

UNIVERSITY HOSPITALS OF LEICESTER NHS TRUST

MINUTES OF A MEETING OF THE TRUST BOARD HELD ON THURSDAY 13 JULY 2023 FROM 1.30PM IN THE GDC BOARD ROOM, GEORGE DAVIS CENTRE, UNIVERSITY OF LEICESTER

Voting Members present:

Mr J MacDonald – Trust Chairman
Ms V Bailey – Non-Executive Director and Quality Committee (QC) Non-Executive Director Chair
Mr A Furlong – Medical Director
Mr S Harris – Non-Executive Director and Finance and Investment Committee (FIC) Non-Executive Director Chair (from Minute 211/23/1 onwards)
Dr A Haynes - Non-Executive Director and Reconfiguration and Transformation Committee (RTC) Non-Executive Director Chair
Ms J Hogg – Chief Nurse
Ms L Hooper - Chief Financial Officer
Mr J Melbourne - Chief Operating Officer
Mr R Mitchell – Chief Executive
Mr B Patel – Non-Executive Director and People and Culture Committee (PCC) Non-Executive Director Chair
Professor T Robinson - Non-Executive Director and Charitable Funds Committee (CFC) Non-Executive Director Chair.
Mr M Williams – Non-Executive Director and Audit Committee and Operations and Performance (OPC) Non-Executive Director Chair
Mr J Worrall - Non-Executive Director

In attendance:

Dr R Abeyratne – Director of Health Equality and Inclusion
Mr T Avossa-Goodger – Porter (for Minute 207/23 only)
Ms R Ballinger – Senior Health and Well-Being and Staff Experience Manager (for Minute 207/23 only)
Mr S Barton - Deputy Chief Executive
Ms G Belton – Corporate and Committee Services Officer
Ms D Burnett – Director of Midwifery
Ms B Cassidy – Director of Corporate and Legal Affairs
Ms J McCarthy – Senior Learning and Development Manager (for Minute 207/23 only)
Mr R Rajput – Portering Supervisor (for Minute 207/23 only)
Mr M Simpson - Director of Estates and Facilities
Ms M Smith - Director of Communication and Engagement
Ms C Teeney - Chief People Officer
Mr M Vohra – Deputy Chief Information Officer (deputising for Mr A Carruthers, Chief Information Officer)

ACTION

202/23 APOLOGIES AND WELCOME

The Acting Chairman welcomed everyone to the meeting. Apologies for absence were received from Mr A Carruthers, Chief Information Officer and Ms G Collins-Punter, Associate Non-Executive Director.

203/23 CONFIRMATION OF QUORACY

Resolved – the meeting was confirmed as quorate (i.e. at least one-third of the whole number of Directors were present, including at least one Executive Director and one Non-Executive Director).

204/23 DECLARATIONS OF INTERESTS

Mr J MacDonald, Trust Chair, confirmed that he had taken up the post of Chair of the University Hospitals of Northamptonshire, comprising Kettering and Northampton General Hospitals, as of 1 July 2023, as previously reported to the Trust Board on 11 May 2023 (Minute 140/23 refers) and 8 June 2023 (Minute 208/23/1 refers).

Resolved – that the above declaration be noted.

205/23 MINUTES

Resolved – that the Minutes from the public Trust Board meeting held on 8 June 2023 (paper A refers) be confirmed as a correct record.

206/23 MATTERS ARISING

Paper B provided progress updates for the matters arising from the 8 June 2023 Trust Board meeting and any still-outstanding items from previous meetings, the contents of which were received and noted.

Resolved – that the matters arising report be received and noted as paper B.

207/23 STAFF STORY – TYLER’S STORY

The Chief People Officer introduced and welcomed to the meeting Ms J McCarthy, Senior Learning and Development Manager, Ms R Ballinger, Senior Health and Well-Being and Staff Experience Manager, Mr Tyler Avossa-Goodger, Porter and Mr R Rajput, Portering Supervisor, who were all in attendance to present Tyler’s story to the Trust Board and explain how Tyler had gained employment with the Trust through Project Search. The Chief People Officer noted that the Trust was a large local employer and, as such, wished to support and enable routes into employment for people and this was achieved through a number of schemes (accompanying paper C provided further detailed information regarding Project Search and other employability programmes). Ms Ballinger, Senior Health and Well-Being and Staff Experience Manager, explained that Project Search specifically provided supported placements and work experience to young adults with learning disabilities. It was a nationwide programme aimed at those 17 years old and above. The Trust Board were informed of Tyler’s specific journey into gaining substantive employment at UHL (paper C also refers) and heard from Tyler about his personal experience and from Tyler’s mentor, Raj. The Chief People Officer specifically expressed thanks for the support provided by Ellesmere College, with whom the Trust had worked since August 2022 and staff from the Trust’s Estates and Facilities directorate who had supported the initial eight interns who gained places on the programme, acknowledging the mentor and manager training they had undergone before the intern placements had commenced. The interns had successfully completed their placements and had graduated from the programme (a link to ITV news coverage of this event was contained within paper C), with particular note being made of the very positive outcomes for both the interns involved and also their families.

Tyler explained the elements encompassing his portering role at UHL to the Trust Board and that he found UHL to be a nice place to work where he had made friends and had been able to improve his social skills. Raj explained his experience of mentoring Tyler, specifically noting that Tyler was particularly skilled with computers, which would be of benefit to him in an increasingly digital world.

In concluding discussion on this item, the Chief People Officer expressed thanks to those attending to present Tyler’s story, which had helped bring the experience to life for the Trust Board and she noted that it had been a pleasure and a privilege to start with Tyler at induction, with everyone involved learning a significant amount from their experience. She further noted that Tyler had been identified to be work ready at an early stage in the programme and that he was an inspiration to other pupils at Ellesmere College as hearing about Tyler’s accomplishments made them realise that they also could achieve similar goals. The Director of Estates and Facilities noted that his directorate had been proud to provide placements for Tyler and the other interns involved in the programme, and he noted that Raj, as Tyler’s mentor, had been an unsung hero and he expressed his personal thanks to all those staff acting as mentors.

The Trust Chair thanked everyone involved for attending today’s meeting to present Tyler’s story to the Trust Board.

Resolved – that the contents of paper C, and the additional verbal information provided, be received and noted.

208/23 STANDING ITEMS

208/23/1 Chair’s Report – July 2023

The Trust Chair reported verbally on the following items:-

- (1) Non-Executive Director Updates – Mr Jeffrey Worrall, previously Associate Non-Executive Director, had now been confirmed as a full Non-Executive Director. Ms V Bailey, Non-Executive Director and Mr M Williams, Non-Executive Director, had both agreed to extend their terms of office. An advert was to be placed for an Associate Non-Executive Director.
- (2) Thanks were expressed to those staff members involved in organising the celebrations at UHL for the NHS's 75th Birthday which had been a great success;
- (3) as also referenced under Minute 204/23 above, the Trust Chair confirmed that he had taken up the post of Chair of the University Hospitals of Northamptonshire as of 1 July 2023 and work was underway to identify areas for future collaboration, with details of potential future opportunities to be presented to the Trust Board in due course, and
- (4) at the invitation of the Trust Chair, the Medical Director reported verbally to confirm that there was a further period of Junior Doctor Industrial Action which had commenced at 7am that morning and would last until 7am on 18 July 2023, after which there would be a 48-hour period of industrial action by Consultant staff taking place from 7am on 20 July 2023 to 7am on 22 July 2023. This represented a very difficult time for all NHS organisations and was particularly difficult for UHL given the proximity of the Leicestershire fortnight when many staff took annual leave in order to go on holiday with their families. UHL services would be safe over this time period, however cover in services would be tight due to the combined effect of the industrial action during a popular holiday period. The BMA had agreed that Trusts could provide Christmas Day services during this time period and, in order to accommodate both the industrial action and pre-booked annual leave, some planned care work had needed to be cancelled and re-arranged. The Medical Director expressed his apologies that this was the case and re-iterated that services would be safe but would not comprise a normal level of service.

Resolved – that the above-referenced verbal information be noted.

208/23/2 Chief Executive's Update – July 2023

The Chief Executive presented paper D which detailed information in respect of the following items:-

1. LLR Urgent and Emergency Care Partnership
2. Northampton and Kettering Acute Partnership
3. East Midlands Acute Partnership
4. New Hospital Programme
5. Continuous Improvement
6. UHL Health and Care Strategy
7. NHS at 75

In presenting his report, the Chief Executive specifically highlighted the following:-

- (a) the pleasure for the Trust Board in meeting at the University Hospitals of Leicester, which was a strong partner to UHL;
- (b) the Trust was now halfway through the calendar year and staff should feel proud of the progress made, albeit recognising that such progress was not easy. The Trust's short-term interventions aligned with its longer-term plans and significant partnership changes were ahead in terms of work with Health and Social Care Partners and the work to be undertaken in conjunction with others as a result of the New Hospitals Programme (NHP) confirmation of funding available for UHL which would benefit the world class research and education agenda. In reference to partnership working, note was made of the support being offered by UHL to Uppingham Health Centre following a recent flooding. There would continue to be a strengthening of the Trust's long-standing relationship with Northampton, Kettering and other acute Trusts;
- (c) recognition of the relationship between staff being in a good place at work and the provision of safe patient care, and
- (d) recognition of the disruption caused due to the fourth round of industrial action nationally and gratitude was expressed for all of the planning work undertaken by staff to maintain safe patient care.

Resolved – that the contents of paper D and the additional verbal information provided be received and noted.

209/23/3 UHL Performance Update and Integrated Performance Report (M2)

The Chief Operating Officer introduced paper E, which detailed the Integrated Performance Report (IPR) for May 2023.

In presenting paper E, the Chief Operating Officer particularly highlighted the challenges of recent weeks with high attendances and the ambulance escalation area closed for estates works for a period of two weeks. In May 2023, 5% of ambulances had been held at UHL for over one hour, which represented significant and sustained progress from previous performance. Whilst progress was being made in respect of 4 hour and 12 hour waits, there was a need for further improvement. In terms of planned care, improvements in respect of the waiting list were being observed, with sustained progress in terms of the overall waiting list and addressing the longest waiters, however there was more to be achieved in terms of increasing the pace. Cancer services were particularly challenged due to the industrial action undertaken and also the time lost due to the May Bank Holidays. The Chief Operating Officer expressed his apologies to those patients whose scheduled treatment had been cancelled as a result of industrial action and noted that their appointments would be re-booked at the earliest possible opportunity. The Urgent and Emergency Care (UEC) plan had been presented to the organisation for 2023/24 and, going forward, would continue to be presented at the front end of the financial year.

Each of the Executive Director Leads were invited to provide an overview of the key aspects of paper E relating to their portfolios and the Non-Executive Director Chairs of Board Committees were invited to comment, as follows:-

- Quality – the Chief Nurse reported verbally to highlight the following exceptions for May 2023: hospital acquired pressure ulcers had increased in May 2023 and this increase was driven by specialist medicine. Performance against this indicator was fragile, with moisture associated damage becoming a possibility in times of hot weather, however the figures for June were showing an improvement following the employment of external support. The Trust had struggled to recruit to a key post of Senior Nurse Tissue Viability. The Quality Committee would maintain oversight of the plan relating to hospital acquired pressure ulcers, as confirmed by Ms Bailey, QC NED Chair, who noted that the Quality Committee were well versed on the relevant issues and were assured by the actions being undertaken by the Chief Nurse and her team in this respect. E-coli figures had increased in month. The surgical site surveillance programme continued and the Infection Prevention Committee would be reporting into the Quality Committee in the next month, with the team proposing a case control study. There was significant room for improvement in complaints management, as a result of which a number of actions were being implemented including the launching of an early resolution service, establishment of two separate teams to facilitate a clear focus on safety and a clear focus on complaints and the planned appointment to the Head of Patient Experience post this month. The Medical Director reported verbally to advise of further work being undertaken in relation to VTE performance and also relating to perinatal mortality in relation to the MBRRACE work. With regard to the latter, the Trust had worked with both the regional and national teams, specifically to look at the wider determinants of health and UHL had a complex mix. The Trust particularly wanted to make sure that it was reviewing any possible variables it could positively influence and the regional team had expressed satisfaction with the planned approach, with a report on this item due to be submitted to a future meeting of the Quality Committee.
- People – the Chief People Officer made reference to the particular focus on recruitment and entry level jobs, which was starting to make a difference in terms of the Trust's vacancy position. There were continuing challenges in terms of professional registered posts, particularly in relation to the domestic pipeline as there already existed a good international pipeline. There was an improving position in terms of sickness absence, which was largely expected to be due to seasonal variation, and good plans were in place ahead of the winter months, which would be submitted to the People and Culture Committee. A new staff member was due to join the Trust in order to lead the portfolio to support the mental health and well-being of staff and the Trust would be participating in a number of national pilot schemes. The Trust was currently off target in terms of appraisals and statutory and mandatory training, albeit plans were in place to continue to make

improvements, with note made that the figures had been adversely affected by the industrial action and performance against these indicators would continue to be monitored. The Chief Executive noted that the Staff Survey was due to launch in just over two months' time and he queried the likely outcome of this. The Chief People Officer noted that she expected a mixed response from the impending Staff Survey, with likely reference to the improvements made in some areas and recognition of the improvement work still to be undertaken in other areas. She hoped that the overall response rate would continue to improve and would be representative, further noting that it would present UHL with new challenges and the opportunity to think differently. The Chief People Officer considered that the work undertaken by the Trust to recognise staff would be well received and noted that there were other areas in which an increased focus and more work was required, in particular with regard to equality, diversity and inclusion. The Chief Executive highlighted the collective responsibility to continue to make progress in these areas, acknowledging that the Trust could not achieve the scale of change required until staff experience improved. Dr Haynes, Non-Executive Director, made reference to an article he had recently read relating to 'quiet quitting' in the private sector which was quite stark and he made reference to a programme being implemented by Tesco to provide support for staff experiencing difficulties in areas of their life outside of work. In response, the Chief People Officer noted her earlier reference to the new appointment made to a post in Occupational Health, whose responsibility it would be to lead the portfolio relating to the mental health and well-being of staff, with recognition that there was not a separation between a staff member's home and work life and there was a need to support the whole person. This post would have a wide remit including elements such as debt counselling etc. Whilst the Trust did not currently have any active programmes in place, it did have plans in this respect and UHL was one of the first Trusts to make such an appointment. In response to the suggestion made by the Trust Chair to visit organisations outside of the NHS to determine how they were progressing such work, the Chief People Officer noted that such visits represented part of the planned work.

- Finance – the Chief Financial Officer reported verbally noting that the Trust was reporting a year-to-date deficit at Month 2 of £15.3m, which was £5.2m adverse to plan. The main reasons for this related to industrial action in April 2023 and also to inflation. Year to date CIP delivery, including productivity, was £3.3m against a £2.9m CIP target. There was a particular focus on Urgent and Emergency Care (UEC) and delivering in VFM (Value for Money) schemes. The Trust had incurred YTD capital expenditure of £5.1m in month 2, which was £1.7m lower than the month 2 year to date plan of £6.8m, as a result of the Elective Care Expenditure profile and IFRS 16. The cash position at the end of May was £71.5m, representing a reduction of £14.5m in the month, which was £8.3m lower than the forecast, mainly due to the timings of Patient Care Income payment not received (£2.4m) now received in June 2023 and a £2m VAT refund that was forecast to be received in May. There was considered to be good grip and oversight in relation to the Trust's financial position, which was not at odds with anything else which the Trust was trying to deliver. Support was being implemented in the right places and the position at the end of quarter 1 (month 3) would reveal the full forecast of the scale and challenge left for the Trust to resolve. Particular discussion took place regarding potential means by which savings could be made in respect of UEC, noting that there were elements of this which were in the control of UHL and elements which were not. There were also wider challenges such as increased demand requiring a case for increased capacity. Converting temporary staff into substantive staff would save money as would an increased use of community beds, noting that acute care was more expensive than community care. Such elements would require a sustained change in behaviour. The Chief Executive noted that whilst the Trust was making progress, the risks were currently playing out in the Trust's financial position and there was a need to re-balance the risk. He further noted that UHL represented a part of LLR and could potentially take decisions that would be to the detriment of other organisations comprising the LLR healthcare system, however would not be doing so. There was a need for as much capacity as possible to manage the demand. In discussing this element of the IPR report, note was made that the finance indicator should have been RAG-rated as 'red' rather than 'green' which was an error within the report. In response to a question raised by the Trust Chair as to the robustness of plans for the rest of the year, noting that UHL was not the only part of the wider LLR system with a financial deficit, the Chief Financial Officer noted that plans in this respect would be submitted to the Finance and Investment Committee at its next meeting.

In discussion on the contents of paper E:-

- (i) in response to a query raised by the Trust Chair as to whether the Trust was on the right trajectory in relation to its access targets, the Chief Operating Officer confirmed the Trust's support for the right of colleagues to strike, however noted that the waiting list was moving in the right direction. As OPC Non-Executive Director Chair, Mr Williams, highlighted the need not to underestimate the amount of time, effort, skill and commitment by staff in managing the access targets and waiting lists, particularly against a background of industrial action and it was agreed that the Trust Chair and OPC Chair would discuss outwith the meeting how best to recognise the significant undertaking of staff in this respect;
- (ii) in response to a query raised by the Chief Executive as to whether the current plan was sufficient for this Winter, the Chief Operating Officer noted that more actions were required and a weekly meeting was being held for this purpose. The Chief Operating Officer further noted the move away from a particular focus on 'winter' given the significant pressures under which the Trust was operating all year round, having experienced the highest ever attendances in June 2023, and
- (iii) in response to a question raised by Ms Bailey, Non-Executive Director, as to how the Trust was undertaking transformation for new patients joining the waiting list, as well as for those who had been waiting the longest, the Chief Operating Officer noted that the Trust's waiting list had decreased for the first time in four years. A significant amount of work was being undertaken in relation to productivity with the need to continue improving continuous improvement methodology recognised. The Medical Director highlighted that the Trust was seeing real improvements through the use of GIRFT (Getting It Right First Time) and whilst there was more work to undertake, all services were observing improvements. The Deputy Chief Executive noted that the way in which the Trust worked with primary care colleagues was also improving and would facilitate determination of whether particular patients needed to join specific waiting lists. Ms Bailey, Non-Executive Director, commented on the importance of publicising the good work being undertaken in respect of the Trust's waiting lists for those patients joining the list.

Resolved – that (A) the contents of paper E be received and noted, and the additional verbal information provided be noted, and

(B) the Trust Chair and OPC NED Chair be requested to discuss outwith the meeting how best to recognise the significant undertaking of staff in managing the access targets and waiting lists, particularly against the background of industrial action.

**TC /
OPC
NED C**

210/23 DELIVER TIMELY, HIGH QUALITY, SAFE, SUSTAINABLE CARE

210/23/1 2023-24 Annual Operating Plan

The Deputy Chief Executive presented paper F, which had been produced to provide the public Trust Board with the final Operational Plan for 2023/24 (UHL element of the 2023/24 Integrated Care System Operational Plan) submitted via the ICB to NHSE in May 2023.

UHL's Operational Plan currently had a deficit of £10m however was aiming for breakeven, along with an aim to be compliant with evidence-based staffing, national performance standards, along with significantly closing the bed capacity gap. The Trust Board was requested to (1) approve the plan for 2023/24 and (2) recognise the known risks that this plan currently identified and that the Trust Board would receive assurance from the relevant committees on these risks on a quarterly basis.

In response to a comment made regarding the Trust's approach to the different risks relating to finance, access etc and the need to be clear about where accountability lay and how it was delivered together, the Chief Financial Officer noted that the plan was phased so that the position was worse before it improved and there was a need to monitor this closely. In response to a query raised by the Chief Executive as to whether the year end deficit was the result of the Trust approaching work from an annual perspective, the Chief Financial Officer noted that it was and that the Trust was developing a medium-term financial plan with its partners. The measure of success would be the measure of the underlying position which would start to be reported on a quarterly basis from Month 3 (June 2023).

Resolved – that the 2023-24 Annual Operating Plan be approved, and the known risks that this plan currently identified be noted, with assurance on these risks being received by the Trust Board from the relevant committees on a quarterly basis.

210/23/2 Maternity and Assurance Compliance Update

The Chief Nurse presented paper G, which briefed the Trust Board in respect of the key discussions at the UHL Maternity Assurance Committee (MAC). Page 1 of the report provided a summary of the areas of focus at the second MAC meeting, with particular reference made to the draft maternity and neonatal workforce plan. Trust Board members were requested to receive and note the update presented, noting that there were no specific items for escalation.

Resolved – that the contents of paper G be received and noted.

210/23/3 Perinatal Surveillance Scorecard

The Chief Nurse introduced paper H, which was produced in line with the Perinatal Quality Surveillance Model designed by NHSE to support sharing safety intelligence from floor to board and included five areas of focus: safety, workforce, training, experience and outcomes. The scorecard included the minimum dataset as described within the Maternity Incentive Scheme (MIS) as outlined within slide 13 in addition to local insights.

The Director of Midwifery presented this report to the Trust Board and particular issues discussed in relation to this report were as follows:-

- (i) the vacancy rate for midwives remained static and work was underway to build capacity around the quality improvement team;
- (ii) in response to a query raised by the Trust Chair as to whether there existed a baseline for health inequalities, the Director of Midwifery advised that a baseline existed in relation to perinatal mortality and morbidity and clear plans were in place in this respect with the intention to undertake work in relation to the MBRRACE data. The Medical Director made reference to the national mortality rate for black women being 4% higher and 2.5% higher for Asian women; figures which were mirrored in Leicester and the Trust was involved in national work in this respect. The Director of Health Equality and Inclusion referenced that whilst this baseline existed, it was a national baseline and work was being undertaken to understand this in the context of UHL's population. Ms Bailey, Non-Executive Director, noted that it would be beneficial to have the public health data within the scorecard. The Chief Nurse undertook to give consideration as to the elements to be included within future iterations of the perinatal surveillance scorecard to the public Trust Board in terms of wider data that would provide additional context, and
- (iii) Mr Worrall, Non-Executive Director, commented that the Empowering Voices work was very impressive and he was particularly interested in the work being undertaken with families and mothers, especially those who had experienced a tragic event whilst in the care of UHL. In response, the Director of Midwifery advised of the listening events being undertaken in relation to maternity and neonatal voices. The service was recruiting to a Liaison Officer post to expedite these insights and was also working on a communications strategy to receive real time feedback from families. The provisions offered by bereavement services were also being enhanced.

CN

In concluding discussion on this item, the Trust Chair thanked the Chief Nurse and Director of Midwifery and their teams for the continuing work being undertaken in relation to the scorecard.

Resolved – that (A) the contents of paper H be received and noted, and

(B) the Chief Nurse be requested to give consideration to the elements to be included within future iterations of the perinatal surveillance scorecard to the public Trust Board in terms of wider data that would provide additional context.

CN

210/23/4 Update on Health Equality and Inclusion

The Director of Health Equality and Inclusion presented paper I, which provided an update on progress to address health inequalities. Key points highlighted were as follows:-

- (1) continued progress aligned to NHSE Core20Plus5 framework;
- (2) continued progress aligned to LTP prevention aims;
- (3) improved community and partnership working;
- (4) specific focus on adverse maternal outcomes for Black and Asian communities, and
- (5) recruitment of HEE fellows.

The Trust Board was requested to receive the report for information, be assured that progress on health inequalities remained positive and a strategic priority and to note the resourcing of the workstreams as a risk to sustainability, pace of change and reporting of results.

In presenting this report to the Trust Board, the Director of Health Equality and Inclusion made reference to the 30 workstreams referenced within the report, some of which had been completed and some of which were in progress and she highlighted three particular projects and their positive outcomes in more detail for the information of Board members which related to:-

- (1) hospital non-attendance from the most deprived populations – there had been a very positive outcome from this project with a dramatic reduction in DNAs and the staff members involved in the project having achieved a real sense of satisfaction from being able to contribute to positive change. The area of focus now was how to learn from this work and sustain this position;
- (2) the Centre Project with the socially isolated and vulnerable – this project had involved focus groups and whilst the number of people able to be reached in this way was low, it had received very positive feedback and the Trust had been asked to undertake more such work. The Trust was encouraging other partners to work with it in this way and the Director of Health Equality and Inclusion expressed thanks to the Centre Project for working with UHL, and
- (3) Working with Patients prior to Surgery – there was currently a disparity in terms of which patients came into the service and a wider issue in terms of supporting patients to recognise their own health needs. Issues relating to low institutional trust had been identified, with relationships now improving and further work and a more pro-active presence planned, including future working with the organisation ‘Black Women Rising’.

The Trust was now six months into the ‘pursuing equity’ approach and UHL was the only NHS Trust involved in this programme of work. Pockets of excellent work were being identified, particularly regarding maternal disparities and there was a need to ensure that this work was not being duplicated. Overall, there was a significant amount of positive work on-going, with the Trust in a better place than previously.

In discussion on this item:-

- (i) the Chief Financial Officer advised of discussions held between herself and the Director of Health Equality and Inclusion as to how to use the data differently to help make decisions and how to use patient level costing data;
- (ii) the Chief Executive highlighted that, in reflecting upon the opportunity to engage and listen to colleagues from the community as part of the NHS 75 Event, he considered that the level of trust was stronger than previously and he further noted that health and equality and finance represented the two biggest risks to the ICB. The Director of Health Equality and Inclusion noted that health inequality was the consequence of multiple factors, one of which related to resource, and
- (iii) particular discussion took place regarding the discretionary effort which staff gave in their jobs and also their experiences as patients of UHL and the Chief People Officer noted that the new Associate Director of Health and Well-Being would be working on how the experience of staff translated into patient experience. In reference to advertising for a new Associate Non-Executive Director (Minute 208/23/1 above refers), the Trust Chair noted the intention to potentially look for someone from a public health background. In response to a query from the Trust Chair as to the potential benefit in linking with the University of Leicester in progressing relevant aspects of research, Professor Robinson, UHL Non-Executive Director and Pro Vice-Chancellor, Head of College and Dean of Medicine at University of Leicester, noted that his team and that of the Director of Health Equality and Inclusion were already in contact on this matter.

Resolved – that the contents of paper I, and the additional verbal information provided, be received and noted.

210/23/5 Escalation report from the Operations and Performance Committee – 28 June 2023

Mr M Williams, Operations and Performance Committee Non-Executive Director Chair, presented paper J, which detailed the escalation report from the Operations and Performance Committee (OPC) meeting held on 28 June 2023.

Resolved – that the contents of paper J be received and noted.

210/23/5 Escalation report from the Quality Committee – 29 June 2023

Ms V Bailey, Quality Committee Non-Executive Director Chair, presented paper K, which detailed the escalation report from the Quality Committee meeting held on 29 June 2023. In presenting this report, the Quality Committee NED Chair particularly highlighted the following for the information of the Trust Board:-

- (i) the minor amendments made to the Quality Committee Terms of Reference (as documented in section 3.8 of paper K) and
- (ii) the fact that UHL was now a Level 1 Organ Donation Trust (section 3.2 of the report referred).

Resolved – that the contents of paper K be received and noted.

211/23 SUSTAINABLE WELL-GOVERNED FINANCES

211/23/1 Escalation Report from the Audit Committee – 23 June 2023

Mr M Williams, Audit Committee Non-Executive Director Chair, presented paper L, which detailed the escalation report from the Audit Committee meeting held on 23 June 2023. In presenting this report, the Audit Committee NED Chair specifically highlighted the following for the information of the Trust Board:-

- (i) the self-certification against the NHS Provider Licence conditions G6 and FT4 2022/23 had been endorsed by the Audit Committee for approval by the Trust Board and represented a separate stand-alone item on the Trust Board agenda (separate Minute 213/23/2 below refers)
- (ii) the Head of Internal Audit Opinion was 'limited assurance' (section 5.13 of the report provided further details), and
- (iii) work was underway in relation to preparing for an extraordinary meeting of the Audit Committee and thereafter an extraordinary meeting of the Trust Board at the end of August 2023 to approve the 2022/23 annual accounts; presentation of the 2022/23 accounts would bring the Trust back on course in terms of the timetabling of its accounts and would represent a major achievement.

Particular discussion took place with regard to the completion of any outstanding actions required as a result of internal audits, with note made that the actions in question related to those arising from audits undertaken by the Trust's previous internal auditors. In view of the fact that the system for recording evidence to close down outstanding actions was not particularly intuitive, the Director of Corporate and Legal Affairs noted that it had been agreed to bring this system back in house so that it represented an easier process for colleagues to upload evidence and close down outstanding audit actions. In terms of the historic PWC actions, it was intended to submit a plan to the Audit Committee to recommend closing down all relevant actions by 31 March 2024.

Resolved – that the contents of paper L, and the additional verbal information provided, be received and noted.

211/23/2 Escalation report from the Finance and Investment Committee – 30 June 2023

Mr S Harris, FIC Non-Executive Director Chair, presented paper M, which detailed the escalation report from the Finance and Investment Committee meeting held on 30 June 2023. In presenting this report, Mr Harris particularly highlighted the following recommendations from FIC to the Trust Board for formal approval:-

- (1) the increase to 20 in the risk score for BAF risk 7b (financial challenge over 2023/24 financial plan and achieve long term financial sustainability), and
- (2) updated terms of reference for FIC which reflected the transfer of core oversight of digital transformation and IT strategy issues to the Reconfiguration and Transformation Committee as requested by the Trust Board.

Resolved – that the contents of paper M be received and noted and the two specific recommendations referenced under points (1) and (2) above be approved.

212/23 INFRASTRUCTURE FIT FOR THE FUTURE

212/23/1 Escalation Report from the Reconfiguration and Transformation Committee – 22 June 2023

Dr A Haynes, RTC Non-Executive Director Chair, presented paper N, which detailed the escalation report from the Reconfiguration and Transformation Committee meeting held on 22 June 2023. In presenting this report, Dr Haynes noted that it had been good to see issues of transformation beginning to be discussed within this forum. He noted the need for improvement in communicating the work on-going both internally and externally and it was agreed, at Dr Haynes' suggestion, to dedicate time at a future Trust Board Development Session to further consider the Trust's plans in terms of reconfiguration and transformation.

In discussion, and in view of Mr MacDonald's Joint Chair role of both UHL and UHN, which also formed part of the New Hospitals Programme, it was suggested that the undertaking of a mutual learning exercise could be beneficial.

Resolved – that (A) the contents of paper N be received and noted, and

(B) time be dedicated at a future Trust Board Development Session to further consider the Trust's plans in terms of reconfiguration and transformation.

**DCLA/
DCEO**

213/23 CORPORATE GOVERNANCE / REGULATORY COMPLIANCE

213/23/1 BAF and Risk Management Report

The Director of Corporate and Legal Affairs presented paper O, which sought to provide the Trust Board with assurance around the overarching system of risk management and internal control including: a copy of the Board Assurance Framework (BAF) and a summary of the operational risk register including significant risks and invited the Trust Board to be assured by the key next steps in the development of the BAF and risk register as set out in the report. The BAF and significant risk register had been reviewed at the Audit Committee meeting in June 2023 and would be reported quarterly to the Trust Board. The Director of Corporate and Legal Affairs confirmed that the Head of Internal Audit Opinion was that there was currently moderate assurance around the BAF, which was considered to be a fair assessment in light of the work undertaken to transform the BAF and its related processes. The new BAF needed to be in place for a full twelve months before its assurance rating could improve.

There was an established process to add new risks, remove risks and change scores on the BAF, which involved the relevant Board Committee receiving assurance and escalation to the Trust Board to agree any change. Significant changes and movement on the BAF over the last quarter included:-

- (1) BAF Risk 3 (material misstatements in the Trust's restated 2019/20 balance sheet, with implications for audit opinion on 2020/21 and future accounts) – the extraordinary Audit Committee meeting in April 2023 approved the accounts. FIC in April 2023 agreed to close BAF risk 3 as this risk had been treated. This course of action was escalated in the FIC escalation report and was subsequently approved by the Trust Board in May 2023;
- (2) BAF risk 7a (failure to deliver the 2022/23 financial plan reforecast) – FIC in April 2023 agreed BAF Risk 7a had met its target rating, could be removed from the BAF and the residual risk would be recorded in the operational risk register. This was escalated in the FIC escalation report and approved by the Trust Board in May 2023, and
- (3) BAF risk 7b (failure to deliver the 2023/24 financial plan and achieve long term financial sustainability) – FIC in June 2023 agreed a change in the current likelihood score to increase the risk score to 20 based on the challenges with managing the financial

performance for the year to date, as escalated to the Trust Board in the FIC escalation report (paper M refers) and approved by the Trust Board (Minute 211/23/2 above refers).

In terms of the Trust's significant risk register, there were 340 risks open with no risks graded as '25' (extreme). Particular themes of the risk register related to workforce gaps, patient flow, finance etc. It was important that the Trust Board could demonstrate its ownership of the risks and the progress made in addressing the risks.

Particular discussion took place regarding the following points:-

- (i) in response to a question raised by the Chief Executive as to whether it was a risk that the corporate risks within UHL and those of the ICB did not quite align, the Director of Corporate and Legal Affairs noted that she would like to see consistency between the two, albeit highlighted that the ICB BAF was in a developmental stage currently. She would be meeting with her equivalent at the ICB to discuss strategic and operational risks and recognised the need to develop maturity in the approach to risk;
- (ii) in response to a question raised by the Chief Executive as to the relationship between the two financial risks (grip and control), the Chief Financial Officer advised that a request was to be made to the FIC meeting in July 2023 for a change to the BAF in this respect given that the underlying issues had now been addressed and having two separate risks was no longer relevant, and
- (iii) in response to a question raised by the Trust Chair as to how much variability there was month to month in terms of financial reporting, the Chief Financial Officer noted that there were no surprises month to month with any elements arising already known about in advance.

Resolved – that the contents of paper O, and the additional verbal information provided, be received and noted.

213/23/2 NHS Provider Licence Self-Certification

The Director of Corporate and Legal Affairs presented paper P, which confirmed to the Trust Board that the Trust met the requirements of the self-certification declarations for G6 and Ft4. The Trust Board was requested to approve the self-certification as supported by the Audit Committee and recommended for Trust Board approval.

The annual self-declaration provided assurance that NHS providers were compliant with the conditions of their NHS Provider licence. Compliance with the licence was routinely monitored through the Single Oversight Framework, however, on an annual basis, the licence required providers to self-certify that they had (a) effective systems to ensure compliance with the conditions of the NHS provider licence, NHS legislation and the duty to have regard to the NHS Constitution (G6) and (b) complied with the governance arrangement (condition FT4).

Resolved – that the contents of paper P be received and noted and the self-certification be formally approved.

214/23 **CORPORATE TRUSTEE BUSINESS**

214/23/1 Escalation Report from the Charitable Funds Committee – 16 June 2023

Professor Robinson, CFC NED Chair, presented paper Q, which detailed the escalation report from the Charitable Funds Committee meeting held on 16 June 2023.

Resolved – that the contents of paper Q be received and noted.

215/23 **ANY OTHER BUSINESS**

Resolved – that there were no further items of business.

216/23 **QUESTIONS FROM THE PRESS AND PUBLIC**

The following questions were raised and responded to during the meeting:

1. How much funding has been confirmed by HM Government for the Building Better Hospitals for the Future scheme ?

The Deputy Chief Executive responded verbally to confirm that the figure was £20 billion nationally. At the current time, the Trust was not permitted to disclose the figure locally as this represented a commercial number which could impact upon the procurement process.

2. Re: Building Better Hospitals for the Future, are you able to confirm that all of the proposals recommended in the Decision Making Business Case and approved by the CCGs' governing bodies meeting in June 2021 will be honoured ?

The Deputy Chief Executive responded verbally that it was the Trust's intention and plan to deliver the preferred way forward as consulted upon. Some elements of the scheme may change (for example, capital development on the LGH site, but this was viewed as an enhancement).

3. When will the public be given information and engage in discussion about specific proposed hospital developments ?

The Deputy Chief Executive responded verbally to advise that working groups would be established over the coming months and a meeting had been undertaken with Healthwatch last month in relation to this. The Trust had a plan in this respect which would be shared with the public. He further noted that there would be some elements of constraint due to the use of standardised builds. He also noted that he was happy to meet with the member of the public who had submitted the questions at today's Trust Board meeting to further discuss these matters if helpful.

217/23 REPORTS AND MINUTES PUBLISHED AND UHL'S EXTERNAL WEBSITE (NOT INCLUDED IN THE BOARD PACKS):

Resolved – that it be noted that the following reports and Minutes of meetings had been published on UHL's external website alongside the Trust Board papers:-

- Quality Committee Minutes of 25 May 2023
- Operations and Performance Committee Minutes of 24 May 2023
- Finance and Investment Committee Minutes of 26 May 2023
- Audit Committee Minutes of 17 April 2023 and 27 April 2023
- Charitable Funds Committee Minutes of 14 April 2023
- Reconfiguration and Transformation Committee Minutes of 19 April 2023

218/23 REPORTS DEFERRED TO A FUTURE MEETING

Resolved – that the following item be deferred to a future Trust Board agenda:-

- Research and Innovation Quarterly Report and Presentation – now scheduled for the 10 August 2023 public Trust Board meeting.

219/23 DATE AND TIME OF NEXT MEETING

Resolved – that the next public Trust Board meeting be held on Thursday 10 August 2023 from 1.30pm in Seminar Rooms 2/3, Clinical Education Centre, Glenfield Hospital.

The meeting closed at 3.31pm.

Gill Belton - Corporate and Committee Services Officer

Cumulative Record of Attendance (2023/24 to date):

Name	Possible	Actual	% attendance	Name	Possible	Actual	% attendance
J MacDonald	4	3	75	J Melbourne	4	3	75
V Bailey	4	4	100	R Mitchell	4	4	100
A Furlong	4	2	50	B Patel	4	4	100
S Harris	4	3	75	T Robinson	4	2	50
A Haynes	4	3	75	G Sharma (until 30.4.23)	1	0	0
J Hogg	4	4	100	M Williams	4	4	100
L Hooper	4	4	100				

Non-Voting Members:

Name	Possible	Actual	% attendance	Name	Possible	Actual	% attendance
R Abeyratne	4	4	100	H Kotecha	4	2	50
S Barton	4	3	75	M Simpson	4	4	100
A Carruthers	4	2	50	M Smith	4	4	100
B Cassidy	4	4	100	C Teeney	4	3	75
G Collins-Punter	4	0	0	J Worrall	4	3	75