

**DRAFT Minutes of the Trust Board of Directors meeting held in public
on Thursday, 24 September 2020 at 13:30 via Zoom**

Present:	Name	Title
	Mark Lam	Trust Chair
	Aamir Ahmad	Non-Executive Director
	Ken Batty	Non-Executive Director
	Paul Calaminus	Deputy Chief Executive
	Anit Chandarana	Non-Executive Director
	Mary Elford	Vice-Chair Bedfordshire & Luton
	Dr Navina Evans	Chief Executive Officer
	Professor Sir Sam Everington	Non-Executive Director
	Dr Paul Gilluley	Chief Medical Officer
	Jenny Kay	Non-Executive Director
	Lorraine Sunduza	Chief Nurse
	Eileen Taylor	Vice-Chair London
	Dr Mohit Venkataram	Executive Director of Commercial Development
	Tanya Carter	Executive Director of People and Culture (non-voting)
	Richard Fradgley	Executive Director of Integrated Care (non-voting)
	Philippa Graves	Chief Digital Officer (non-voting)
	Dr Amar Shah	Chief Quality Officer (non-voting)

In attendance:

Victoria Aidoo-Annan	Staff Governor
Dawn Allen	Public Governor
Roshan Ansari	Public Governor
Paul Binfield	Associate Director of People Participation
Shirley Biro	Public Governor
Pam Bhacu	Staff Governor
Robin Bonner	Associate Director Quality Improvement
Auzewell Chitewe	Public Governor
Caroline Diehl	Public Governor
Tee Fabikun	Public Governor
Derek Feeley	Board Adviser
Steve Gladwin	Director of Communications
Robbie Goddard	Service User
Abdul Hussain	Non-Clinical Procurement and Contract Officer
Norbert Lieckfeldt	Corporate Governance Manager
Katrina Leighton	Deputy Director of Finance
Ian Ley	CQC Inspector
Cathy Lilley	Director of Corporate Governance
Lucy Harrison	Senior Practitioner / Occupational Therapist
Nicki McCoy	Corporate Secretariat Manager
Linda McRoberts	Corporate Minute Taker
Rebecca Medlock	Shadowing Navina Evans
Maria Miller	Business Manager

Edwin Ndlovu	Director of Operations
Zach Nguyen	Senior Buyer
Stephanie Quitaleg	Senior Executive Assistant
Suzana Stefanic	Public Governor
Jamu Patel	Public Governor
Felicity Stocker	Public Governor
Ernell Watson	Public governor
Keith Williams	Public Governor

Apologies:

Steven Course	Chief Finance Officer
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The minutes are produced in the order of the agenda

Opening Matters

1 Welcome and Apologies for Absence

1.1 Mark Lam welcomed all to the meeting. A particular welcome was extended to:

- Katrina Leighton, Deputy Finance Director who was standing in for Steven Course
- Rebecca Medlock, a trainee Doctor from Buckinghamshire Health Trust who is shadowing Navina Evans
- Ian Ley, a CQC inspector
- Robbie Goddard who has been working with the People Participation team running a cycling group.

Mark said he hoped that everyone is staying safe and well in these really challenging times.

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 Robbie Goddard gave a passionate talk about how cycling helps his physical and mental health and how he has encouraged others through setting up group rides. He highlighted:

- Cycling is a good multi-task sport; it is one of the best physical exercises and it improves the mind through keeping you focused which in turn helps with the road to recovery.
- Cycling develops confidence, is empowering, provides freedom and helps people to relax.
- The value of group cycling for people's health and wellbeing, and creating a sense of community
- How his health had deteriorated when he stopped cycling.

3.2 In discussion the Board acknowledged the importance of providing access to physical activities to support service users' health and wellbeing, and agreed that further awareness should be raised within teams.

Mark Lam thanked Robbie for his enthusiasm and passion as well as his time today. He agreed there is a very strong link between physical and mental wellbeing.

4 Minutes of the Previous Meeting held in Public on 23 July 2020

4.1 The Minutes of the meeting held in public on 23 July 2020 were **APPROVED** as a correct record, subject to the following amendments:

- Point 13.1 said that the number of disciplinary cases for people from BAME groups has moved closer to that of white people. There is a need to add that although this was small, it was an improvement.
- Point 15.2 to clarify that capital will be distributed at north east London STP level.
- Point 11.1 to read Angela Bartley (not Alison Bartley).

In response to a query with regards to point 7.2 (111 call handlers), Paul Gilluley explained that some of ELFT's crisis lines are via 111.

5 Action Log and Matters Arising from the Minutes

5.1 Action Log

- Paul Gilluley confirmed actions 300, 241 and 253 about the SI Annual Report can close.
- Other actions were either in progress or not yet due.

5.2 Matters Arising

Lorraine Sunduza confirmed that a schedule of NED virtual visits to sites has been developed until December. NEDs commented on the importance of these visits and to keep the momentum going.

6 Chair's Report

6.1 Mark Lam noted additional points to the circulated report:

- This is Navina Evans' and Mary Elford's last Board meeting – there will be a proper goodbye later in the meeting.
- The Council of Governors approved the reappointment of Jenny Kay until the end of December 2020 as this will help with transition. A NED with a clinical background is being sought to replace Jenny.
- Ken Batty has been appointed as the Senior Independent Director with effect from 1 October 2020 taking over from Jenny; this timing of this appointment provides time for transition.

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

7 Chief Executive's Report

7.1 Navina Evans presented her report and highlighted:

- Cathy Lilley has been appointed as Director of Corporate Governance.
- Marina Muirhead has been appointed as Director of Primary Care.
- ELFT are now joining the alliance for supporting the mental health of veterans of the Armed Forces.
- In Luton and Bedfordshire, the public forum is becoming very active in helping to think about the future design of mental health services in the area.

- Also in Bedfordshire a new clinical nurse specialist service in epilepsy has been launched and ELFT are grateful to the CCG for their support in this.
- The Trust has been short-listed for a number of Awards and extending its participation in studies and research.
- There has been a lot of work around race and inclusion, which has been noted outside the organisation, and it is good to be able to share the work that is going on.
- For the first time, the Trust celebrated South Asian history month and shared experiences.

Navina acknowledged that this is the end of her time as CEO of ELFT and her last report as she would be leaving to take up the role of CEO at Health Education England (HEE). She said she is very pleased to handover to Paul Calaminus as Interim CEO and believes she leaves ELFT in safe hands.

Mark Lam said that he is delighted Paul has agreed to step up and that this has been very well received by ELFT's partners.

7.2 In discussion, the Board noted:

- Service users are being involved in the race and privilege discussions.
- Navina explained that in her new role at HEE, there will be a focus on working more closely with organisations and systems to support change, such as on:
 - The delivery of the mandate around the workforce challenges. HEE is keen to work in partnership with systems and providers
 - The learning during COVID and what this can influence
 - There is a big ask around medical education reform and how to support students and trainees and issues of structural racism.

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

8 Quality Report

8.1 Amar Shah introduced the report highlighting that:

- The quality improvement section provides an overview of emerging improvement including an update on delivery against the 90-day QI plan
- The assurance section includes a second thematic analysis based on the triangulation of various data sources to provide an overview of quality issues emerging during the significant peak Covid-19 period of 1 April – 31 July 2020.

8.2 In discussion, the Board:

- Received assurance that although social media feedback is not captured in a report, there is a day to day process for responding to it led by the Communications team who will bring comments to the attention of the Executive who will respond/act accordingly and themes will be forwarded to the relevant department for action. Further consideration to be given to how the Board can be sighted on the themes.
ACTION: Amar Shah/Steve Gladwin
- Requested that the information in this report, for example in respect of quality of care, is triangulated with the Board Assurance Framework.
ACTION: Amar Shah/Cathy Lilley

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

9 People Plan Update

- 9.1 Tanya Carter introduced the People Plan update, highlighting:
- Staff who are shielding: although this is no longer an official requirement, the Trust position has remained that staff who are vulnerable should stay at home where possible and will be supported.
 - Risk assessments: the aim was to risk assess all staff. The Trust missed the target by 1% but achieved the targets for BAME and vulnerable staff.
 - Hardship grant: nine grants have been issued, totalling £9,000. These have been for living expenses such as child care.
 - Race and privilege: there have now been eight sessions held across the Trust including the Board and Council of Governors. Work is continuing with senior leaders with a focus on privilege, understanding privilege and what it means to be white.
- 9.2 In discussion the Board:
- **People Plan:** Commented that it was helpful to see the matrix of ELFT's responsibilities against the national people plan.
 - **The Hardship Fund:**
 - Received assurance the hardship fund has been promoted through the website.
 - Noted that there are a variety of reasons for requests with many from people struggling financially for a range of factors such as credit card debts, mortgages, etc. In such cases, staff will also receive debt management advice through the Employee Assistance Programme (EAP) and further consideration is being given to how the Trust can help staff with debt management and money worries
 - Received assurance there is a robust application process in place.
 - Commented on whether there is an opportunity to provide support through a local system approach.
 - **Employee Relations**
 - Received assurance work is taking place to address by intervening earlier the high number of Band 3-6 women and the disproportionate representation of BAME staff involved in disciplinary cases. The number of black people involved in disciplinary cases has improved over the years.
 - Noted the work underway to improve the situation including:
 - Managers being encouraged to be more empathetic and more emotionally intelligent, to understand the impact of personal life on work
 - A fair treatment process is in place, which was recently reviewed and now before any process starts it goes to a panel to ensure there is equity across services.
 - **Childcare:**
 - Agreed it was good to see ELFT are working with Yoopies, the childcare App.
 - Noted the increased need to support staff with childcare because of children being sent home due to Covid restrictions and asked if there is more that can be done through systems and partnerships.
 - Received assurance ELFT offer subsidies for childcare and are keen to look at other ways to support.

- 9.3 The Board **RECEIVED, DISCUSSED and NOTED** the report.

10 Workforce Race Equality Standard Annual Report

10.1 Tanya Carter presented the report, highlighting:

- The WRES submission is positive with a number of improvements in a number of bands, most notably improvements in terms of disciplinaries.
- Career progression is the biggest concern; a career development working group is being established to review.
- At a BAME network, Roger Kline who is Research Fellow at Middlesex University Business School and who designed the WRES, commended the Trust on the honest of the action plan, the level of detail and innovation.

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

11 Workforce Disability Equality Standard Report

11.1 Tanya Carter presented the report, highlighting:

- This is not as advanced as the WRES as is only the second year this report has been submitted.
- The Trust is working with the ELFT Ability network.
- There is a deterioration in more senior Bands and there is still work to do in the percentage of disabled staff experiencing bullying and harassment and that work continues.
- There are notable improvements in representation of staff reporting disabilities.

11.2 In discussion the Board:

- Noted three webinars with a focus on disabilities and what the Trust needs to do to support those staff with disabilities has been run by Purple Space.
- Noted there have also been conversations with staff who are shielding. It was recognised that some of the conversations around risk assessing staff with disabilities has been difficult, both for the staff and the managers, and support has been put in place to help with those conversations.
- Noted that lessons from this network which might be used to help service users with disabilities.
- Received assurance that people with disabilities who had been helped by digital services would not be expected to lose those post-Covid. A lot of work is going on around digital changes with staff and service users. IT hubs have been created across services and the available amount of IT training and equipment is also being increased.

11.3 Mark Lam thanked Tanya for the three vitally important papers and hoped the Board would continue to see progress against the plans. On the two equality reports he commented that it was good to see ELFT's on-going and very firm commitment to equality.

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

12 Break

13 Integrated Performance Report

13.1 Amar Shah presented the report and highlighted that:

- As requested by the Board the report now includes operational data in respect of Covid focusing on key safety, access and finance measures.
- The report now also includes comparative data to demonstrate how the Trust compares to other providers, and there is more detail around the forward look – operational resilience and planning.

The Board commented this was a very helpful report, covering a wide range of issues.

13.2 Performance

In discussion the Board:

- Noted it is unlikely that there is a relationship between the higher incidence of pressure ulcers and the increased waiting times for referrals to District Nurses. The waiting times for community health services for May included some errors in reporting and it is not thought waiting times changed throughout this period.
- Received assurance that the Trust's community services are working with care homes on minimising the risk of pressure ulcers.
- Noted that the report is being developed to include a scorecard for primary care indicators.
- Noted that the psychological therapy service is more individualised and complex than IAPT, so did not initially move to digital services to minimise disruption. The service has now been re-designed the service which should reduce waiting times.
- Noted that not all service users and patients like or are able to engage virtually. Online offers have now further improved including, for example, the establishment of IT hubs which provide a more supportive environment.
- Agreed it would be helpful to receive a presentation from Psychological Therapies and IAPT about how they adapted during the pandemic.

ACTION: Edwin Ndlovu

- Acknowledged the importance of guidance for staff teams about which digital interventions work better and of monitoring the effectiveness of the various methods, i.e. telephone calls, videos, using kiosks etc.
- Noted that the Trust's aggregated data is usually just for mental health. Clinical record systems are easily configurable and while simplifying the process, there have been issues with remote access.
- Noted that the work underway with the Future of Work about how data is collected to ensure systems are agile and fit for purpose in these changing times
- Noted a report on Digital Transformation including opportunities and challenges will be presented to Board in the new year.

ACTION: Philippa Graves

13.3 Finances

Katrina Leighton introduced the financial performance report highlighting:

- ELFT is slightly ahead of planned performance with the net position remaining at break even.
- Year to date Covid costs of £8.9m have been claimed and Covid costs can continue to be claimed in month 6.
- The main overspends continue to be in agency spend in Bedfordshire and Luton, mainly for medical staffing, and for ICT costs in the Corporate Directorate. Deep dives are being undertaken in both areas to understand the issues and challenges.
- The cash balance at the end of July is £146.9m.
- Contracts and payments guidance was issued last week for Phase 3 of Covid response: non-contract billing continues to be suspended.

- Work is going on with STPs about how the funding will be deployed and what that means for ELFT. The details will be taken to the Finance, Business and Investment Committee.
- Each STP has COVID funding and they have to decide how it is deployed.
- ELFT's position is unique in that it spans two STPs.
- Currently STP partners' capital plans total £106m against a budget of £100m. The Board will be kept updated of progress.

13.4 In discussion the Board:

- Requested assurance about whether the work on agency spend in Bedfordshire and Luton is being effective or whether this is impacted by additional Covid spend. It was noted that the planned improvements in agency medical staffing is a long-term plan. It was agreed a detailed report on the action plan, costs and underlying issues in relation to recruitment and retention would be presented to the Finance Business and Investment Committee including trajectories.
- ACTION: Paul Calaminus**
- Discussed the possible reduction in ELFT's dependency on psychiatrists, and was assured that the plan includes benchmarking against other Trusts and the skill mix.

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

14 COVID-19 Update, including Phase 3 Planning

14.1 Paul Gilluley provided an outline of the current position and ELFT's response:

- Nationally Covid is at level 4 and the NHS remains at emergency response level 3; there has been an increase in activity and acuity
- The Trust has increased its response across Gold, Silver and Bronze command as part of its planning.
- There are no Covid cases in ELFT currently and 53 swab tests are awaited.
- Sadly 137 service users have died since the beginning of the pandemic to date.
- Experience in working across systems has been gained through the Integrated Discharge Hubs which help with rapid discharge.
- The estate is being re-configured, both physically and digitally.
- There is a need to think of innovative ways of providing treatment. However, lack of face to face contact has led to many mental health service users being particularly vulnerable to breakdown and to isolation and therefore a mix of options is essential.
- The Trust has taken an increasing role in advocacy for some service users, particularly those with learning disabilities.
- The Trust is reviewing at digital poverty and opportunities of providing increased access for our service users and staff.
- The Trust is piloting rapid testing which could enable speedier responses if there are pockets of increased cases.

14.2 Lorraine Sunduza updated the Board about staff and infection control issues:

- 63 members of staff absent due to Covid-related illnesses.
- As children have returned to school, staff absences have increased due to families being asked to isolate.
- Risk assessments are continuing to be used to support those staff who are shielding or quarantining as these are dynamic tools which enable ongoing conversations.

- The pandemic has had a huge psychological impact on staff and a professional support service has been established for staff.
- Training packages have been reviewed to provide for virtual delivery.
- Partners with laboratory capacity are needed for ELFT to be able to do testing. ELFT have put themselves forward to be a pilot site for the DNA nudge system.
- The requirement for Infection Prevention and Control (IPC) has led to a need for culture change as this is a new way of working.
- Impact of Covid seminar held to share learning across the Trust.
- A learning point is the importance of rest and recuperation, which can be easier said than done, so emphasis is being put on encouraging staff to take breaks.
- Flu programme will co-exist with Covid plans. The target for immunization is 90% of staff.
- Work continues in the five workstreams to future proof ELFT's response to Covid.

14.3 Richard Fradley presented on the Phase 3 planning:

- There has been an intense period of work on system planning involving close working with commissioners and other system providers using the structure established during Covid to support system resilience and tackling health inequalities
- There is a focus on how to deploy the Mental Health Investment Standard in a way which is resilient for the remainder of the year and plans developed to deliver the Long Term Plan commitments, e.g. access for children.
- In primary care and community services the focus is on Integrated Discharge Hubs and supporting care homes, to protect those that are vulnerable.

Mark Lam thanked Paul, Lorraine and Richard for their comprehensive presentation.

14.4 In discussion Board noted:

- One of the main differences this time is that in the first phase of the pandemic the Trust, along with other organisations, were responding to the unknown with direction from the centre; for this second phase the Trust has a better understanding having learnt from phase 1. There is a need to empower clinicians to make decisions as early as possible and to embed a localized agile approach.
- A challenging and concerning area is around vulnerable people who live alone in the community and the need to balance seeing people face to face and keeping people safe. Where people live alone with serious mental illness this balance can be particularly difficult. Bed management will also need careful monitoring.
- An area for focus is the capacity and configuration of services to support people to be discharged safely, particularly from acute hospitals. This will require looking at how to deploy funds and workforce in that context.
- The Trust is cognisant of the need to manage staff fatigue and are encouraging staff to take leave. Staff had been able to carry extra leave forward and to sell some back, however, this offer is constantly being reviewed. The Executive assured the Board that they are looking after each other and aware of the need to role model.
- Internal communications are part of Gold command, and Public Health colleagues ensure messages are in line with guidance. All letters sent to service users are being amended to include basic information about how to keep safe during this time.
- ELFT is involved in system working in both north east London and Bedfordshire and Luton, and it is recognised that the Trust has a role to play in combatting some of the mixed messages in the media, and ensuring that it is a trusted

source of information.

Mark thanked colleagues for their on-going focus, professionalism and planning, with a clear reflection on the learning from the first wave.

14.5 The Board **RECEIVED, DISCUSSED** and **NOTED** the update.

15 Trust Board Committee Assurance Reports

- 15.1
 - a. Appointments & Remuneration Committee
 - b. Audit Committee:
 - Audit Committee Annual Report 2019/20
 - c. Finance, Business & Investment Committee
 - d. People Participation Committee
 - e. Quality Assurance Committee including Annual Reports 2019/20:
 - Annual Audit Report and Clinical Audit Work Plan
 - Learning from Deaths Annual Report
 - Serious Incident Annual Report
 - Information Governance Annual Report
 - SIRO Annual Report
 - Emergency, Preparedness, Resilience and Response Annual Report
 - Health, Safety and Security Annual Report
 - Guardian of Safe Working Reports Q4, Q1 and Annual Report
 - Mental Health Law Annual Report
 - Safeguarding (Children and Adult) Annual Report
- 15.2 The Board noted:
 - Quality and Safety Annual Reports: The Quality Assurance Committee held an additional meeting to receive the quality and safety-related annual reports so that they could be reviewed and discussed in a timely fashion. The approach provided the opportunity for the Committee to have a strategic overview, receive assurance, align and triangulate information and data, review learning and understand the opportunities for future improvement.
 - Learning from Deaths Report: received assurance that all unexpected deaths receive a 48-hour report and based on the detail of that report, it might be decided there is a need for a concise report which is a more in depth review. If there is a need for further assurance, a serious incident review undertaken. So, all unexpected deaths have some review, it is only a small proportion that proceed to the serious incident review. Future reports will articulate this approach more clearly.
- 15.3 The assurance reports of Committee proceedings were **RECEIVED** and **NOTED**.

16 Board of Directors Forward Plan

16.1 The Forward Plan was **RECEIVED** and **NOTED**.

17 Any Other Urgent Business: previously notified to the Chair

No other urgent business had previously been notified to the Chair

17.1

18 Questions from the Public

18.1 No questions had been submitted in advance. Mark Lam asked that if anyone had a question they had not had time to submit, to send it in writing to Cathy Lilley and the Board will respond. He asked that in future any questions are submitted ahead of the meeting.

19 Farewell to Dr Navina Evans and Mary Elford

19.1 On behalf of the Board, Mark Lam took the opportunity to recognise and celebrate the tenure and significant contributions of both Navina Evans and Mary Elford.

Mark remarked that Navina had been CEO for four years and a Consultant Psychiatrist for fifteen years before that, so had a long-standing association with ELFT. He referred to her wonderful legacy and said that ELFT's culture of caring for people emanated from Navina and there is openness and authenticity that comes through from everything she does. Mark praised her humanity and leadership and her respect and compassion for people. He wished her all the best for the future.

Mary Elford is the longest standing member of the Board who Mark said had been an incredibly loyal, astute and tenacious Vice-Chair and Non-Executive Director and a real team member. He said it had been a pleasure to work with Mary for a short while; she managed to bring a sense of humour as well as a caring approach and compassion for people to all discussions. Mark congratulated Mary on her role as Chair with Cambridgeshire Community Services NHS Trust and thanked her for the many years of contribution to this Board.

20 Dates of Future Meetings:

- Thursday 3 December 2020
- Thursday 28 January 2021
- Thursday 25 March 2021