

**Minutes of the St George's University Hospitals NHS Foundation Trust Board Meeting  
In Public (Part One)  
Thursday, 26 November 2020  
Held virtually via Microsoft Teams**

Name	Title	Initials
<b>PRESENT</b>		
Gillian Norton	Chairman	Chairman
Jacqueline Totterdell	Chief Executive Officer	CEO
Ann Beasley	Non-Executive Director	NED
Elizabeth Bishop	Non-Executive Director	NED
Stephen Collier	Non-Executive Director	NED
Prof Jenny Higham	Non-Executive Director	NED
Prof Parveen Kumar	Non-Executive Director	NED
Dr Pui-Ling Li	Associate Non-Executive Director	ANED
Tim Wright	Non-Executive Director	NED
Anne Brierley	Interim Chief Operating Officer	ICOO
Robert Bleasdale	Acting Chief Nurse & Director of Infection Prevention & Control	ACN/DIPC
Dr Richard Jennings	Chief Medical Officer	CMO
Andrew Grimshaw	Chief Finance Officer and Deputy Chief Executive Officer	CFO/DCEO
<b>IN ATTENDANCE</b>		
Humaira Ashraf	Acting Chief People Officer (Culture)	ACPO(C)
James Friend	Chief Transformation Officer	CTO
Stephen Jones	Chief Corporate Affairs Officer	CCAO
Suzanne Marsello	Chief Strategy Officer	CSO
Elizabeth Nyawade	Acting Chief People Officer (Workforce)	ACPO(W)
<b>PRESENTERS</b>		
Karyn Richards-Wright	Freedom to Speak Up Guardian ( <i>item 3.3 only</i> )	FTSUG
Dr Serena Hayward	Guardian of Safe Working Hours ( <i>item 3.4 only</i> )	GoSWH
Sarah Cook	Speech & Language Therapist ( <i>item 5.1 only</i> )	SLT
Charlotte Felix-Otoo	Speech & Language Therapist ( <i>item 5.1 only</i> )	SLT
<b>SECRETARIAT</b>		
Tamara Croud	Head of Corporate Governance/Board Secretary	HCG

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<b>1.0 OPENING ADMINISTRATION</b>		
<b>1.1</b>	<b>Welcome, Introductions and apologies</b>	

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	The Chairman welcomed everyone to the meeting and noted that there were no apologies.	
<b>1.2</b>	<p><b>Declarations of Interest</b></p> <p>There were no additional or new declarations of interest reported.</p>	
<b>1.3</b>	<p><b>Minutes of the meetings held on 24 September 2020</b></p> <p>The minutes of the meeting held on 24 September 2020 were approved as a true and accurate record.</p>	
<b>1.4</b>	<p><b>Action Log and Matters Arising</b></p> <p>The Board reviewed the action log and agreed to close those actions proposed for closure and endorsed the deferral of action TB25.06.20/02 (maternity data).</p>	
<b>1.5</b>	<p><b>Chief Executive's Officer (CEO) Report</b></p> <p>The Board received the report from the CEO and the following key points were raised and noted:</p> <ul style="list-style-type: none"> <li>• The number of Covid-19 patients at the Trust was currently stable, but further increases in Covid positive patients was expected in the coming few weeks in light of the current prevalence of the virus. The Trust would be rolling out the lateral flow Covid-19 test to staff shortly. Frontline clinical and vulnerable staff would be prioritised to receive the test, but uptake was voluntary.</li> <li>• The Trust was working to reduce the backlog of elective activity from the first wave of the pandemic and performance was going in the right direction. However, there were some issues with data quality which were being addressed.</li> <li>• The Trust had considered the recently published NHS England and NHS Improvement (NHSE&amp;I) Food Review report and was considering how it could make further changes to improve the quality of food provided to patients. NHSE&amp;I had also asked trusts to identify a Board member to be the named responsible officer for hospital food at the Trust. The ACN has agreed to take on this role.</li> <li>• The Black History and Freedom to Speak Up month initiatives undertaken in October 2020 had been very successful and had been welcomed by the Trust. The Trust had also welcomed Dr Henrietta Hughes, National Guardian for Freedom to Speak Up, to the Trust and this had been a good opportunity to discuss the actions being taken to improve the Trust's approach to raising concerns.</li> <li>• The CFO was representing the Trust at national level to progress the preparations for the end of the transition period (on 31 December 2020) following the UK's exit from the European Union earlier in the year.</li> <li>• The CMO had appointed three Deputy Chief Medical Officers. With the departure of Karen Daly at the end on December 2020 it was proposed that</li> </ul>	

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	<p>Dr Lucinda Etheridge take on the role of Responsible Officer for medical staff.</p> <p>The Board noted the report and agreed the following:</p> <ul style="list-style-type: none"> <li>• <b>Robert Bleasdale, Acting Chief Nurse, would be the Board member responsible for hospital food at the Trust; and</b></li> <li>• <b>Dr Lucinda Etheridge, Deputy Chief Medical Officer for Workforce and Professional Standards, would be appointed as the Responsible Officer for all of the Trust's medical consultants, speciality and associate specialist doctors and other Trust doctors with the exception of doctors in training.</b></li> </ul> <p>The Board also noted thanks and appreciation for the contribution of Karen Daly, Acting Deputy Chief Medical Officer.</p>	
<b>2.0</b>	<b>CARE</b>	
<b>2.1</b>	<p><b>Quality and Safety Committee Report</b></p> <p>Professor Dame Parveen Kumar, Chair of the Committee, presented the comprehensive report of the meetings held in October and November 2020, which set out the key matters raised and discussed. Many of the reports discussed by the Committee also featured later on Board agenda. The Committee welcomed the deep dive report on medical care and whilst it was recognised that there was more work to be done the Committee commended the progress made by the Medicine and Cardiovascular Division especially in relation to improving the emergency care pathway. The Committee was also very assured by the progress detailed in the annual reports and noted the milestone development of an annual patient experience report.</p> <p>In response to Ann Beasley's query it was noted that the delay in reporting the adverse incidents to the Human Tissue Authority related to an administrative issue whereby the person with access to the system had been on annual leave. This issue had been addressed and additional members of staff now had access to the system.</p> <p>The Board noted the report.</p>	
<b>2.1.1</b>	<p><b>Infection Prevention &amp; Control Annual Report – 2019/20</b></p> <p>The Board received and considered the annual report on infection prevention and control 2019/20 which had previously been discussed at the Quality and Safety Committee.</p> <p>The Board noted that it had been a challenging time for the infection prevention and control team recently with the onset of the Covid-19 pandemic which had called for different ways of working and the introduction of new and additional infection prevention and control measures. The Board commended the team for its work.</p>	
<b>2.1.2</b>	<p><b>Seven Day Services</b></p> <p>The Board considered the update on the progress the Trust had made in implementing the standards required to achieve seven day services, which had previously been considered by the Quality and Safety Committee. Covid-19</p>	

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	<p>had impacted on the Trust's ability to fully focus on implementing the seven day standards with changes in working patterns having been made to accommodate operational priorities. To be fully compliant with all of the standards the Trust would need to invest sufficient resource and time. Among those organisations which were fully compliant, it was evident that the process for achieving compliance could take up to one year of focused effort.</p> <p>The Board noted the report and agreed that the Quality and Safety Committee would continue to regularly monitor progress in meeting the seven day standards.</p>	
<b>2.1.3</b>	<p><b>Cardiac Surgery Services Quarterly Report</b></p> <p>The Board received and noted the quarter two 2020/21 report on Cardiac Surgery Services which had previously been considered at the Quality and Safety Committee.</p> <p>The Chairman noted that as part of the planned comprehensive report on cardiac surgery one year on from the publication of the mortality review, the Board would consider how to maintain scrutiny of cardiac surgery services within the bounds of business as usual.</p>	
<b>2.2</b>	<p><b>Learning from Deaths Quarterly Report</b></p> <p>The Board received and considered the quarter two 2020/21 Learning From Deaths report which had previously been discussed at the Quality and Safety Committee. The Medical Examiner Service had been established at the Trust but there was a need for ongoing work to embed it within the organisation and focus was now being given to building the systems and mechanism around the learning from death lead to strengthen the clinical governance processes for managing mortality. The Trust continued to manage the two mortality alerts in relation to trauma and a further update would be provided in the private meeting. In response to the query from Ann Beasley the CMO advised that there was no single common theme related to the death of six patients and these patients did not have any mental health diagnosis.</p> <p>The Board noted the report.</p>	
<b>2.3</b>	<p><b>Integrated Quality and Performance Report (IQPR)</b></p> <p>The Board received and noted the IQPR at Month 7 (October 2020), which had been scrutinised at both the Finance and Investment and the Quality and Safety Committees. Beyond the matters raised in the reports from the Committees, the Board noted that:</p> <ul style="list-style-type: none"> <li>• The emergency department continued to perform well at 94.1% against the four hour operating standard given the challenging circumstances. The Emergency Care Intensive Support Team (ECIST) had conducted a follow-up review of the emergency department and reported that the Trust had an exemplary emergency care team and wanted to show case the Trust's work to improve its emergency floor. The Board commented that this was a very positive step forward.</li> <li>• In month, the Trust had focused on increasing elective, day case and outpatient activity. Outpatient activity was 12% under projected activity</li> </ul>	

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<p>levels which related to social distancing measures resulting in the reduction of physical capacity. The Trust was working hard to make the best of the available space and was using virtual clinics.</p> <ul style="list-style-type: none"> <li>• Day case and elective activity in October had underperformed against the 90% target. The three areas of underperformance related to gynaecology, catheterisation laboratory and endoscopy.</li> <li>• At month 8, activity performance was on trajectory and the Trust was working to reduce the waiting list for diagnostics and cancer with priority being given to 2-week referrals. The Trust was running all screening services for the South West London sector. The bowel cancer screening backlog had been cleared and the cancer and breast screening backlog was projected to be cleared in 2021.</li> <li>• South West London Pathology was working hard to achieve the trajectory for Covid-19 testing, introduced nine testing platforms for use by the Trust, the Royal Nuffield Orthopaedic Centre, Croydon and Kingston Hospitals extended its services to 18 hours per day and was conducting significant numbers of Covid-19 tests each day for on 25 November 1560 tests were processed. The Trust was compliant with all turnaround targets. The service has also launched the 90 minutes rapid testing. It was also noted that this was a good example of collaborative system working.</li> <li>• There had been an improvement in the venous thromboembolism (VTE) performance following resolution of the issue with the data reported in the IQPR.</li> <li>• The Trust had seen an increase in the number of Covid-19 cases in month. There were 7 Hospital Onset Covid-19 infections classified as hospital onset hospital acquired (HOHA) diagnosed greater than 14 days after admission, and 1 hospital onset probable hospital associated (HOPA), where COVID-19 was diagnosed 8-14 days after admission. Five of the HOHA cases were associated with an outbreak on a medical ward. The ward was open but remained under surveillance pending absence of new cases for 28 days from the last positive case.</li> <li>• The number of caesarean sections had increased by 30% in month. Whilst this was lower than the 40% national average this was the highest it has been in the Trust and as a result the Trust would conduct a deep dive into maternity services key performance indicators and a separate report would be presented to the Board via the Quality and Safety Committee.</li> <li>• Work was underway across South West London to review Covid-19 nosocomial infection data and share learning to reduce risks and improve systems and measures.</li> <li>• The Trust had incorporated the recommendations from the Dido Harding review into its disciplinary policy. The Trust also continued to conduct Covid-19 risk assessment of staff and was monitoring implementation of any adjustments for staff. The Trust had reduced vacancy rates and staff turnaround was the lowest it had been for some time.</li> </ul> <p>The Board noted the report and congratulated the emergency care team for</p>	

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<p>their exemplary work.</p> <p><b>The Board also agreed that the report from ECIST would be circulated for information.</b></p>	<p>ICOO</p>
<p><b>2.4 Sickle Cell Patient Experience in Emergency Department: Patient Story Update</b></p> <p>The Board received the update requested following the patient story regarding sickle cell patient experience in the emergency department (ED) in January 2020. The following key points were raised and noted:</p> <ul style="list-style-type: none"> <li>• The story from the patient in January 2020 had raised important and concerning issues and the Trust had sought to improve the experience for sickle cell patients attending the emergency department.</li> <li>• The Trust had established a patient experience group to co-design improvement actions such as patient information, iClip development, easy access care pathway and education and training.</li> <li>• The Sickle Cell Patient Experience Group had identified improvement actions such as introducing a consultant lead for sickle cell, two nurse champions, and had agreed a standard protocol for sickle cell patients and adopting the 'Always Event' methodology.</li> <li>• Since the Board meeting in January 2020 the ED team had introduced additional staff training, iClip had been amended to include specific blood order sets for acute sickle cell patients, and guidelines had been centralised for easy access for the ED team.</li> <li>• Further projects agreed for co-design with the Sickle Cell Patient Experience Group included development of patient information, including a video and fast pass but this work was paused whilst the organisation focused on managing the Covid-19 operational priorities.</li> <li>• The Trust was assured by the results from the recent audit of Management of Acute Sickle Cell in Acute Painful Crisis which noted: a reduction in the time for initial assessment which was now 9 minutes compared with 23 minutes previously; receipt of analgesia within 18 minutes compared with 75 minutes previously; and 75% of patients pain scores being reviewed within 30 minutes of receiving analgesia.</li> <li>• In line with a suggestion from Tim Wright, it was agreed that the Trust would look at the feasibility of implementing the pre-registration for sickle cell patients who come into the Trust via ambulance.</li> <li>• The Trust was flagging patients with sickle cell on iClip and a survey would be co-designed with patient experience group.</li> </ul> <p><b>The Board noted the report and agreed that the Quality and Safety Committee would receive another report to assess whether or not the actions taken to date had been fully embedded.</b></p>	<p>ACN</p>



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<b>3.0 CULTURE</b>		
<b>3.1</b>	<p><b>Workforce &amp; Education Committee Report</b></p> <p>Stephen Collier, Chair of the Committee, presented the report of the meetings held in October and November 2020, which set out the key matters raised and discussed. The Committee was not proposing any changes to the rating of the Board Assurance Framework risks allocated to the Committee. The Committee had found it encouraging that there was steady operationalisation of the diversity and inclusion workstream. It was important that the Board focused on the culture change programme given the challenges facing the organisation, and the Committee had devoted its November meeting to discussing this work. It was important to note the hard work of the health and wellbeing teams who work to support Trust staff.</p> <p>The Board noted the report.</p>	
<b>3.1.1</b>	<p><b>Culture Change Programme: Diagnostics Findings</b></p> <p>The Board received the final report of the diagnostics findings from the first phase of the culture change programme. The report had already been discussed, in detail, at the Board seminar in October 2020 and at the November 2020 Workforce and Education Committee. The programme was moving to the next phase of work which was the co-design of the action plan and prioritisation.</p> <p>The Board noted the update.</p>	
<b>3.1.2</b>	<p><b>Diversity and Inclusion Report and Action Plan</b></p> <p>The Board received and discussed the progress report on implementing the Trust's Diversity and Inclusion Action Plan. The plan was iterative and a new section had been included to ensure the Trust's plans aligned with the London Workforce Race Equality Standards actions. The Trust was tracking progress robustly and there had been some improvements to date. There was a lot of energy around the initiatives but this may be impacted by the second surge of Covid-19.</p> <p>Ann Beasley noted that the graphic for people with disabilities focused on physical disability and expressed concern that this may deter people from declaring other disabilities which were outside physical impairments.</p> <p><b>The Board noted the report and it was agreed that the graphic for disabilities would be revised to be more inclusive.</b></p>	<b>ACPO(C)</b>
<b>3.2</b>	<p><b>Workforce Disability Equality Standards Annual Report</b></p> <p>The Board received the annual report on Workforce Disability Equality Standards which was also discussed at the Workforce and Education Committee. Focused areas of work included creating an environment where staff felt safe to declare disabilities, educating staff about the different disabilities and developing the disability network. The report also included a robust action plan.</p> <p>Dame Parveen Kumar queried the measures in place to support staff with a</p>	

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<p>disability and begin to change the culture of the organisation. It was reported that the Trust would focus on celebrating the differences between people and the successes of people with disabilities. Dame Parveen also noted that it was important to think carefully how the Trust supported people with mental health issues; the Trust needed to make reasonable adjustments to the work environment to support people with mental health issues.</p> <p>The Board received the annual report and approved the 2020/21 action plan.</p>	
<p><b>3.3 Freedom to Speak Up (FTSU) Vision and Strategy</b></p> <p>The Board welcomed the FTSU Guardian, Karyn Richards-Wright, to the meeting. The following points were raised and noted:</p> <ul style="list-style-type: none"> <li>• The Trust had received 20 FTSU contacts in quarter 2 2020/21 compared with 50 in quarter one.</li> <li>• The key themes among the concerns related to the availability of personal protective requirement, shielding and support staff during the first Covid-19 wave, treatment of staff from Black, Asian, Minority and Ethnic (BAME) backgrounds, bullying and harassment and conflicts within teams.</li> <li>• Forty one percent of complaints have come from administration staff. Maintenance and cleaning staff were still not raising issues and the FTSUG would continue to make contact with relevant leads to engage these groups of staff.</li> <li>• Staff felt that when they raised issues within their teams and with line managers they were not addressed effectively. As a result, these were then raised with the FTSUG. Many of these issues could, however, be addressed locally.</li> <li>• The FTSUG regularly met management teams and HR business partners to progress solutions to issues raised.</li> <li>• It was important that the Trust unpicked the issues raised by administrative and clerical staff who were also key to the Trust's ability to deliver its services. The Trust needed to invest in this staff group who did not always feel valued.</li> <li>• The Trust had made good progress on implementing the recommendations from NHS England and NHS Improvement (NHSE&amp;I) review in March 2020 and work continued to embed the actions.</li> </ul> <p>The Board noted the report and the significant progress made to date in addressing the recommendations of the NHSE&amp;I review of the Trust's FTSU arrangements.</p>	
<p><b>3.4 Guardian of Safe Working Hours</b></p> <p>The Board welcomed the Guardian of Safe Working Hours (GoSWH), Serena Hayward, to the meeting who provided an overview of the quarterly Guardian of Safe Working report which had been discussed at the Workforce and Education Committee. Following the first wave of Covid-19 the junior doctors experienced</p>	



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<p>a slump in morale and had concerns about their training and education and leave. With the new junior doctors' forum chair and deputy there had been an injection of renewed enthusiasm for its work and the Guardian reported that it had been very helpful to see Board members at the forum. Exception reporting remained down on previous levels but this was not out of the norm given the current situation. A lot of the safety concerns raised related to one trainee and the Trust was supporting that member of staff. The Trust was continuing to look at developing rest areas for junior doctors and was tracking the training provided to trainees during the second wave of Covid-19.</p> <p>Ann Beasley queried whether the Trust monitored exception reports by the ethnicity of junior doctors. It was acknowledged that this was not analysed at present but the information could be identified and included in future reports. The Trust was doing some work around the ethnicity of trainee doctors and their employability after training.</p> <p>The CMO also advised that work was being carried out with the upper GI Care Group to improve the environment for junior doctors.</p> <p>The Board received and noted the report.</p>	
<p><b>4.0 COLLABORATION</b></p>	
<p><b>4.1 Finance and Investment Committee Report</b></p> <p>Ann Beasley, Chair of the Committee, provided an update on the meetings held in October and November 2020. The Committee had noted that the financial strategic risk remained high and there was no proposed change to the risk score. The Committee also noted the significant level of work ongoing to improve the Trust's estates infrastructure and that a strategy was in development. The Committee had also held a discussion about the Trust's readiness to be taken out of financial special measures.</p> <p>The Board noted the report.</p>	
<p><b>4.2 Finance Report M07</b></p> <p>The Board received and noted the Trust's finance performance at month 7. The Trust, as with other NHS organisations, was being provided with support from NHS England and NHS Improvement to achieve a balanced financial position each month. The circumstances remained the same at month 7. The Trust was £300k favourable against forecast with a deficit of £1.7m. The Trust considered it would achieve breakeven at year end.</p> <p>The Board noted the report.</p>	
<p><b>4.3 Audit Committee Report</b></p> <p>Elizabeth Bishop, Chair of the Committee, provided an update on the meeting held in October 2020. The Committee discussed plans for completing the year-end financial audit. The key areas of concerns related to the use of resources/value for money. The Committee also noted the risks around Cyber Security and would continue to monitor the Trust's control mechanisms to ensure they were robust.</p>	

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	The Board noted the report.	
<b>4.4</b>	<p><b>St George's Charity Report</b></p> <p>The Board received and noted the report from the St George's Charity and thanked the Charity for its support during the Covid-19 pandemic. Tim Wright, who also served as a Trustee on the Charity, advised that the Charity was working on applications for the NHS Together Charity funding.</p> <p>The Board noted the report.</p>	
<b>4.5</b>	<b>Horizon Scanning Report:</b>	
<b>4.5.1</b>	<p><b>Emerging Policy, Legislative, Regulatory and Governance Issues (Q2)</b></p> <p>The Board received and noted the quarter two 2020/21 horizon scanning report on emerging policy, legislative, regulatory and governance issues.</p>	
<b>4.5.2</b>	<p><b>Local &amp; Regional issues (Q2)</b></p> <p>The Board received and noted the quarter two horizon scanning report on local and regional issues.</p>	
<b>5.0</b>	<b>CLOSING ADMINISTRATION</b>	
<b>5.1</b>	<p><b>Staff Story: Diversity &amp; Inclusion</b></p> <p>The Board received a staff story from members of the Children's Speech and Language Therapist (SLT) Team, Charlotte Felix-Otoo and Sarah Cook, who outlined how they had used the communication tool developed by the Trust to facilitate conversations about race within their teams and more widely across the speech therapy professional community.</p> <p>The SLT Team had established a working group with the goal of understanding and supporting cultural differences in the workplace and in parenting and how this impacted the experiences of families with the team. The team collected data on the ethnicity of SLT students and the breakdown of ethnicity by pay band in the Trust which highlighted that a majority of people in both groups came from a white background. The SLT had:</p> <ul style="list-style-type: none"> <li>• Held diversity and inclusion and '<i>bias and allyship</i>' in the workplace workshops to explore, raise awareness, share experiences, listen and learn;</li> <li>• Formed the Ethnic Diversity Working Party;</li> <li>• Shared learning across the therapies team;</li> <li>• Developed guidance on recruitment;</li> <li>• Developed and launched the Children's Therapies diversity and inclusion 'Commitments';</li> <li>• Developed and launched a black lives matters poster;</li> <li>• Redesigned a more inclusive logo for children's therapies; and</li> <li>• Piloted the Exploring your biases and Building inclusion training.</li> </ul> <p>Going forward, the SLT planned to:</p> <ul style="list-style-type: none"> <li>• Hold quarterly diversity and inclusion workshops addressing topics such as cultural awareness and safeguarding our children and families;</li> <li>• Conduct an audit of the Community SLT caseload;</li> </ul>	

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	<ul style="list-style-type: none"> <li>• Share findings across the Children's directorate; and</li> <li>• Recruit Inclusion Specialists to support interviews at band 5 and above locally.</li> </ul> <p>The Board thanked the SLT team for sharing their story and commended the notable achievement it such a short space of time. The following key points were raised and noted in discussion:</p> <ul style="list-style-type: none"> <li>• The findings from the project could be used to encourage people to go into the profession and the SLT had already attended career days at local schools. The team also planned to offer shadowing opportunities.</li> <li>• It was important to share learning across the Trust and it would be useful to record a video message from the team and circulate this in the regular all staff diversity and inclusion message from the Chairman and Chief Executive.</li> <li>• It would also be useful to encourage professional bodies to increase diversity in the profession.</li> </ul>	
<b>5.2</b>	<p><b>Questions from the public and Governors</b></p> <p>There were no questions raised. Richard Mycroft, Lead Governor highlighted the areas where the Council of Governors would find it useful to hear more about in their upcoming meetings, namely, finance, quality and culture. He also reported that a recent patient had commended the excellent service and care they received at Trust.</p>	
<b>5.3</b>	<p><b>Any other risks or issues identified</b></p> <p>There were no other risks or issues identified.</p>	
<b>5.4</b>	<p><b>Any Other Business</b></p> <p>There were no matters of any other business raised for discussion.</p>	
<b>Date of next meeting: Thursday, 28 January 2021, Microsoft Teams meetings</b>		