Trust to set objectives for a four year period. Chris referred to the action planning and reporting cycle within the report and explained that the Strategy will be reviewed by the Board annually and updated so it continues to be a live document.

Peter Studd raised a question regarding staff recruitment, applicants from an Equality and Diversity background and where the jobs are advertised. Chris advised that the Trust had recently moved to a new recruitment system called Trac which collects more information on where jobs are advertised and Equality and Diversity areas. Chris commented that the Trac system will become a valuable source of information going forward.

John Lawlor commented on the importance of having a fair representation of individuals with protected characteristics, staff service users and carers.

Rajesh Nadkarni pointed out that it may be more difficult for NTW to ensure representation from a BAME background due to having smaller representation locally in comparison to other areas of the Country. Subsequently, it was agreed that we will have more work to do to ensure representation.

The Board received and noted the Equality and Diversity Strategy.

 18. Equality and Diversity Strategy 2018 Revision 2.0 November 2018.pdf

**Decision**  
Acting Executive Director Of  
Workforce And  
Organisational Development

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## Safer Staffing

### 19. Safer Staffing - Exception Report September 2018

David Muir spoke to the enclosed exception report to provide the Board with an update in relation to safer staffing compliance for September 2018. David explained the two exceptions during the month and confirmed there had been no instances of harm attributed to the variance in safer staffing levels.

Discussion took place regarding the staffing levels at Rose Lodge. David confirmed that the figures demonstrated that Rose Lodge was not understaffed.

The Board received and noted the contents of the Safer Staffing Levels exception report for September 2018.

 19.1 Safer Staffing Report for sep 2018 (002) (002) (003).pdf

 19.2 group data sept.pdf

 19.1 Safer Staffing Report for sep 2018 (002) (002) (003).pdf

 19.2 group data sept.pdf

**Information**  
Executive Nursing Director /  
Chief Operating Officer

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## Minutes/Papers for Information

### 20. Committee updates

There was nothing significant to report.

**Information**  
Non-Executive Directors

### 21. Council of Governors' Issues

Ken Jarrold provided a verbal update on the Council of Governors current issues. These included the recent Governor Elections and turnout for each of the positions and the current position in relation to the ongoing recruitment of two Non-Executive Directors.

The Board received the Chair's update on Council of Governor issues.

**Information**  
Chair

### 22. Any other Business

There was no further business to note for this meeting. Ken Jarrold closed the meeting and noted that it was the final meeting of two of the Non-Executive Directors, Martin Cocker and Ruth Thompson. Ken thanked Martin and Ruth for their tremendous contribution to the Board and said that they would be greatly missed.

**Information**  
Chair

### **23. Questions from the Public**

There were no members of the public in attendance at this point of the meeting.

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**Discussion**

Chair

### **Date, time and place of next meeting:**

**24. Wednesday, 23 January 2019, 1:30pm to 3:30pm, Conference Room 1 & 2,  
Ferndene, Prudhoe, NE42 5PB**

**Information**

Chair