

**DRAFT Minutes of the Trust Board of Directors meeting held in public on Thursday, 3 December 2020 at 13:30 via Zoom**

<b>Present:</b>	<b>Name</b>	<b>Title</b>
	Mark Lam	Trust Chair
	Aamir Ahmad	Non-Executive Director
	Ken Batty	Non-Executive Director
	Paul Calaminus	Interim Chief Executive
	Tanya Carter	Executive Director of People and Culture
	Steven Course	Chief Finance Officer
	Richard Carr	Non-Executive Director
	Anit Chandarana	Non-Executive Director
	Professor Sir Sam Everington	Non-Executive Director
	Richard Fradgley	Executive Director of Integrated Care
	Dr Paul Gilluley	Chief Medical Officer
	Philippa Graves	Chief Digital Officer
	Jenny Kay	Non-Executive Director
	Dr Amar Shah	Chief Quality Officer
	Lorraine Sunduza	Chief Nurse
	Eileen Taylor	Vice-Chair London
	Dr Mohit Venkataram	Executive Director of Commercial Development

**In attendance:**

Professor Dame Donna Kinnair	Non-Executive Director designate (wef 1 January 2021)
Deborah Wheeler	Non-Executive Director designate (wef 1 January 2021)
Patrick Adamolekun	Staff Governor
Dawn Allen	Public Governor
Jemma Ball	Associate Director of People and Culture
Shirley Biro	Public Governor
Dr Juliette Brown	Consultant Psychiatrist
Adrian Curwen	Service User
Caroline Diehl	Public Governor
Dupe Fagbenro	Public Governor
Tee Fabikun	Public Governor
Adam Forman	Public Governor
Mav Ghalley	
Carole Green	People Participation Lead BCHS
Anita Hynes	Freedom to Speak Up Guardian
Tony Isles	Public Governor
Cathy Lilley	Director of Corporate Governance
Nicki McCoy	Corporate Secretariat Manager
Jim Minnis	
Beverley Morris	Public Governor
Edwin Ndlovu	Director of Operations
Caroline Ogunsola	Lead Governor
Mary Prior	Chair Leighton Road Surgery Patient Participation Group
Gill Skrzypczak	Corporate Services Minute Taker
Suzana Stefanic	Public Governor

Emily Van de Pol  
Ernell Watson  
Aiden White  
Keith Williams  
Paula Williams

Islington Interim Borough Director (Nye Bevan course)  
Public Governor  
Public Governor  
Public Governor  
Public Governor

**Apologies:** None received.

*The minutes are produced in the order of the agenda*

## **1 Welcome and Apologies for Absence**

- 1.1 Mark Lam welcomed all to the meeting. A particular welcome was extended to:
- Richard Carr, a new Non-Executive Director. He was formerly Chief Executive of Central Bedfordshire Council and most recently Senior Responsible Officer for Bedfordshire, Luton and Milton Keynes (BLMK) Integrated Care System (ICS)
  - Professor Dame Donna Kinnair, a new Non-Executive Director. Donna joins the Board in January 2021 and is currently Secretary General of the Royal College of Nursing
  - Emily Van De Pol (shadowing) as part of the Nye Bevan Programme.
- 1.2 Apologies were noted as above.

## **2 Declarations of Interests**

- 2.1 There were no interests relevant to the meeting other than those in the published register.

## **3 Patient Story**

- 3.1 Mary Prior, Chair of Leighton Road Surgery Patient Participation Group (PPG), presented on the activity of the PPG in Bedfordshire, highlighting:
- This last year has seen a tremendous increase in the amount of work the PPG has been involved in, partially as a result of now being part of ELFT.
  - Achievements and successes include being involved in process mapping sessions, interviewing at all levels, running patient surveys, holding a Health Fair in January, a poster/bunting competition for children to advertise the flu clinic, marshalling drive-through flu clinics and a Leighton Road Surgery Awards evening, at which the PPG won an award.
  - Challenges include:
    - Continuing to build the PPG and recruiting new members.
    - Holding their meetings throughout the pandemic, virtually.
  - Future plans:
    - Holding another Health Fair when possible
    - Setting up a 'Meet the PPG' project for the surgery patient population
    - Returning to the surgery to meet patients
    - Continuing with new initiatives.
- 3.2 In discussion the Board:
- Acknowledged that contact with patients will be challenging in these times; however, were assured that the virtual process is working well and will be further developed.

- Heard that the group had been acknowledged by the CQC as being one of the best PPGs and have requested a write up to be circulated nationally as a learning tool for other surgeries.
- Endorsed that this type of work helps the Trust in creating a culture in which people feel valued.

Mark Lam congratulated Mary on her leadership, passion and tenacity with this group and assured her of the Board's appreciation and support.

#### **4 Minutes of the Previous Meeting held in Public on 24 September 2020**

- 4.1 The Minutes of the meeting held in public on 24 September 2020 were **APPROVED** as a correct record.

#### **5 Action Log and Matters Arising from the Minutes**

##### **5.1 Action Log**

- Actions 330 and 341: included on today's agenda and can therefore be closed.
- Other actions were either in progress or not yet due.

##### **5.2 Matters Arising**

None.

#### **6 Chair's Report**

- 6.1 Mark Lam noted additional points to the circulated report:

- It has been an exceptionally busy year with new Governors on the Council, a new Lead Governor elected and some Governors standing down.
- Covid-19 preparations were specifically discussed during the last Council meeting.
- Confirmed an amendment to the Board's constitution which was unable to be included in this report, concerning the number of Executive and Non-Executive Directors on the Board. As the Trust's business and services have changed and grown considerably since the Trust's inception, the constitution has been amended to provide flexibility in determining the Board's size. This change was agreed with unanimous support from the Board of Directors and Council of Governors.

- 6.2 The Board **RECEIVED** and **NOTED** the report.

#### **7 Interim Chief Executive's Report**

- 7.1 Paul Calaminus presented his report and highlighted:

- A Covid vaccine has now been approved since writing the report.
- A positive change to the CQC rating at Leighton Road Surgery from 'special measures' to 'requires improvement', recognising the significant effort and contribution from primary care team.
- The number of awards for which the Trust has been shortlisted.
- Day Njovana has been appointed as Interim Borough Director for Tower Hamlets.
- Bailey Mitchell has been appointed as Interim Borough Director for Newham.

- Ruth Cooper has been appointed as Trust-wide Operational and Strategic Lead for Learning Disability. 1
- Gill Williams has been appointed to the new role of Director for Social Work.
- The national rollout of a new app to provide a simple educational tool with regard to pressure ulcers. This was created by Sarah Stringer who is part of Bedfordshire Community Health Services team.
- The new roving mental health nurse roles in Network Rail.
- The provision of Vitamin D to all interested staff, and acknowledgement of the donations towards this by Compass Wellbeing CIC and Cathy Lilley who raised over £6k making and selling protective face masks.

7.2 In discussion, the Board noted:

- There is ongoing work to attract personnel with transferrable skills from other industries, e.g. retail and airlines, into the NHS. Two events have been held, one in Luton and one in London, and the Trust led on a national careers conference with an attendance of 2,000+ people. Conversations are also taking place with companies in respect of the staffing of vaccination centres going forward.
- The work around carers is now included within the portfolio of the new Director for Social Work. A recent carers' survey has provided valuable insight into their experiences during Covid. This will help form the basis of a refreshed carers' plan next year to help raise the carers' voice within the Trust.

7.3 The Board **RECEIVED, DISCUSSED** and **NOTED** the report.

## 8 Quality Report

8.1 Amar Shah introduced the report highlighting:

- A deeper analysis has been undertaken into incident data compared to last year, in order to capture any emerging risks.
- Assurance can be given that although there has been an increased number of incidents, there is no change to the proportion causing harm and the distribution across the Trust remains largely the same. Most of the increased reporting can be related to direct Covid infection or non-direct Covid infection, with nothing new emerging.
- The progress section of the report relates to the Trust's plan for quality improvement and contains updates on the Trust's strategic priorities, including the work in Leighton Buzzard and the integrated structure in Tower Hamlets, which will form the basis for a lunchtime Board presentation in 2021.

8.2 In discussion, the Board:

- Noted the focus on daily quality improvement, e.g. examples of work by procurement in developing a process map to help streamline the purchase of PPE equipment during the pandemic, and quality improvement projects, such as that around the complex issues involved in disciplinary cases. More work will be started on this in January, to evaluate the impact on outcomes and service users.
- Was assured that work is ongoing around virtual contacts with patients, thereby empowering them to lead in their own care, e.g. with reminders to physically move to avoid pressure ulcers and around taking insulin. This has had positive results as recognition and early detection can avoid hospitalisation.

8.3 The Board **RECEIVED, DISCUSSED** and **NOTED** the report.

## 9 CQC Update

- 9.1 Lorraine Sunduza presented the update, highlighting:
- Formal and informal meetings with the CQC have continued, in particular regarding the Trust's response to the pandemic.
  - A response to the Leighton Road inspection report is being prepared, which will be shared with the Quality Assurance Committee and this Board. The improvement in quality of care that has been made since previous inspection was acknowledged by the CQC and the rating has improved to 'requires improvement'. The 'safe' domain is good. It was particularly noted that patients reported they are receiving clinical care with compassion. There continue to be three areas which require some improvement but the trajectory is positive.
  - There is the possibility of an inspection at Cauldwell Surgery but confirmation of this is awaited from the CQC.
  - A review of the Bedfordshire, Luton & Milton Keynes (BLMK) ICS system was undertaken which highlighted where good relationships and governance lead to effective working. A similar review of the North East London ICS has also been undertaken and this report is awaited.
  - Although the Trust is preparing for a full inspection next year, the focus remains on continually working to ensure our quality and safety processes are effective.
- 9.2 In discussion the Board agreed:
- That tangible progress towards an 'outstanding' rating takes time and continual improvement. Rapid movement between ratings is not always sustainable and confidence should be taken from the improvement shown.
  - To undertake well-led preparation as a Board, taking into account there are new members on the Board.
- 9.3 The Board **RECEIVED, DISCUSSED** and **NOTED** the report.

## 10 People Plan Update

- 10.1 Tanya Carter presented the report, highlighting:
- The final staff survey response rate is 40.7% which, although lower than last year, possibly reflects that the Trust has a higher headcount this year.
  - The survey contained Covid-related questions; however, throughout the pandemic the Trust has led on a number of informal ways of gathering information and feedback from staff. Information from forums, focus groups and regular check-ins is in the process of being triangulated.
  - Employee relations activity remains high and an external review is being undertaken around collective grievances.
  - Four sessions have been run on Race and Privilege with the Interim Chief Executive and discussion groups; work continues on developing this further.
  - The Board has received reverse-mentoring training and a further two cohorts will be run shortly on reverse-mentorees.
  - 1,300+ requests so far have been received from staff for the Vitamin D provision.
  - WRES launched in October – proposing to link into existing action plans.
- 10.2 In discussion the Board:

- Was assured that a review of the numbers of bullying and harassment cases is being undertaken to ensure they are not being double-counted, as they can arrive through different paths. Some of the increases may be linked to the work around Race and Privilege, which has offered more clarity around issues like micro-aggression, enabling staff to feel more comfortable in raising a complaint.
- Noted data is being triangulated with the staff survey, ER activity and staff metrics on location. Executive leads are being linked specifically with localities.
- Noted that the wider work being undertaken to embrace Purple Light and disabilities across the Trust will be included in a future report.
- Noted that various forums and networks are being used to gain information from staff and that pulse surveys have been run in the past; however, the current provides is no longer running these surveys.
- Was assured that plans are in place for the Trust to recognise staff's hard work and express gratitude.
- Noted the work carried out on the Respect campaign and the Empathy Museum with a focus on listening had been halted due to Covid; the intention is to reintroduce shortly.
- Heard that discussions on possible celebrations once the pandemic is over are being held.
- Reiterated the need for continued support for leaders and noted the Trust is revamping how we continue this important work going forward.

Mark Lam commended Tanya for an excellent and informative report.

10.3 The Board **RECEIVED, DISCUSSED** and **NOTED** the report.

## 11 Safer Staffing

11.1 Lorraine Sunduza presented the report, highlighting:

- The Trust's workforce has had to be flexible and able to change at short notice throughout the pandemic, whilst continuing to maintain safeguards. Colleagues such as psychiatrists and occupational therapists have provided support for nursing staff.
- The contribution of the 2<sup>nd</sup> and 3<sup>rd</sup> year nurses who worked within the Trust.
- New roles were created to assist nursing staff.
- The huddle system was increased to daily and weekly meetings.
- A Community Health Services report had previously confirmed that our staffing models were safe and this work will be picked up again next year.
- A new health roster for District Nursing Teams is being rolled out which will assist in the monitoring of staff.

11.2 In discussion the Board:

- Discussed the challenge in ensuring staff were undertaking self-care around taking leave and are being supported to avoid 'burn out'.
- Noted the increased awareness within the Trust and also increased support being provided. However, it was recognised that work had provided solace for some staff separated from their families. In the second wave more planning is taking place, especially around the taking of Christmas leave and re-introducing team 'away days' virtually to ensure people connect with each other. Development programmes have also been reintroduced.
- Acknowledged that all managers including Board members, have to lead by example also.

- Noted that various virtual groups have been set up, e.g. for apprentices, people who live alone, staff who have returned from maternity leave or have been on-boarded during the pandemic.
- Noted the impact of staff testing was currently low.
- Acknowledged the excellent work being undertaken on staff retention.

11.3 The Board **RECEIVED, DISCUSSED** and **NOTED** the report.

## 12 Freedom to Speak Up

12.1 Anita Hynes, the interim Freedom To Speak Up Guardian, confirmed this report has already been presented to and considered by the Quality Assurance Committee, and advised that a new category was established in April to capture the impact of Covid. Anita highlighted:

- There was a recurrent theme around the recruitment process and a perception that it was not always offering equal opportunities for all staff. People & Culture have investigated to ensure parity with the Trust's recruitment policies, and training has been put in place to address the issue.
- People & Culture have appointed a liaison adviser to support improved communications with those involved in investigations.
- Continuing concerns around bullying and harassment, which account for one third of all concerns received. Investigations and training have been put in place.
- Covid-related issues include concerns over social distancing, mask wearing, following correct Covid-safe procedures, the Covid risk assessment and some shielders feeling pressurised to go on site. Training and support has been put in place for colleagues and the Covid risk assessment is regularly updated to reflect latest government advice.

12.2 In discussion, the Board:

- Noted that some of the raised numbers of incidences across the reporting quarters relate to the same issue, locality, process or change and that this method of reporting concerns should be read in conjunction with the other processes that staff use to raise issues
- Thanked Anita for this important report which will help the Trust in becoming a more open and just organisation.

12.3 The Board **RECEIVED, DISCUSSED** and **NOTED** the report.

## 13 Guardian of Safe Working Hours Q2 Report

13.1 Dr Juliette Brown, consultant psychiatrist of older adults in Newham and guardian of Safer Working Hours for Junior Doctors in ELFT, presented the report and highlighted that:

- The reports have returned to their average levels following the spike in Q1 which related to Covid.
- The regular forums are reporting back that junior doctors have felt supported over this period, with more access available to clinical directors.

Mark Lam thanked Dr Brown for her leadership in this critical area and the support she has given the junior doctors during this difficult time.

13.2 In discussion the Board noted:

- Work has been undertaken to triangulate the data from this area with the Freedom to Speak Up report to provide an aligned and holistic overview.
- The reporting is only a small part of the work, and engagement with the junior doctors at forums and ensuring more contact with supervisors and clinical directors is an essential way forward.
- The good support within the Trust with this agenda in ensuring staff are able to raise issues or concerns.

13.3 The Board **RECEIVED, DISCUSSED** and **NOTED** the report

## 14 **BREAK**

## 15 **Integrated Performance Report**

15.1 Steven Course presented the Finance Section of the report, highlighting:

- A surplus of £144k at month 7 and the maintenance of our break even position.
- Fully refunded Covid costs stand at £10.6m.
- Pressures remain, particularly around the ICT budget.
- In Luton and Bedfordshire and Community Health services issues remain around the reliance on agency staff.
- Cash balance at the end of September is £149.8m.
- The plan for the second half of the year was submitted in October. Within this, the financial envelope for the Trust's Covid spend is £4.8m but given that the spend is more than this, a deficit position is expected. However, potential that some funds will not be spent in this period which would provide an upside by year end.
- Although Covid costs have reduced, there is now the cost of administering the vaccine, which is included in the financial envelope for Covid

15.2 Amar Shah presented Performance Section of the report, highlighting:

- Following an increase in August and September, safety data shows a decrease in physical violence incidents in October and the overall percentage of incidents resulting in harm has reduced in the past three months.
- Referrals to the Trust's community based teams have now returned to pre-Covid levels and although calls to the crisis lines remain high, they are stable.
- The switch to digital ways of relating to our service users has resulted in waiting times being the lowest and shortest in the last three years.
- Some services have been impacted adversely by Covid due to them having to close at times; however, the report shows how they are responding to this challenge and testing new ways of working.

15.3 In discussion the Board:

- Was assured that some of the over-counted numbers relating to 'unexpected deaths' in section 1.5 of the report have resulted from cases being reported by different teams.
- Noted that an amendment of the calculation of the limits and averages for safety incidents will take place if 8 data points are consistently above the average. The incident data shows a large number of incidents are related to Covid infections.
- Noted that a Covid recovery workstream has been operating since the beginning of the acute period, informing us of the impact of these changes.
- The Shaping Our Future workstream was set up in June to undertake workshops and study the changes in terms of work methods which should either be



retained, revert back to or undertaken differently going forward and is currently helping to produce valuable new service designs.

15.4 The Board **RECEIVED, DISCUSSED** and **NOTED** the report.

## 16 Strategic Activity

16.1 Richard Fradgley highlighted:

- The publication of the *Integrated Care: Next Steps* document by NHS England /NHS Improvement which the Trust will respond to.
- System planning is concluded and the investment into our mental health services and community health services is being mobilised.

16.2 The Board **RECEIVED** and **NOTED** the report.

## 17 Voluntary Sector Update

17.1 Richard Fradgley presented the paper, acknowledging the contributions of three Governors – Viv Ahmun, Shirley Biro and Caroline Diehl. He highlighted:

- The need to strengthen our relationship with the voluntary sector and communicate more effectively.
- Focus on engaging some of the smaller organisations.
- How procurement can be used in a more creative way, to enable smaller businesses to be able to secure contractual services.
- The Trust's work in partnership with other commissioners of the voluntary sector.
- Thought to be given to ways of fundraising through our charity.
- Have made 30% of approximately £3m investment targeted at voluntary grass roots organisations and hope to roll this out to Luton and Beds next year.

Mark Lam thanked Richard for the paper and the Governors for their challenge to the Trust around working with the voluntary sector.

17.2 In discussion, the Board:

- Was assured that the issue of capability building in local organisations versus risk is being thought through so any risks can be reduced constructively and proactively.
- Heard that the Community Transformation work already undertaken, included rigorous conversations with the market, and events held to test with the voluntary sector and community organisation what they consider appropriate for the Trust to work with them. Also trying to build the network organically through our Primary Care Teams, reaching out to organisations of all sizes. A mapping exercise is underway on all local organisations.
- Suggested a system-based approach for a more positive impact.
- Noted that approximately 27% of the procurement spend in Luton and Beds is with the voluntary sector and a similar amount also in East London. Within the procurement process there are now a set of social value questions and the process has been broken down so local organisations have more opportunities to apply. Training is also being given in applying for formal procurement tenders and a new framework is being sought outside of the statutory framework to provide more resilient contracts for this sector.

17.3 The Board **RECEIVED, DISCUSSED** and **NOTED** the paper.

## 18. Winter Planning Update

### 18.1 Lorraine Sunduza reported:

- The Trust is still at emergency response level 4 and has increased the Gold Command meetings, plus all Execs are involved at Silver level.
- The flu programme has been improving in terms of our peer vaccination numbers, at just over 60% vaccinated compared to 43% this time last year. This Board also stands at 94% vaccinations.
- The Trust engaged with the digital flu vaccination voucher programme; however, pharmacists are currently prioritising age and community based cases.
- Three primary drivers related to the flu programme:
  - Leadership – ensuring leaders were engaged
  - Resources – making sure people have dedicated time for this work
  - Communication – working with behavioural psychologists to ensure evidence-based information.
- Infection control around Covid has brought a huge cultural change in terms of wearing PPE and virtual working. These changes have needed to be managed in an open and understanding way.
- Two further outbreaks of Covid have been recorded in the second wave, an outbreak being defined by two or more cases being linked. A track and trace system has been established to ensure the infection is managed and controlled.
- The Trust is in a good place in terms of PPE supply and continue to work closely with the Procurement Team on maintaining the supply and monitoring how it is being used.

### 18.2 Paul Gilluley confirmed that the Trust's area is currently in Tier 2 of Covid restrictions and reported on testing and the Covid vaccination:

- All NHS staff are being issued with a lateral flow testing kit to self-test twice a week and obtaining the results within 30 minutes. This procedure is aimed at identifying staff who may be asymptomatic and spreading infection unknowingly.
- The Trust has distributed 4,000 tests amongst patient-facing staff and set up a digital system for results to be registered, which will in turn link to a national register. The testing is voluntary.
- In the case of a positive result, staff are told to remain away from work and take a PCR test, the result of which will inform their next actions.
- The message for staff exhibiting signs of Covid infection remains the same.
- A further 2,000 tests are on order.
- The national plan is for testing to also be extended to care homes and other local health areas.
- In terms of the Covid vaccines, there are currently three main streams for distribution – through Primary Care hubs, NHS staff and mass vaccination centres.
- Three vaccinations have been through whole testing and signed off by the MRSA – Astra Zeneca, Moderna and Pfizer. Vaccines are scheduled to arrive in hospitals by the end of this week with initial distribution to acute hospitals.
- It is planned to begin vaccinating the Trust's staff before Christmas.
- With regard to the mass vaccination centres, in Bedfordshire & Luton this will be run by the Hertfordshire Community Trust and in London ELFT will be the main lead with a centre at Westfield, Stratford.

### 18.3 Edwin Ndlovu updated the Board on the UK's exit from the EU:

- Key areas of focus has been on medicines and vaccines, and both our processes and pharmacies have been stress-tested.
- Clear expectation from the centre not to stockpile.
- Asset list has been updated and assurances obtained from our supply chain and maintenance team that services will continue beyond 31 December.
- Those in the workforce who need the Trust's support in obtaining their settlement documents have been constantly communicated with.

18.5 In discussion, the Board:

- Was assured that there is no evidence that patients have been infected by staff as primarily the PPE that is worn would prevent this. The voluntary self-testing has been rolled out nationally, and is not only about patient safety but also for themselves and their families, communities and colleagues. Some positive feedback stories from staff who have been tested would be helpful in informing and encouraging others.
- Noted that national surveys have already been carried out amongst the public concerning the vaccine and overall it is being welcomed. It is recognised that more work is needed around NHS staff and vaccinations. The dissemination of evidence-based information, for example on the scale of the Pfizer vaccine study, will be useful with this. Also very important that leaders within the Trust lead by example.
- Noted that for some people in the community there are perceived obstacles in having the vaccine and the Trust must recognise this and provide support where needed.

18.6 The Board and Governors expressed their gratitude for the hard work and planning both the clinical and operational teams have carried out in this difficult period.

18.7 The Board **RECEIVED** and **NOTED** the update.

## 19 Trust Board Committees Assurance Reports

- 19.1
- Audit Committee
  - Finance, Business & Investment Committee
  - Mental Health Act Committee
  - Quality Assurance Committee
    - Legal Claims Annual Report
    - Annual Infection Prevention and Control Report
    - Revalidation Report

19.2 The Board **RECEIVED** and **NOTED** the reports.

## 20 Board of Directors Forward Plan

20.1 The Board **NOTED** the plan.

## 21 Any Other Business

None.

## 22 Questions from the Public

- 22.1 Governors Keith Williams and Caroline Ogunsola asked how the Trust is addressing the issues concerning staff retention and recruitment, and the reliance on bank staff, particularly in Luton and Bedfordshire.

In response, assurance was provided that a range of actions are being undertaken including the development of values-based recruitment to improve recruitment process. There is an ongoing project to expand the Trust bank and bank rates for roles that are difficult to recruit to have also been reviewed in order to attract staff to go on bank rather than on agency. There is also a detailed proposal to manage consultant vacancies as this is a significant area of agency spend, particularly in Bedfordshire. In terms of retention, there is a focus on wellbeing.

- 22.2 Beverley Morris raised concern with the use of the term 'privilege' when referring to race inequalities.

In reply, the Board assured Beverley that the term is not intended as a negative but is around there being less barriers for white people. Mark Lam suggested running another Board and Governor session on Race and Privilege with staff from a BAME background sharing their stories.

- 22.3 Caroline Diehl asked how the ELFT Board are planning to consult with Governors and members about the proposed Integrated Care System legislation.

The Board confirmed that the discussion document has only just been received, with a short response turnaround of 9 January 2021. A specific session will be arranged in December with Governors and will also be considered at the Council of Governors Significant Business Committee.

**Action: Richard Fradgley/Mohit Venkataram**

- 22.4 **Farewell to Jenny Kay, Non-Executive Director**

Jenny Kay, Non-Executive Director, is leaving ELFT at the end of December after six years. On behalf of the Board, Mark Lam thanked Jenny for her many years of contribution and said that her championing of quality improvement and clinical excellence will be her abiding legacy.

Ken Batty took the opportunity to acknowledge the professional experience and knowledge Jenny has brought to any topic, whilst always maintaining the Board's focus on the people the Trust are here to serve.

## 23. Dates of Future Meetings

- Thursday 28 January 2021
- Thursday 25 March 2021
- Thursday 20 May 2021
- Thursday 22 July 2021
- Thursday 23 September 2021
- Thursday 25 November 2021
- Thursday 27 January 2022
- Thursday 24 March 2022

All meetings will commence at 13.30 with a lunchtime Quality Improvement presentation at 13.00. Meetings will be held by video conference until further notice.