

Council of Governors General Meeting

Thu 17 March 2022, 14:00 - 16:00

Via Microsoft Teams

Agenda

1. Welcome and apologies for absence

Ken Jarrold, Chairman

2. Declarations of interest

Ken Jarrold, Chairman

3. Minutes of the meeting held 10 November 2021

Ken Jarrold, Chairman

 4. Draft Minutes CoG 10 November 2021 final.pdf (6 pages)

4. Matters arising and action log

Ken Jarrold, Chairman

5. Chair's Update

Ken Jarrold, Chairman

6. Chief Executive's Update

James Duncan, Chief Executive

 6. CEO Report March 2022.pdf (4 pages)

7. Governor representation on Sub-Committees and working groups

Ken Jarrold, Chairman

8. External Auditor Appointment - for approval

David Arthur, Audit Committee Chair and Tom Bentley, Audit Committee Governor representative

 08. External Auditor reappointment DH.pdf (1 pages)

Allen, Kirsty
03/14/2022 11:00:36

9. Elections Update

Kirsty Allan, Corporate Governance Manager

 09. Election paper final.pdf (2 pages)

10. Governors' Questions

Ken Jarrold, Chairman

Governor feedback

11. Feedback from Resource Business and Assurance Committee

Victoria Bullerwell

12. Feedback from Audit Committee

Tom Bentley

13. Feedback from Quality and Performance Committee

Margaret Adams and Anne Carlile

14. Feedback from Mental Health Legislation Committee

Fiona Grant and Denise Porter

15. Feedback from Provider Collaborative Committee

Cath Hepburn and Fiona Regan

16. Feedback from People Committee

TBC

17. Feedback from Charitable Funds Committee

Fiona Grant

18. Update from Governors' Nomination Committee

Ken Jarrold and Margaret Adams, Co-Chairs

*Allen, Kirsty
03/14/2022 11:00:36*

19. Feedback from Governors' Quality Group

Margaret Adams

20. Update from Governors' Steering Group

Ken Jarrold, Chair

21. Update from Governors' Governance Group

Debbie Henderson, Director of Communications and Corporate Affairs

22. Update from NHS Providers' Governor Advisory Panel

Anne Carlile

23. Feedback from Governor other events and meetings

All Governors

24. Board of Director February 2022 minutes - for information

Ken Jarrold, Chairman

 24. Board Public Minutes 2 February 2022 FINAL.pdf (11 pages)

25. Any Other Business

Ken Jarrold, Chairman

Key items

26. Children and Young People's Services Update

Ramona Duguid, Chief Operating Officer

Allen, Kirsty
03/14/2022 11:00:36

**Draft Minutes of the Council of Governors Virtual Meeting held in public
Wednesday, 10 November 2021 from 2pm – 4pm
via Microsoft Teams**

Present:

Ken Jarrold	Chair
Margaret Adams	Deputy Lead Governor/Public Governor, South Tyneside
Evelyn Bitcon	Public Governor for Cumbria
Stephen Blair	Public Governor, Newcastle, Rest of England and Wales
Russell Bowman	Service User Governor, Neuro Disability Services
Victoria Bullerwell	Staff Governor, Non-Clinical
Anne Carlile	Carer Governor, Adult Services
Revell Cornell	Staff Governor, Non-Clinical
Wilf Flynn	Local Authority Governor, South Tyneside
Fiona Grant	Lead Governor/Service User Governor, Adult Services
Claire Keys	Staff Governor, Clinical
Denise Porter	Voluntary Services Governor, Rethink Mental Illness
Tom Rebar	Service User Governor, Adult Services
Cllr Paul Richardson	Local Authority Governor, North Tyneside

In Attendance:

Kirsty Allan	Acting Corporate Affairs Manager (Minute Taker)
David Arthur	Non-Executive Director
Darren Best	Non-Executive Director and Vice Chair
Paula Breen	Non-Executive Director
Alexis Cleveland	Non-Executive Director
Ramona Duguid	Chief Operating Officer
James Duncan	Deputy Chief Executive and Executive Finance Director
Debbie Henderson	Director of Communications and Corporate Affairs
John Lawlor	Chief Executive
Michael Robinson	Non-Executive Director
Lynne Shaw	Executive Director of Workforce and OD
Emma Shipley	Associate Director, Workforce and OD
Jayne Simpson	Corporate Affairs Officer
Peter Studd	Non-Executive Director

1. Welcome and Introductions

Ken Jarrold introduced the meeting and welcomed everyone joining virtually via Microsoft Teams. Apologies for absence were received from:

Tom Bentley	Public Governor, Gateshead
Kat Boulton	Service User Governor, Children and Young Peoples Services
Allan Brownrigg	Staff Governor, Clinical
Cllr Maria Hall	Local Authority Governor, Gateshead Council
Cath Hepburn	Public Governor, North Tyneside
Annie Murphy	Community and Voluntary Sector Governor

Rajesh Nadkarni	Executive Medical Director
Gary O'Hare	Chief Nurse
Lisa Quinn	Executive Director Commissioning and Quality Assurance
Raza Rahman	Staff Governor - Clinical
Fiona Regan	Carer Governor, Learning Disability and Autism Services
Janice Santos	Carer Governor, Children and Young People's Services
Bob Waddell	Non-Clinical Staff Governor

2. Declaration of Interest

There were no conflicts of interest declared for the meeting.

3. Minutes for approval and Action Log

The minutes of the meeting held on 13 July 2021 were considered.

Approved:

- **The minutes of the meeting held on 13 July 2021 were agreed as an accurate record.**

4. Matters arising not included on the agenda

None to note.

Business Items

5. Chair's Report

Ken Jarrold referred to the very difficult position the Trust is facing with increasing demand and staffing issues, acknowledging the very challenging time for colleagues, service users and carers. Ken recognised the reducing confidence in the NHS from service users due to delays in treatment impacting from the issues relating to increasing demand for services and the potential consequence on the NHS workforce and their experience of challenging behaviours from members of the public. Ken reassured members that the Council of Governors, Executive Team, and the Board will continue to give all necessary support to colleagues who are encountering challenging behaviours as part of their work.

Ken Jarrold referred to the message from Amanda Pritchard, the new Chief Executive of the NHS England/NHS Improvement which highlighted the importance of being open and honest about the current situation as well as highlighting the ambition of the NHS, to continue to do our very best and indeed to do better.

Ken provided an update on the Chief Executive recruitment process with John Lawlor retiring at the end of January 2022. The process had commenced with interviews arranged to take place on 16th and 17th December 2021. The process would include participation from a wide range of stakeholders including Governors, service users and carers, a cross-section of the wider workforce and partner organisations.

Fiona Grant referred to the Secretary of State recent announcement regarding mandatory vaccines for NHS staff and asked what impact it will be on the Trust. John Lawlor advised that national guidance was expected to be published in the coming weeks. Work had already commenced to identify those staff who remain unvaccinated and would include a programme of support for staff. Lynne Shaw also advised that meetings were taking place nationally and locally with a view to gaining clarity of which staff would fall into scope and exemptions where appropriate.

Resolved:

- **The Council of Governors received and noted the Chair's update**

6. Lead Governor Appointment for Approval

Ken Jarrold referred to the report and noted that expressions of interest were sought from the Council of Governors. One expression of interest was received from Margaret Adams and Ken Jarrold asked the Council of Governors to approve the appointment of Margaret Adams as Lead Governor from 1st December 2021. The Council of Governors were unanimous in approving the appointment of Margaret Adams as Lead Governor from 1st December 2021.

Ken welcomed Margaret to the role referencing her vast experience as Deputy Lead Governor, Chair of the Service User and Carer Reference Group and long history of involvement with the third sector. The Council of Governors congratulated and welcomed Margaret to the role.

Ken thanked Fiona Grant for her great service to the Trust as Lead Governor and for her support to him as Chairman over the years. Fiona Grant thanked the Council of Governors for their support during her time as Lead Governor, saying it had been an honour and privilege to work with the Council of Governors.

Approved

- **Council of Governors Approved the appointment of Margaret Adams as Lead Governor from 1st December 2021**

7. Chief Executive's Report

John Lawlor referred to the report and highlighted Black History Month during October which included an on-line event attended by almost 100 people. The event included presentation and discussions with a mix of speakers and an update on the work of the Trust to tackle discrimination and actions to promote equality, diversity, and inclusion. John noted that Roger Kline, a Research Fellow from Middlesex University, and expert practitioner, had been commissioned to support the Trust to look at this important piece of work.

John referred to the work with Health Education England to create a training course around positive behavioural support with the next steps being to roll out the course and others under the auspices of the CNTW Academy and develop a sustainable delivery plan.

John referred to the first Peer Support Education Programme and an event to celebrate their success on completion of the project. The Trust Involvement Team have developed, through hard work and innovation, a truly excellent programme. John thanked the Involvement Team and all the Peer Supporters involved for their excellent work.

John referred to current pressures, particularly in relation to waiting times and access to services and talked about some of the challenges in terms of bed capacity, workforce capacity, and the impact of capital schemes resulting in a small number of service users requiring care and treatment out of area. Gary O'Hare, Chief Nurse was leading on work to explore new roles and workforce planning to address some of the workforce challenges.

8. Equality, Diversity and Inclusion update

Lynne Shaw provided an update following the launch of the 'Give Respect, Get Respect' campaign in July. The campaign was developed in response to increasing concerns and feedback from staff relating to inequalities. The campaign is progressing well and as part of the campaign have linked with a company, A Kind Life, which have developed a resolution framework which the Trust are now in the process of training the trainers to be then rolled out across the organisation.

The anti-racism element of the campaign has also been launched which will include a programme of work highlighting anti-racism and working closely with Staff Networks.

As part of the commissioned work with Roger Kline, sessions will be held with the Board of Directors, Council of Governors, junior doctors, and members of the workforce from a BAME background. In the New Year development work will take place with managers and leaders across the organisation.

Lynne Shaw referred to site visits undertaken by herself and Rajesh Nadkarni, Medical Director to spend time with staff, including those working in community settings. Feedback on learning from the sessions will be considered following completion of the programme with immediate issues being addressed in real time.

Lynne provided an update on the work relating to inclusive recruitment which has included six workstreams to examine in detail the whole recruitment process.

Victoria Bullerwell referred to work in NTW Solutions Limited, the Trust subsidiary company, to ensure the organisation is considered a great and inclusive place to work. Victoria noted that the NTW Solutions Limited have been ranked in the top 25th public sector organisation in relation to the dedication and commitment and progress made in relation to equality and diversity for the workforce.

Resolved

- **The Council of Governors received the Equality, Diversity and Inclusion update**

9. Governor sub-group Terms of Reference Review for approval

Debbie Henderson provided an update on the Terms of Reference review of each of the Governor sub-groups noting that all revised Terms of Reference had been approved by the groups for ratification by the full Council of Governors.

Approved:

- **The Council of Governors approved the revised Terms of Reference for the:**
 - **Governors' Nomination Committee**
 - **Governor's Quality Group**
 - **Governors' Steering Group**
 - **Governors' Governance Group**

10. Governor's Questions

None to note.

11. Governor Election update

Debbie Henderson noted that nomination period for elections closed on 9th November and a data cleanse was underway reviewing the nominations eligibility. Debbie advised that contested elections would take place in three constituencies with voting open on 29th November with a closing date of 17th December.

Debbie Henderson referred to pressures for all NHS organisations over the past year due to the pandemic and advised that therefore, the process had been slightly delayed with completion of the election process being 31 December 2021 as opposed to 30 November 2021. Debbie requested approval for a small extension of one month to the terms of office of current Governors due to expire on 30 November 2021 to 31st December 2021.

Approved:

- **The Council of Governors approved the extension to current Governors Terms of Office until 31st December 2021**

Governor Feedback

12. Feedback from Resource and Business Assurance Committee (RABAC)

Nothing to report.

13. Feedback from Audit Committee

In the absence of Tom Bentley, David Arthur noted that the Committee received an update on the recommendation associated with the internal audit report on medical discharges. David noted that the Committee also approved the charity accounts for the year ending 31st March 2021.

14. Feedback from Quality and Performance Committee

Margaret Adams mentioned the last meeting took place on 27th October with comprehensive reports with a key focus on current pressures discussed earlier in the meeting. Anne Carlile also referred to a discussion on support for the discharge of patients of no fixed abode.

Regarding the current pressures across the Trust. Alexis Cleveland advised that a presentation will be provided to the Board as well as Council of Governors at future meetings.

15. Feedback from Mental Health Legislation Committee

Denise Porter referred to a discussion regarding to pressure on staff and the system. Michael Robinson mentioned the revisions to the timetable of the review of the Mental Health Act and once it becomes clear there will be a lot of preparation required.

16. Feedback from Provider Collaborative Committee

Michael Robinson noted that feedback was received from the three Provider Collaboratives. The meeting focussed on the contractual governance arrangements noting that the Provider Collaborative model is the preferred route to providing services within the ICS with a potential for expansion over the next few years.

Ken Jarrold requested an update to the Council of Governors at a future date to include the new role CNTW has in relation to the involvement with TEWV.

17. Charitable Funds

Fiona Grant advised that she had taken part in the interview panel in September for the new Fundraiser post. The post will be based in the Communications Team. Fiona confirmed the committee was now Chaired by Paula Breen, Non-Executive Director.

18. Feedback from Nomination Committee

Ken Jarrold referred to the appointment process for the new Chair of NTW Solutions Limited advising that Stewart Davies had accepted the role and had engaged in a hand over period with Peter Studd, current Chair.

Margaret Adams thanked all members of the Nomination Committee for their work over the past year acknowledging it had been a very busy time for the Committee over the past 12 months.

19. Update from the Governors Steering Group

Nothing to note.

20. Update from the Governors Quality Group

Margaret Adams provided an update from the September meeting which included a presentation from Ramona Duguid, Chief Operating Officer on the current position in relation to waiting lists and long stays. Rajesh Nadkarni and Margaret Orange provided a comprehensive update on addiction services and substance misuse with national, regional, and local updates.

21. Feedback from Governance Group

Fiona Grant referred to the September meeting which reviewed the Group Terms of Reference, guidance for Governor service visits and guidance for complaint processes if a formal complaint is made against a Governor. Fiona highlighted the need to review the Constitution during 2022 and invited any Governors interested in joining the Group to contact the Corporate Affairs Team.

22. Feedback from Governor Advisory Committee (GAC)

Anne Carlile noted that the recent meeting of the GAC included four workshops. Anne attended day three with 50 Trusts represented at the virtual meeting. Anne referred to a group of all Lead Governors across the country and advised she would share details with Margaret Adams.

23. Feedback from Governor External Events and Meetings

None to note.

24. Board of Directors meeting minutes (discussion by exception only)

No issues to note.

25. Any Other Business

No issues to note.

Big Issue Items

26. Empower Programme

Due to operational pressures, this item had been deferred.

27. Great North Care Record

Ken Jarrold welcomed Darren McKenna and Gail Williams who joined the meeting to present the Great North Care Record (GNCR) and provided a demonstration on the health information exchange.

Darren McKenna provided an update on the three models which make up the GNCR, a Regional Health Information Exchange (HIE) which supports direct patient care, providing a system view of a patient record. A patient engagement platform which provides individuals with access to their own record and a public health management system which analyses data from across the system to improve insight and outcomes for people in our region.

Gail Williams mentioned the HIE is a way of sharing patient information with health and care staff covering 3.6 million people living in the North East and North Cumbria (NENC). This means information recorded about health such as illnesses, hospital admissions and treatments can be accessed by different people involved in the care pathway. By sharing this information health care workers can access the most current details 24/7.

Claire Keys mentioned as a clinician the positive impact of the Great Care Record and thanked Darren and his team.

Ken Jarrold noted that GNCR is as an international best practice exemplar making a significant difference to the patients and NHS and warmly thanked Darren, Gail and everyone involved in this great achievement.

28. Any Other Business

None to note.

29. Date, Time and venue of the next meetings:

Council of Governors meeting held in Public 20 January 2021, 2pm – 4pm.

**Council of Governors Meeting
Chief Executive's Report
Thursday 17 March 2022**

Title of report	Chief Executive's Report
Report author(s)	Jane Welch, Policy Advisor to the Chief Executive
Executive Lead (if different from above)	James Duncan, Chief Executive

Strategic ambitions this paper supports (please check the appropriate box)			
Work with service users and carers to provide excellent care and health and wellbeing	X	Work together to promote prevention, early intervention and resilience	X
To achieve "no health without mental health" and "joined up" services	X	Sustainable mental health and disability services delivering real value	X
To be a centre of excellence for mental health and disability	X	The Trust to be regarded as a great place to work	X

Board Sub-committee meetings where this item has been considered (specify date)	
Quality and Performance	N/A
Audit	N/A
Mental Health Legislation	N/A
Remuneration Committee	N/A
Resource and Business Assurance	N/A
Charitable Funds Committee	N/A
CEDAR Programme Board	N/A
Other/external (please specify)	N/A

Management Group meetings where this item has been considered (specify date)	
Executive Team	N/A
Corporate Decisions Team (CDT)	N/A
CDT – Quality	N/A
CDT – Business	N/A
CDT – Workforce	N/A
CDT – Climate	N/A
CDT – Risk	N/A
Business Delivery Group (BDG)	N/A

Does the report impact on any of the following areas (please check the box and provide detail in the body of the report)			
Equality, diversity and or disability		Reputational	
Workforce		Environmental	
Financial/value for money		Estates and facilities	
Commercial		Compliance/Regulatory	
Quality, safety, experience and effectiveness		Service user, carer and stakeholder involvement	

Board Assurance Framework/Corporate Risk Register risks this paper relates to
--

03/04/2022 11:00:36

**Council of Governors Meeting
Chief Executive's Report
Thursday 17 March 2022**

Trust Updates

CNTW publishes position statement supporting a ban on conversion therapy

[The Trust has published a position statement in support of a ban on conversion therapy in the UK.](#)

The term 'conversion therapy' refers to a type of treatment that assumes certain sexual orientations or gender identities are inferior to others and seeks to change them on that basis. Our position statement provides assurances that as well as supporting a ban on conversion therapy, the Trust will respect the identities of those people with diverse gender and sexuality expressions, as well as ensuring that CNTW is a safe place to both work and receive services. The Trust also commits to raising awareness of the harm caused by 'conversion therapy' and acknowledges that all LGBTQ+ questioning individuals should be able to access therapeutic support to make sense of their emotions and identity.

CNTW celebrates LGBT+ History Month

LGBT+ History Month is an annual month-long observance of lesbian, gay, bisexual and transgender history, and the history of the gay rights and related civil rights movements. 2022 also marks the 50th anniversary of the first Pride event in the UK. CNTW's LGBT+ staff network have organised a virtual LGBT+ History Month event which takes place on Friday 25th February and features an impressive line-up of guest speakers including Lord Michael Cashman, founder of Stonewall; Ben Hunte, the BBC's first LGBT+ correspondent; and Rujazzle, a Glasgow-based artist and drag performer. The LGBT+ network are encouraging Trust staff to join either the whole event or to drop-in for individual sessions, and ward staff are asked to support patients to join the event. We look forward to coming together as a Trust to support and celebrate LGBT+ History Month and thank the LGBT+ staff network for organising an inspiring and thought-provoking event.

National updates

Government publishes first amendments to the Health and Care Bill

[The Government has published details of the first amendments it plans to make to the Health and Care Bill.](#) These include requiring the definition of the term 'health' in the Bill to include mental health, placing a duty on Integrated Care Boards (ICBs) to ensure they have mental health expertise, and requiring the Secretary of State, NHS England and Improvement (NHSEI), and ICBs to disclose annually whether mental health spending is increasing as a share of overall funding. Other new clauses require NHSEI, ICBs, Trusts and Foundation Trusts to consider the environment and climate change in their work, that NHSEI work to address inequalities in access to services encompasses people before they become patients, and that this inequalities work considers quality of patient experience as well as outcomes. The changes have been hailed as an important step forward for parity between physical and mental health and for ensuring mental health services are given due attention by Integrated Care Systems.

Gillian Keegan makes Commons statement on mental health

Gillian Keegan, Minister for Care and Mental Health made a [statement](#) in the House of Commons on 10th February announcing plans to develop a cross-government mental health strategy and increase support for suicide prevention:

“I am announcing my intention to develop a new long term, cross-government Mental Health Strategy in the coming year. The government will launch a public discussion paper this spring to inform the development of the strategy. This will set us up for a wide-ranging and ambitious conversation about potential ways to improve the nation’s mental health and wellbeing over the coming decade, both within and beyond government and the NHS. We will be engaging widely, especially with people with experience of mental ill-health, to develop the strategy and build consensus. I will be calling on all parts of society – including teachers, businesses, voluntary organisations, and health and social care leaders – to set out their proposals for how we can shift the dial on mental health.

Alongside this, preventing suicides is a key priority for this Government. I am acutely aware that suicide prevention requires specific, coordinated action and national focus, and I am committed to work with the sector over the coming year to review our 2012 Suicide Prevention Strategy for England. I am today announcing around an additional £1.5million to top-up our existing £4million grant fund, which will help support the suicide prevention voluntary and community sector to meet the needs of people at risk of suicide, or in crisis”

Integration White Paper

[The Department of Health published the Integration White Paper](#), which sets out the Government’s plans for the integration of health and care and the levelling up of health and care access, experience and outcomes across the country. Core proposals include local health systems committing to and supporting the delivery of an agreed set of shared outcomes, and all Places within an ICS adopting a ‘Place Board’ or equivalent model which includes a single person accountable for the delivery of the shared outcomes for that Place who will be agreed by the local authority (or authorities) and relevant ICB. Under this model Local Authorities and the ICB would delegate their functions and budgets for the delivery of health and care to the Place Board which would oversee a significant and/or growing proportion of health and care activity and spend in that Place. The White Paper also suggests that pooled or aligned budgets will become routine.

Levelling Up White Paper

The Government published its [Levelling Up White Paper](#) which sets out its ambition to end geographical inequality in the UK. The paper outlines 12 core ‘missions’ which will support the realisation of this ambition, these relate to: pay; productivity; local transport; gigabit-capable broadband; school performance; skills; life expectancy; wellbeing; pride in place; home ownership; crime rates; and devolution deals. Specific targets around wellbeing include increasing healthy life expectancy by five years by 2035, with an interim target to narrow the gap between the areas with the best and worst healthy life expectancy by 2030. The paper commits the government to publishing an annual report on progress towards the targets set and suggests the establishment of local advisory panels and a series of ministerial visits to support the Levelling Up agenda.

Health Foundation data on public perceptions of health and care services

[The Health Foundation published the results of polling conducted by Ipsos Mori which captures public attitudes towards health and care services](#). Key findings include:

- The public are most concerned about workload/pressure on NHS staff and waiting times for services
- The public generally do not think the Government has the right policies in place for the NHS
- Members of the public think the top priorities for the NHS should be addressing workload pressures, increasing staffing, and reducing waiting times

- Those aged 16-34 were significantly more likely to think improving mental health services should be a priority for the NHS
- There is broad public support for the health and social care levy though younger people are more likely to oppose the additional tax

Significant ethnic inequalities persist in mental health services

[The NHS Race and Health Observatory published a rapid review of existing evidence on ethnic inequalities in healthcare](#) – ethnic inequalities in mental health services are a core theme of the report. It found there are clear barriers to accessing mental health support among ethnic minority groups rooted in a distrust of primary care and mental health services, with evidence of ethnic inequalities in relation to IAPT and CBT referrals and/or treatment, and in relation to compulsory inpatient admissions and the use of restraint and seclusion. The report makes several recommendations including the enforcement of statutory guidelines on inclusion of national ethnic monitoring data in all NHS mental health clinical data that allows robust statistical analysis at Trust, regional and national level, and the establishment of relationships between ethnic minority VCSE organisations and NHS provider services in order to provide high-quality services for ethnic minority patients.

Rise in out of area placements for mental health patients

[The HSJ reported some areas are seeing an unprecedented rise in inappropriate out of area placements for mental health patients](#). The rise in out of area placements is reportedly linked to workforce shortages, rising severity of illness and length of stay in the wake of Covid, Omicron outbreaks closing beds, the closure of outdated dormitory wards, and a lack of appropriate private capacity. The article suggests some patients are facing unacceptable delays waiting for a bed or are being sent hundreds of miles away from home to receive care. Peter Molyneux, Chair of Sussex Partnership FT is calling for a national approach to tackling the rise in out of area placements which would involve ICSs rolling out 'closer to home' models as standard, questioning why step-down community accommodation does not form part of standard care models.

Regional Updates

North of Tyne Combined Authority Wellbeing Framework

[The North of Tyne Combined Authority \(NTCA\) Cabinet has adopted a Wellbeing Framework, committing leaders across Newcastle, North Tyneside and Northumberland to deliver against ten wellbeing priorities or 'outcomes'](#), which broadly address the wider determinants of health. Implementation and oversight of the Framework will sit with NTCA's Inclusive Economy Board. While the North of Tyne devolution deal does not include powers over health and care, the adoption of this framework commits the Combined Authority to work to improve population wellbeing, and to deliver against specific targets related to mental health and learning disabilities.

Allen, Kirsty
03/14/2022 11:00:36

**Report to the meeting of the Council of Governors
17th March 2022**

Recommendation for the Re-appointment of the Trust External Auditor

1. Introduction

Mazars LLP was appointed as the Trust External Auditor on completion of a tender for Audit services in 2018. The Council of Governors Audit Working Group led the tender process for the appointment and agreed a specification which defined the role of the Auditors and the capabilities required. The Council of Governors, on 20 December 2018, ratified the decision to award the External Audit contract to Mazars to commence 1 June 2019, for a period of three years with an option to extend for a further 24 months.

The initial contract for External Audit services provided by Mazars will expire on 31st May 2022.

2. External audit services

Since June 2019, Mazars has provided external audit services for CNTW, NTW Solutions Limited and the Trust's Charitable funds. The Trust has a policy in place for non-audit services provided by External Audit, which was approved by the Council of Governors.

At its meeting held 26 January 2022, the Audit Committee considered the performance of the External Audit service and the scope of the work being requested from Mazars in terms of quality of service and value for money.

After careful consideration, the Audit Committee, which is comprised of Trust, NTW Solutions Limited and Charity representatives, agreed that Mazars continued to provide high quality services within the scope of agreed work and that there were no issues of concern.

It was also noted that given the current pressures across the organisation, and consideration of the medium, and longer term, impact of the Covid-19 pandemic, it would be in the best interests of the Trust to support the re-appointment of Mazars for a further 24 months, subject to a further review of performance after 12 months.

3. Recommendation

The Council of Governors are asked to:

- Approve the re-appointment of Mazars as the Trust External Auditors for a further period of 24 months to commence 1st June 2022.
- Subject to approval, note the requirements for a further review of performance after 12 months.

David Arthur
**Non-Executive Director and
Audit Committee Chair**

Tom Bentley
**Public Governor for Gateshead and
Audit Committee Governor
representative**

Allen, Kirsty
03/14/2022 11:00:38

Council of Governor Bi-Elections March 2022

1. Introduction

Following the Governor Election process undertaken in December 2021, three seats within the Council remain vacant therefore a proposal was considered and agreed at the February 2022 Council of Governor Steering Group to undertake a bi-election for the remaining vacant seats.

2. Communications and engagement plan

Posters highlighting the Governor Bi-Election and signposting to the website and Corporate Affairs Team have been created for display and distribution. Information is readily available on the Trust's intranet and localities have been encouraged to promote elections in all patient and staff areas, wards and departments.

Governor bi-elections have been promoted via key meetings including Corporate Decisions Team, Business Delivery Group and Locality Group meetings.

Awareness of Governor bi-elections will also be included in the following for the duration of the process:

- Weekly Trust bulletin
- Intranet (staff only)
- External website (staff and public)
- Service User and Carer Involvement Team
- Trust Networks
 - o BAME Network
 - o Disability Network
 - o LGBT+ Network
 - o Mental Health and Well-being Network
 - o Armed Forces Network
- Social media platforms

An email promoting the bi-elections was also sent to all Foundation Trust Members.

Information about the Elections and how to become a member and Governor of the Trust was shared with key Trust stakeholders including Healthwatch, Recovery Colleges, Local Authorities, other Providers, CCGs, emergency services (fire and police), universities and third sector organisations.

We would also welcome existing Governors to support the plan in promoting awareness of the bi-elections with friends and family.

Allen, Kirsty
03/14/2022 11:00:36



3. Notice of Bi-Elections

Constituency and Class	Vacancies	Term Length
Carer Governor – Adult Services	1	3 years
Carer Governor – Neuro-Disability Services	1	3 years
Public Governor – Sunderland	1	3 years

A nomination form to stand for election to those positions are available from Monday 14th March 2022 which can be obtained from the Returning Officer in the following ways:

Online: www.cesvotes.com/cntw2022

Telephone: 0208 889 9203

Email: fnominationenquiries@cesvotes.com

Text: Text 2FT CNW and your name and address to 88802

4. Governor Bi-Election timeline

The deadline for completed nomination applications will be 5pm, Tuesday 29 March 2022. Should any nominee wish to withdraw their nomination they must put this in writing to the Returning Officer by 5pm, Friday 1st April 2022.

For all contested constituencies voting will open Wednesday 20th April 2022 with voting to close 5pm, Wednesday 11 May 2022.

A future update will be provided to the Council of Governors once the bi-election has ended.

Kirsty Allan
Corporate Governance Manager
March 2022

Alan Kirsty
03/14/2022 11:00:36



Caring | Discovering | Growing | **Together**

**Minutes of the Board of Directors meeting held in Public
Held on 2 February 2022 1.30pm – 3.30pm
Via Microsoft Teams**

Present:

Ken Jarrod, Chairman
David Arthur, Non-Executive Director
Darren Best, Non-Executive Director
Paula Breen, Non-Executive Director
Alexis Cleveland, Non-Executive Director
Louise Nelson, Non-Executive Director
Brendan Hill, Non-Executive Director
Michael Robinson, Non-Executive Director

James Duncan, Chief Executive
Ramona Duguid, Executive Chief Operating Officer
Rajesh Nadkarni, Executive Medical Director
Gary O'Hare, Executive Chief Nurse
Lisa Quinn, Executive Director of Finance / Commissioning & Quality Assurance
Lynne Shaw, Executive Director of Workforce and Organisational Development

In attendance:

Margaret Adams, Lead Governor, Public South Tyneside
Kirsty Allan, Acting Corporate Affairs Manager (Minute Taker)
Faye Atkinson, Operations Manager, Patient and Carer Involvement Service
Evelyn Bitcon, Public Governor for North Cumbria
Alane Bould, Head of Involvement
Allan Brownrigg, Staff Governor, Clinical
Victoria Bullerwell, Staff Governor, Non-Clinical
Danny Cain, Staff Governor, Non-Clinical
Anne Carlile, Carer Governor, Adult Services
Mark Charlesworth, Service User Governor for Learning Disability and Autism Services
Revell Cornell, Staff Governor, Non-Clinical
Andrew Dent, Core Business Manager, Patient and Carer Involvement Service
Kellie Godfrey, Core Business Manager, Patient and Carer Involvement Service
Fiona Grant, Service User Governor, Adult Services
Debbie Henderson, Director of Communications and Corporate Affairs / Company Secretary
David Holden, Good Governance Institute (*observer*)
Kerry Jackson, Involvement Facilitator South, Patient and Carer Involvement Service
Lee Milburn, Service User (*for item 3*)
Thomas Lewis, Staff Medical Governor
Bruce Owen, Director Medical Education (*for item 31*)
Leyton Rahman, Public Governor for Northumberland
Raza Rahman, Staff Governor, Clinical
Chris Reader, Comms and Training Lead, Patient and Carer Involvement Service
Jayne Simpson, Corporate Affairs Officer
Jordan Snowdon, Public Member
Russell Stronach, Service User Governor for Neuro-disabilities
Jane Welch, Policy Advisor

1. Welcome and apologies for absence

Ken Jarrold welcomed everyone to the meeting including new Governors who joined the Council of Governors in January 2022.

Ken also welcomed David Holden, Good Governance Institute, attending as an observer as part of the Trust's independent well led review process.

There were no apologies for absence received.

2. Declarations of interest

There were no new declarations of interest to note.

3. Service User/Carer Story

Ken Jarrold extended a warm welcome and thanks to Lee Milburn who attended the Board to share his story.

4. Minutes of the meeting held 1 December 2021

The minutes of the meeting held on 1 December 2021 were considered.

Approved:

- **The minutes of the meeting held 1 December 2021 were approved as an accurate record.**

5. Action log and matters arising not included on the agenda

No issues to note.

6. Chairman's Remarks

Ken Jarrold noted that Sam Allen had formally taken up her appointment as Chief Executive of the North East and North Cumbria Integrated Care System (NENC ICS). Ken reflected on a helpful and informative initial discussion with Sam and is very hopeful that Sam will bring energy and direction to the NENC ICS.

Ken noted that the Trust continues to face an extremely challenging period including the increased demand on mental health services and workforce capacity, recruitment, and retention issues. Ken referred to the earlier closed Board meeting at which, a detailed discussion took place to look at some of the options and mitigations to address current pressures.

Ken reflected on a severity of the pressures and acknowledged that it was a privilege to address such challenges alongside the Council of Governors, Board of Directors and colleagues.

Resolved:

- **The Board noted the Chairman's verbal update**

7. Chief Executive's Report

James Duncan noted that the priorities for the next financial year were currently under development. National planning guidance has been received however, there remains a

significant level of uncertainty in terms of national requirements for 2022/23 and associated resources and funding.

James noted that the Trust has been approached by Northumberland Clinical Commissioning Group with a formal request for CNTW to take on the contract for Community Learning Disability Services following the dissolution of Section 75 partnership between Northumberland County Council and a neighbouring Foundation Trust. James confirmed that the Trust has agreed to take on the contract for Community Nursing in Northumberland which will lead to a single provider model for the health element for the Learning Disability pathway.

James highlighted national updates regarding health checks for people with severe mental health illness and/or a learning disability with the national guidance focussed on primary care, he emphasised the importance for the Trust to continue reflecting on the gap which exists in mortality with people with significant mental illness, with health checks playing a major role in saving lives.

James highlighted the report produced by Calderdale and Huddersfield NHS Foundation Trust following an analysis of elective care waiting lists and advised that this would be explored further in the context of Trust services and work to reduce inequalities in access to care.

Resolved:

- **The Board received the Chief Executive's update.**

Quality, Clinical and Patient Issues

8. COVID-19 Response update

Gary O'Hare provided a detailed update on the current position including the number of staff and patients who were currently Covid-positive and an update on outbreak management. Gary advised that there had been a reduction in sickness absence rates across the Trust following a period of high levels of sickness as a result of the Omicron variant.

The vaccination programme continues for patients and staff. 95% of the workforce have received both first and second doses of the vaccine, over 97% of the workforce have received their first dose and 67% of the workforce have received the flu vaccination.

Gary noted a significant decrease in the Omicron infection rates both nationally and locally and referred to page 3 of the report which provided detail of the Trust's tactical response at the height of Operational Performance Escalation Level (OPEL) 3 during December 2021 and January 2022.

Gary referred to the Government's announcement in November 2021 confirming the implementation of mandatory Covid-vaccinations for all health and social care staff, including NHS staff. Consequently, all Trust's across the country took the actions required to prepare for the implementation of the new legislation for mandatory vaccinations from April 2022.

On 31st January, the Secretary of State for Health and Social Care announced that the Government would be reconsidering this new legislation. The Government's decision remains subject to Parliamentary process and will require further consultation. On this basis, NHS organisations have been asked to 'pause' the process for those people affected by the

proposals. As a Trust, we are in contact with individual staff who have been affected by the regulations, to offer additional support.

Due to evidence demonstrating an improving position in relation to staffing levels and associated service pressures, a decision was made to move from OPEL 3 to OPEL 2. Despite this, there are no changes to current arrangements for non-essential meetings, training, and activity to ensure the Trust reinstates such activity in a safe way.

Resolved:

- **The Board received the COVID-19 Response update**

9. Commissioning and Quality Assurance update (Month 9)

Lisa Quinn presented the report confirmed that the Trust remained assigned to Segment 1 within the NHS England/Improvement Single Oversight Framework and advised the Trust remained on track to end the financial year with a break-even position.

Lisa reported the Information Governance training standard as below the expected standard however explained that monitoring of non-essential training compliance remained on pause during this phase of the pandemic.

An increase in out of area placements was reported due to inpatient pressures and it was noted that the Board was well-briefed on the position and mitigations and actions to address the current pressures.

Lisa advised that there had been some deterioration in waiting times, particularly within children's eating disorders.

Lisa stated that whilst the Trust has been through unprecedented times, the operational teams have still been able to maintain a significant level of compliance with contractual requirements. There are some areas below plan, however the Trust remained in a good position overall in terms of operational performance.

In relation to the friends and family test, the Trust again remains in a good position with the majority of responses confirming that their care and experience was overall good or very good.

As previously reported, there remains a pause on monitoring performance relating to internal training and appraisals, therefore, the Board should expect a further deterioration in Month 10.

Resolved:

- **The Board received the Month 9 Commissioning and Quality Assurance update**

10. NHS Community Mental Health Survey Benchmark Report 2021

Lisa Quinn referred to the report noting a response rate of 26.5% from services users in Community Mental Health services across England. The Trust reported a response rate of 28%.

Approved by
Lisa Quinn
04/11/22 11:00:36

Lisa noted deterioration from the previous year in some of the scores which was reflective of the impact of the pandemic. Compared to the national average, the Trust scored highly in areas relating to reviewing care, crisis care, organising care, medicines and support and wellbeing. Compared to the national average, the Trust scored lower in areas relating to support and wellbeing, crisis care, reviewing Care, NHS Talking Therapies, and planning care.

Lisa advised that the outcome of the survey would be analysed alongside other intelligence and will be considered as part of the wider service improvement agenda as well as formulating the quality priorities for the Trust.

In response to a query from Michael Robinson regarding the method of identifying the sample, Lisa confirmed the national criteria for selection to take part in the survey.

Paula Breen referred to the areas where the Trust may not have performed as well as the national average and asked if there was any learning the Trust could take from other organisations. Lisa stated that the Trust does reach out to Trust's who do perform well on a consistent basis to look at opportunities for learning and improvement.

In response to a query from Mark Charlesworth regarding the format of the surveys in terms of accessibility for service user and carers, Lisa stated that the survey was national driven, with the questions being subject to review on an annual basis in collaboration with service users and people with lived experience. The Trust has requested easy read versions of the survey be available at a national level alongside support to complete the surveys for those who require it. Lisa offered to meet with Mark separately to discuss the process in further detail.

Resolved:

- **The Board received the NHS Community Mental Health Survey Benchmark Report 2021 update**

11. Service User and Carer Experience Report (Quarter 3)

Lisa Quinn referred to the report and advised that the team were reviewing the reason for the reduction in the level of feedback received during the period. Lisa stated that the majority of responses received were from the South locality and noted that Healthwatch were engaging well in terms of sharing their feedback with several responses received from Gateshead, Middlesbrough and Newcastle.

In terms of positive feedback, Lisa noted the themes as communication, patient care and values and behaviours.

Several projects were ongoing to make feedback more accessible for service users, carers staff and stakeholders including making the process more inclusive, increasing staff awareness of the Points of You dashboard, ensuring strong links with Healthwatch, development of a 'You Said – We Did' process, and leading on a national collaborative to develop good practice around feedback.

Evelyn Bitcon referred to the work of Healthwatch and asked if the same level of engagement took place with Cumbria Healthwatch. Lisa stated that the Trust has an open dialogue with Cumbria Healthwatch similar to Healthwatch organisations in other localities.

Resolved:

- **The Board received the Service User and Carer Experience Report (Quarter 3) update**

12. Safer Staffing Levels Report (Quarter 3)

Gary O'Hare referred to the report providing assurance on the staffing position across all inpatient wards within CNTW in accordance with the National Quality Board Safer Staffing requirements. The report provided a summary position from each locality.

Gary provided an updated on the current recruitment position detailed in the report and referred to the Trust's national and regional recruitment campaign to recruit nursing and medical staff to inpatient services. The campaign has had a very positive impact. Gary advised that a further update will be provided to the April Board meeting in relation to recruitment and retention.

Danny Cain referred to the length of time to complete enhanced DBS checks and asked if the process could be expedited, particularly for the health and social care sector given the current workforce pressures. Lynne Shaw confirmed that work was underway to look to streamline the whole recruitment process and advised that the Trust had implemented a temporary approach to employment checks to allow for a more flexible approach. This is in line with the national approaches which were temporarily implemented at the beginning of the pandemic.

Ramona Duguid referred to a discussion at the Quality and Performance Committee regarding the significant amount of work being undertaken to ensure safe staffing to maintain operational delivery by addressing the challenges relating to vacancies. This includes a focus on the impact of recruitment activities in areas where vacancy rates are consistently high.

13. Involvement Service update

Alane Bould provided the Board with a detailed presentation explaining the role of the involvement service and the work they do which includes peer support, triangle of care, recovery college collaborative, service user and carer involvement bank and involvement initiatives.

James Duncan commented on the remarkable work that is ongoing across the organisation in terms of involvement and suggested that the Board receive a regular update. Margaret Adams also thanked Alane Bould for the phenomenal amount of work undertaken during the pandemic.

Ken Jarrold suggested an involvement service update should be presented to a meeting of the Council of Governors.

Workforce Issues

There were no workforce issues to report.

Strategy and Partnerships

14. Integrated Care System / Integrated Care Board

03/11/2022 11:09:36
Milan.Kj...

James Duncan advised that Sam Allen had now commenced post as the Chief Executive of the NENC ICS and noted that the process of appointing the remainder of Integrated Care Board (ICB) had commenced.

James advised that the draft NENC ICB Constitution had been published with the final Constitution being scheduled for submission on 20th May in readiness for the ICB coming into formal legal existence from 1st July 2022. CNTW were very much involved in all discussions relating to the governance proposals including the development of governance frameworks at 'Place' level.

Resolved:

- **The Board noted the Integrated Care System / Integrated Care Board update**

15. Sunderland Place Based Arrangements

James Duncan referred to the report which outlined the culmination of a formal agreement with Sunderland Place Based Partners which underpins the collective commitment to work together in preparation for the formalisation of place-based arrangements. The report outlined the proposals for an equal partnership with all partners involved in decision making with the aim to move towards a Committee in Common where decisions will be shared. James mentioned this will formalise the current, collaborative partnership arrangements and would ensure continuity and stability across the locality.

Approved:

- **The Board received and approved the formal Sunderland Place Based Arrangements as outlined in the report.**

Regulatory Items

16. CQC Action Plan update

Lisa Quinn advised that the report was discussed in detail at the January meeting of the Quality and Performance Committee. Lisa asked the Board for approval of the proposed extension in relation to some of the 'must do' actions outlined in the report. The Board was also asked to note the re-opening of the 'must-do' action relating to out of area treatments following the significant increase on bed pressures and the impact on out of area placements.

Paula Breen asked if the CQC were comfortable with the proposals relating to the extension of timescales. Lisa confirmed that the report was also shared with the CQC, and a meeting was scheduled to take place on 3 February. The Board were reassured that the CQC were aware of the impact of the pandemic on the Trust's ability to adhere the timescales and the potential for requests to extend deadlines. Lisa also advised that the CQC would look for assurance on the Trust's understanding of the current pressures and position, actions to address the issues and agreement collectively to address the actions.

Approved

- **The Board approved the date extension for Must Do action plans relating to restrictive practice, seclusion and long term segregation, physical health and rapid tranquilisation, documentation of consent to treatment/capacity and management supervision to enable further assurances to be gained that there has been an improvement.**

- **The Board noted the re-opening of the Must Do action plan in relation to out of area placements.**
- **The Board noted the Quarter 3 updates on all 47 CQC Must Do action plans, including impact changes for those closed.**

17. Board Assurance Framework / Corporate Risk Register Report (Quarter 3)

Lisa Quinn confirmed each of the reports had been discussed at Board Sub-Committees in terms of the management of their individual risks and explained a discussion took place regarding the transfer of risks between the Resource and Business Assurance Committee (RABAC) and Quality and Performance Committee and the new People Committee which will take place over the next quarter.

The report highlighted a transfer of Executive Lead for certain risks because of changes in Executive Director portfolios with one exception within the report. The report notes the transfer risk 1853 from Lisa Quinn to James Duncan. However, following a later review of the risk, the risk has been transferred back to James Duncan as sustainability is remaining within the Chief Executive's portfolio. Lisa asked the Board for agreement on the transfers highlighted within the report with exception of sustainability and to recognise the management of risks through sub-committees.

Approved:

- **The Board approved the transfer of risks highlighted within the report, with the exception of the sustainability risk for the reasons outlined in the minutes**

18. NHSE/I Single Oversight Framework Compliance Report (Quarter 3)

Lisa Quinn discussed elements of the report throughout other agenda items within the Board and advised the report is for information.

Resolved:

- **The Board received and noted the NHSE/I Single Oversight Framework Compliance Report (Quarter 3)**

19. Infection Prevention Control (IPC) Board Assurance Framework

Gary O'Hare referred to the report, a statutory submission to NHSE/I and confirmed compliance had continued with both national guidance in terms of infection prevention and control.

Gary referred to page 3 of the report noting a total of 78 cases of Covid-19 with 68 of those being healthcare acquired, nosocomial infections. Gary noted that national reporting systems were focussed on acute reporting systems and did not reflect the nuances of mental health and disability services.

Gary confirmed the IPC standards for preventing the spread of nosocomial Covid-19 have been implemented across localities and are continually updated via self-assessment and triangulation.

Resolved:

- **The Board received and noted the Infection Prevention Control Board Assurance Framework report**

20. People Committee Terms of Reference

Lynne Shaw referred to the draft Terms of Reference and reporting schedule which was discussed at October Board and the first meeting of the People Committee held in January.

Ken Jarrold mentioned given all the workforce issues the Trust is currently facing it was important to have a specific Board Committee focus on workforce and people issues.

Approved:

- **The Board approved the People Committee Terms of Reference**

21. Trust Self-Assessment Report and Quality Improvement Plan

Bruce Owen referred to the report which forms an important part of the governance processes around mental and multi-professional education and training. Bruce stated as part of this cycle the Trust receives an annual visit by Health Education England, North East and North Cumbria Quality Team. The purpose of the visit is the quality assure the training delivered within CNTW according to the educational standards set out by the General Medical Council (GMC) and other professional bodies.

As part of the annual visits, a range of data is triangulated to provide an overall assessment of the Trust's performance, along with external local and national data this will include the trusts own self-assessment of their performance. The report outlined the Trust's assessment and is linked to a Quality Improvement Plan which outlines measures in place and plans to improve performance.

Approved:

- **The Board approved the Trust Self-Assessment Report and Quality Improvement Plan**

Board sub-committee minutes and Governor issues for information

22. Quality and Performance Committee

Alexis Cleveland provided an update following the January meeting which included an update from the North Locality.

23. Audit Committee

David Arthur provided an update following the January meeting which was observed by representatives of the Good Governance Institute and the new Audit Chair from Lancashire and South Cumbria NHS Foundation Trust. The Internal Audit plan was considered and remained on track for completion of the Head of Internal Audit Opinion for the year end. David also noted that the External Audit contract was discussed and Tom Bentley, Public Governor for Gateshead and Governor representative on the Audit Committee, would bring a proposal to the Council of Governors meeting regarding the External Auditor contract.

24. Resource and Business Assurance Committee

Paula Breen provided an update following the January meeting which included updates on planning and financial arrangements, high costs associated with staffing, CEDAR Programme and continuing delays, and the Trust's approach to budget setting for 2022/23.

Paula advised that the Trust remained on track to deliver a break-even position at the year-end.

25. Mental Health Legislation Committee

Michael Robinson provided an update following the January meeting which included updates on risk management, panel membership and Mental Health Act Reviewer visits. Medication prescription had been highlighted as an issue and was being considered as part of the Internal Audit planning for the year ahead in relation to consent to treatment.

26. Provider Collaborative Committee and Terms of Reference

Michael Robinson confirmed the Committee last met in December 2021 where reports were received from the various leads of the three principal Provider Collaboratives. An update on the proposals relating to the Whole Pathway Provider Collaborative for Mental Health, Learning Disabilities and Autism was also provided.

27. CEDAR Programme Board

James Duncan provided an update including the reported underspend for the 2021/22 programme and confirmed that the underspend would not be lost moving forward into 2022/23. James noted that cashflow remained a risk due to the ongoing challenges within the construction industry.

28. Charitable Funds Committee

Louise Nelson advised the January meeting had been stood down in line with OPEL level 3 pressures.

29. People Committee

Darren Best provided an update following the initial meeting of the newly established People Committee which, along with other Committees, included observation by representatives of the Good Governance Institute as part of the independent well led review. The Committee was well received and there was a focus on ongoing work to ensure appropriate reporting, balancing the avoidance of duplication with triangulation of reporting to other Committees.

Darren advised that the Terms of Reference for the Committee provides a level of latitude to ensure the voice of people across the organisation is captured but noted that critical elements of the workforce agenda were identified, and the Committee would ensure an appropriate focus on this.

30. Council of Governors issues

Ken Jarrold provided an overview of the outcome of the recent Governor elections including newly appointed Governors, returning Governors and those Governors who have stood down.

31. Any Other Business

None to note.

Alan K...
03/14/2022 11:00:36

32. Questions from the public

Jordan Snowdon raised several questions with the Board, some of which were of a complex nature. Ken Jarrold stated that it was extremely important to have an opportunity to raise issues and suggested that a separate meeting be arranged to discuss the issues in more detail.

Ken reassured Mr Snowdon that the Board takes any allegations of victimisation, people being penalised for raising issues, or allegations of conspiracy's extremely seriously, hence the proposal to discuss the issues and questions separately.

Date and time of next meeting

Wednesday, 2 March 2022, 1.30pm venue, Microsoft Teams.

Allen, Kirsty
03/14/2022 11:00:36