

**Minutes of Trust Board Part 1**  
**31<sup>st</sup> May 2023 at 10am**

Kathy Doran	Chair
Mark Tattersall	Non-Executive Director
Geoff Broadhead	Non-Executive Director
Elkan Abrahamson	Non-Executive Director
Terry Jones	Non-Executive Director
Asutosh Yagnik	Non-Executive Director
Liz Bishop	Chief Executive
Jayne Shaw	Director of Workforce & Organisational Development
Sheena Khanduri	Medical Director
Julie Gray	Chief Nurse
Joan Spencer	Chief Operating Officer
James Thomson	Director of Finance
Tom Pharaoh	Director of Strategy (non-voting)
Sarah Barr	Chief Information Officer (non-voting)

**In attendance:**

Jane Hindle	Associate Director of Corporate Governance
Anne Mason	Corporate Governance & Governor Engagement Officer
Jane Wilkinson	Lead Governor
Laura Jane Brown	Staff Governor (Nurses)
Allan Evans	Staffside
Johanna Wynne	Freedom to Speak Up Lead
Susan King	Communications Manager

**Observing**

Rupert Brereton	Healthcare Partnerships (Pfizer)
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Item No.	Standard Business
22-23	<p><b>Welcome, Introduction, Apologies &amp; Quoracy:</b></p> <p>Kathy Doran welcomed the Board members, observing Governors, members of the public and staff. Apologies were noted from Anna Rothery, who was unable to join the meeting due to technical issues.</p> <p>Kathy Doran confirmed the meeting was quorate.</p>
23-23	<p><b>Declarations of Interest</b></p> <p>There were no declarations made in relation to any of the agenda items. The Boards register of interests is published on the Trust website:  <a href="https://www.clatterbridgecc.nhs.uk/application/files/2316/8233/2399/The_Clatterbridge_Cancer_Centre_Register_of_Interests_2022-23.pdf">https://www.clatterbridgecc.nhs.uk/application/files/2316/8233/2399/The_Clatterbridge_Cancer_Centre_Register_of_Interests_2022-23.pdf</a></p>

24-23	<p><b>Minutes of Previous Meeting</b></p> <p>The minutes of the meeting held on 26<sup>th</sup> April 2023 were approved as a true and accurate record subject to the following amendments:</p> <ul style="list-style-type: none"> <li>• Geoff Broadhead to be removed as an attendee as he sent apologies</li> <li>• 13-23 the last 2 bullet points need to be re-written for clarity</li> <li>• 12-23 The numbers of staff outstanding for Immediate Life Support (ILS) and Basic Life Support (BLS) training for May 2023 to be updated to 117 BLS and 55 ILS</li> <li>• The title for BAF 1 to be changed as per the discussion– Skye Thomson/Julie Gray</li> <li>• BAF 15 – to reflect that substantial assurance has been received</li> </ul>
25-23	<p><b>Matters Arising / Action Log</b></p> <p>There were no matters arising. The Board noted that the following updates regarding the action log:</p> <p><b>P1-045-23/24 Board Assurance Framework Refresh</b></p> <p>Following comments by the Board, changes to descriptions of the BAF will go through June Trust Board with the following clarification on the BAF risk scores:</p> <p>BAF 9 – score reduced from 12 to 9 BAF 11 – score confirmed as 16 BAF 10 – no changes to the score</p>
26-23	<p><b>Cycle of Business</b></p> <p>The Board noted the Cycle of Business and that the next Trust Board meeting has moved from July 2023 to 28<sup>th</sup> June 2023.</p>
27-23	<p><b>Chair's report</b></p> <p>Liz Bishop provided the following report highlights to the Board:</p> <p><b>NHS Assembly</b></p> <p>Feedback from the successful staff engagement session held on 18 May 2023 for the NHS Assembly was sent to NHS England on 26<sup>th</sup> May 2023.</p> <p><b>The Cheshire &amp; Merseyside Acute and Specialist Trust (CMAST) Provider Collaborative</b></p> <p>CMAST are aligning approaches to the industrial action by working closely with the unions and local Trusts. Focus is on national planning for outpatients waiting for treatment for 2023/2024.</p> <p><b>Liverpool University Hospital Foundation Trust Visit</b></p> <p>David Flory, Chairman of Liverpool University Hospital Foundation Trust (LUHFT) visited The Clatterbridge Cancer Centre Liverpool site for an overview of the Trust's services. The meeting was positive and strengthens the collaborative work between the Trusts. David will be chairing the Liverpool Joint Committee and is very experienced and action focussed.</p> <p><b>Paddington Village Community Diagnostic Centre</b></p> <p>Dr Vin Diwakar Director of Transformation for NHS England, visited the new Paddington Village Community Diagnostic Site accompanied by James Thomson and Dr Diwakar's physicist colleagues. The group discussed how the networks are working together, sharing good practice, and how community diagnostic centres fit in to the Integrated Care System. Dr Diwakar noted the community spirit and supportive network and left with a good impression to feed back to NHS England.</p>

	<p><b>Freedom to Speak Up Lead</b> The new Freedom to Speak Up Lead Johanna Wynne has been appointed and Liz Bishop welcomed her to the meeting.</p> <p><b>Never Event</b> Liz Bishop informed the Board that a Never Event had occurred and an investigation is underway which will lead to full report that will be presented to a future meeting of the Quality Committee. Early indications are that no harm was caused to the patient concerned and the incident has been reported to the regulators. Liz Bishop confirmed that there were no issues relating to the Trust process.</p> <p>Kathy Doran advised the Board that other items from the Chair's Report were on the agenda under 37-23-24 Joint Committee and 36-23-24 Charitable Funds.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>noted the contents of the report.</li> </ul>
	<p><b>Our Patients</b></p>
28-23	<p><b>Patient Story</b> Julie Gray presented an overview the story, regarding a patient with a background in the healthcare sector, who has prostate cancer. The patient was very happy with the care received and was keen to ensure each person who provided care was mentioned in his story. The patient highlighted only one area of improvement around the appointment scheduling process. The Business Intelligence Team are currently working on a waiting time dashboard to improve the process to make it more streamlined. Julie Gray confirmed that patient stories are shared at the Trust Executive Group and then shared throughout the organisation.</p> <p>Geoff Broadhead commented that the story was remarkably positive and interesting to learn from patients when experiences go well.</p> <p>Kathy Doran commented that the waiting time dashboard is a really good idea which should help prevent patient frustrations. Joan Spencer agreed and mentioned that patients are sometimes worried about missing their appointment slot if they leave to get refreshments. Tom Pharaoh added that feedback from the clinical teams, is that patient experience begins from the time the patient enters the car park, therefore every aspect of their appointment is an important part of the whole experience.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>noted the contents of the report.</li> </ul>
29-23	<p><b>NED &amp; Governor Engagement Walk-Round</b> Caroline Pelham-Lane, Public Governor for Cheshire West and Chester, and Non-Executive Director, Terry Jones, took part in the May Walk-Round at The Clatterbridge Cancer Centre Wirral. They noted that staff were universally happy, and the hospital had a calm and relaxed atmosphere. Staff commented that they did not feel at a disadvantage working on site due to being rotated across all three Clatterbridge sites.</p> <p>One issue was raised regarding the consequences of the main site being situated in Liverpool relating to patients who become acutely unwell and the staff being reliant on the Northwest</p>

	<p>Ambulance service which has occasionally put additional pressure on both staff and the department. Julie Gray advised that patients are considered to be in a safe place until the Northwest Ambulance Service arrive and little can be done by the Trust to improve ambulance waiting times. A delay in Pharmacy delivery issues from Liverpool University Hospital Foundation Trust, was also highlighted however, staff are looking into alternative solutions, including collaborations with other Trusts to address this issue.</p> <p>Discussions took place with three patients who gave positive reviews with one choosing to be treated on the Wirral site despite living closer to the Christie Hospital. One issue raised was the appointment system whereby the patients feel they need to closely monitor their appointments themselves. This may be due to recent sickness and vacancies within the administrative teams however the vacancies have now been filled which should improve the issue. Another issue highlighted was the patient surveys which appear to be confusing and poorly timed. The Patient Experience Team are working closely with the Communications Team to address this issue, however, overall, the patients felt happy and hugely supported.</p> <p>Terry Jones commented that potential issues relating to equality of treatment across the sites needs to be closely monitored.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>noted the contents of the report.</b></li> </ul>
	<p><b>Our Strategy</b></p>
30-23	<p><b>Progress against the 5 Year Strategy</b></p> <p>Tom Pharaoh presented the report and highlighted the following:</p> <p><u>Be Outstanding</u></p> <ul style="list-style-type: none"> <li>• Positive Northwest Pharmaceutical Quality Assurance (NWPQA) audit of aseptic pharmacy in January 2023 – unit rated as low risk</li> <li>• Programme in place to develop cutting edge CAR-T cell therapy service for Cheshire &amp; Merseyside with a target date of Sep 2023</li> <li>• First annual report of Green Plan delivery showed positive progress</li> </ul> <p><u>Be Collaborative</u></p> <ul style="list-style-type: none"> <li>• Programme in place with programme director overseeing multiple work streams to prepare for mobilisation of Paddington CDC</li> <li>• Clatterbridge Cancer Centre is engaging in Joint Committee of Liverpool providers and site-specific subcommittee focused on joint working between The Clatterbridge Cancer Centre and Liverpool University Hospital Foundation Trust</li> <li>• Paediatric radiotherapy service transferred to Christie in March 2023</li> </ul> <p><u>Be Research Leaders</u></p> <ul style="list-style-type: none"> <li>• Success of Liverpool Experimental Cancer Medicine Centre (ECMC) renewal bid was announced in January 2023 – investment over the next 5 years</li> <li>• Seven successful bids for Clatterbridge Research Funding Scheme 2022</li> </ul> <p><u>Be Digital</u></p> <ul style="list-style-type: none"> <li>• Digital strategy has been developed and approved through Trust's governance for presentation at Trust Board of Directors in May 2023</li> <li>• Trust achieved Cyber Essentials Plus status in Dec 2022</li> </ul>

### Be Innovative

- Former Rutherford Cancer Centre has been purchased and will operate as Clatterbridge Cancer Centre-Paddington with further opportunities to be explored after the Community Diagnostic Centre opens.

### Be a Great Place to Work

- A 65% response rate achieved in 2022 from the NHS staff survey - results showed steady progress and listening events being held to inform action plans

### Current Challenges

Challenges relate to vacancies and competing priorities in key corporate services, which continue to mean limited capacity to deliver the strategy in those areas and the development of the Paddington Village Community Diagnostic Centre is complex and is in addition to business as usual.

### Key Activities

- Successfully open Paddington Community Diagnostic Centre and explore further opportunities for development of services
- Progress refurbishment/development of The Clatterbridge Cancer Centre Wirral site
- Commence CAR-T cell therapy service for patients across Cheshire and Merseyside
- Progress the workplan for collaboration between The Clatterbridge Cancer Centre Liverpool and Liverpool University Hospital Trust

Tom Pharaoh clarified that the Clinical Research Facility collaboration was omitted from the highlights; however, has been included in the body of the report and will be included in the revised edition.

Regarding the Quality Strategy, Julie Gray added that there is currently a stand in the foyer of The Clatterbridge Cancer Centre Liverpool where patients, staff and visitors can add their comments for improving quality which can be added into the strategy.

James Thomson commented that the focus is on achieving the milestones, including discussions relating to the demolition of the old Royal Liverpool Hospital, and the emergence of Integrated Care Boards, which will be incorporated into the next plan.

Elkan Abrahamson commented on the Equality Impact Assessment on the cover sheet stating that the five-year plan may have an impact in the future. Jayne Shaw advised that the Equality Impact Assessment is under review and a new assessment form is currently being trialled and referred the Board to the new Equality Impact Assessment attached to the Digital Strategy.

The Board noted the contents of the report

### **Digital Strategy**

31-23	<p>Sarah Barr introduced a PowerPoint Presentation for the new Digital Strategy covering 2023-2025 and seeks approval from the Board today</p> <p><u>Overview</u></p> <p>The digital team are committed to “Being Digital” and the mission is to harness the power of digital technology and data to transform care, improve patient outcomes and experiences. Sarah outlined the National, Regional, and The Clatterbridge Cancer Centre priorities. The team are further developing the digital infrastructure to ensure there are solid foundations that will improve digital maturity regarding electronic patient records to meet the national requirements and expand the shared care records and digital programmes in the region.</p> <p><u>How the strategy was developed</u></p> <p>In alignment with the Trusts Strategic 5-year plan, the digital team gathered multiple views from across the organisation, Integrated Care Systems, and partners within the digital team. Public engagement is aligned with Cheshire and Merseyside, and every patient facing initiative will be managed through engagement plans with the appropriate groups. Independent user-researchers were used to support the strategy from engagement with front-line services and leaders across the Trust, resulting in considered and more refined programmes, roadmaps, principles, and delivery approaches. Once drafted the strategy was reviewed and refined by staff and leaders across the services with examples to bring it to life. The strategy has been reviewed and recommended for approval by Digital Board, Trust Executive Group and Quality Committee.</p> <p><u>The Plan</u></p> <p>The Digital team have four main themes to deliver:</p> <ul style="list-style-type: none"> <li>• Digitally transform cancer services – by bringing people together to implement usable, efficient workflows through modern solutions from diagnostics to medicines</li> <li>• Empowering cancer patients and carers – by delivering care remotely, delivering information and advice through mobile apps and portals, and improving the inpatient experience</li> <li>• Empowering staff – by supporting user-friendly digital tools, delivering training programmes, improving collaboration, and developing digital champions.</li> <li>• Data-driven cancer research and innovation – by providing data platforms, advanced analytics and Artificial Intelligence, support services to plan, improve and innovate using data.</li> </ul> <p>The digital team are committed to enabling great care across the Trust and will support staff to make the most of the digital tools and to develop their knowledge to best serve colleagues and patients.</p> <p>Each of the themes has a delivery roadmap as part of the work to optimise the electronic patient record. This will be expanded and strengthened to enable the strategy to be delivered. The Digital Board will monitor the progress monthly to provide assurance to the Trust Executive Group with regular updates being brought before the Board.</p> <p>Sarah Barr confirmed that the plan aligns with the capital plan for the year, with the next key issue being the challenge of the Electronic Patient Record convergence, however workshops are taking place across Liverpool to address to the national funding challenge.</p> <p>Mark Tattersall asked if interdependencies will have an effect on the plan. Sarah Barr replied that the team are aware of the interdependencies and are working closely with the Transformation</p>
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	<p>Team to align with the 5-year strategy, and a Business Intelligence Dashboard will be developed to inform services and outcomes which will lead to an update to the annual strategy.</p> <p>Jane Hindle advised the Board that a new Equality Impact Assessment (EIA) has been created using models from other organisations, in liaison with the Equality Diversity and Inclusion Lead, and has been completed for the Digital Strategy. Sarah Barr commented that the EIA demonstrated the engagement that had taken place throughout the development of the Strategy and the tool was more intuitive than the previous version.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>commended Sarah Barr on the clarity of the presentation and</b></li> <li>• <b>approved the Digital Strategy.</b></li> </ul>
	<b>Our Performance</b>
32-23	<p><b>Performance Committee Chairs Report</b></p> <p>Geoff Broadhead presented the Performance Committee Chairs Report noting the following:</p> <p>There was a lengthy discussion regarding the Board Assurance Framework (BAF) and alignment with the Key Performance Indicators. The Committee went on to discuss risk 361, Southeast corner, which can now be reduced in score following successful conversations with the Council. The Committee proposed closing the risk as the short-term issues have now been resolved and creating a new risk detailing the longer-term issues relating to the old Royal Liverpool University Hospital site.</p> <p>The Integrated Performance Report highlighted delays with molecular testing turnaround times; however, the Committee were assured that is being monitored through the Trust Operational Group.</p> <p>The Committee noted a theme arising around capacity and has requested a deep dive report to be presented at the next Committee meeting.</p> <p>The Committee received an overview of the final approved financial plan for 2023/24. The Committee noted the Trust has increased the score of BAF risk 3, associated with financial delivery, from 9 (3x3) to 12 (4x3). The Trust has a high level of Cost Improvement Programme (CIP) to achieve in order to deliver the overall financial plan which will be challenging.</p> <p>The Committee commented on the excellent Green Plan Assurance Report.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>noted the contents of the report</b></li> </ul>
33-23	<p><b>Integrated Performance Report</b></p> <p>Each Executive Lead provided brief highlights from the Statistical Process Chart (SPC) and exception reporting for the following areas:</p> <p><u>Access and Efficiency</u></p> <p>Joan Spencer informed the Board that excellent progress had been made in the past month with a successful recruitment plan put in place incorporating a talent pool for essential roles within the Trust. Service Review Groups are working with the Transformation and Improvement Committee which is helping with planning and investment. The team continue to work on the Trust's Outpatient strategy to expand Patient Initiated Follow Up and Patient Stratified Follow Up, which should create further capacity.</p>

The transfer of the laboratory service provision on 1st April 2023 has resulted in much longer molecular test turnaround times. This is having a significant negative impact on the Trust's ability to achieve this target from April 2023 and the 62-day target from May 2023. This is on the risk register and the Trust is reviewing solutions to resolve the issue as quickly as possible.

Weekly 'Lengthened Length of Stay' meetings have continued with attendance of Matron and the Business Services Manager to ensure the flow of patients continues, and any concerns can be escalated. The outcome of these meetings is forwarded to the General Manager for review.

#### Quality

Julie Gray advised the Board that the Serious Incident declared in April relates to an extravasation from a cannular and will be reviewed by a clinical panel in June, where it will be determined whether the incident is classed as a Serious Incident or stood down.

The Trust continues to have a low number of complaints which is due to early face to face resolution meetings, however there are two complaints that have not met the target dates, but revised targets have both been agreed with the patients and their families.

The target for policies has not been achieved with 24 of the 259 policies yet to be reviewed. 10 documents await approval via meetings and committees, which will take place over the next month and 4 await sign off. Work is being carried out by the Associate Director of Clinical Governance and the Information Governance Manager to investigate how the process can be streamlined to ensure policies are reviewed in a timely manner.

#### Research and Innovation

Sheena Khanduri advised that there were 62 patients recruited at the end of month 1 against an internal annual target of 1500 (50% of target). Of the 62 patients recruited, 12 were recruited onto interventional studies, 39 onto observational and 11 into the Biobank. The majority of the studies currently in set-up are complex, supporting the Biomedical Research Centre (BRC), and Experimental Cancer Medicine Centre strands of the research portfolio. A clinical trial capacity gap analysis paper is being written with wide consultation with an anticipated review at June 2023 Trust Executive Group.

Regular operational meetings are taking place with the Clinical Trial Pharmacy and Research and Innovation teams to progress/open new drug studies. A recovery plan is in place with Pharmacy monitored through the Research and Innovation Directorate Board. Studies opened are currently capped by Pharmacy staffing capacity, which is due to improve from June 2023 onwards.

Liz Bishop confirmed that there were 27 recommendations following the Lord O'Shaughnessy review into clinical trials which will result in a defined approach to increase trials across the region and nationally.

#### Workforce

Jayne Shaw explained that sickness absence has decreased from 4.82% in March to 4.58% in April. This remains above the Trust target of 4% and compares well against the Cheshire and Merseyside figures. The Learning and Development Team have an action plan regarding long-term and short-term sickness which will be monitored through the Workforce Advisory Group.

The Trust turnover has decreased in April from 16% in to 14.93% and although above the Trust target, is the lowest since March 2021. This includes all leavers from the Trust, regardless of



	<p>reason for leaving. Leavers due to retirement and end of fixed term contracts (FTC) were removed from the list of leavers up until the end of April 2023, which takes the Trust below target.</p> <p>Intermediate and Basic Life Support Mandatory Training remains below target and letters are being sent out on 5<sup>th</sup> June 2023 to individuals who are non-compliant.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>noted the contents of the report.</li> </ul>
34-23	<p><b>Finance Report</b></p> <p>James Thomson provided an overview of the finance report and highlighted the following:</p> <p>The Trust financial position to the end of April is a £67k deficit, which is £97k below plan. The group position at the end of April is a £31k surplus, £1k above plan.</p> <p>Cost and Volume drugs are underspent by £285k and this is offset by a reduction to income.</p> <p>Bank spend is £155k in month due to the number of patients requiring one to one care on the inpatient wards, escalation beds remaining open and bank payments to cover the junior doctor strike.</p> <p>Non pay spend is overspent by £390k, of which £330k relates to unmet CIP for month 1. The CIP plan profile is in twelfths, however, CIP achievement is expected to increase incrementally during the year.</p> <p>The Trust cash position has a closing balance of £63.1m, which while below plan by £2.4m is a healthy cash position and does not raise any concern. Capital spend is £77k in month with the majority of spend profiled in future months.</p> <p>The Trust put an agency plan forward as part of the planning submission based on previous year spend, which it will be monitored against for the 2023/24 financial year. In month 1 agency spend is below plan by £53k</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>noted the contents of the Report</li> </ul>
	<b>Our Governance</b>
35-23	<p><b>Extra-ordinary Audit Committee</b></p> <p>Mark Tattersall advised the Board that the focus of the Committee has been on the 2022/23 Annual Reports and Accounts. The report evidenced the basis for the assessment and the Committee endorsed the Going Concern Assessment and can meet its financial obligations during 2023/24.</p> <p>The Committee reviewed the updated Significant Accounting Estimates regarding valuation of the property plan and equipment, the annual depreciation, and provision for Research and Innovation Strategy support.</p> <p>The year-end audit work is underway and is on track to be completed on time. Discussions are on-going with the Trust on several points but there is currently nothing of significance to raise to the Audit Committee.</p>

	<p>The Committee reviewed the draft Annual Report, including the Annual Governance Statement (AGS). It was noted that the revised draft had addressed the recommendations identified by the Head of Internal Audit in relation to the content of the AGS. The Committee also noted the final version of the AGS would need to reflect the Head of Internal Audit Opinion, which had previously been reported to the Committee, together with updated information relating to the Internal Audit reviews that had been completed since the initial draft.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>noted the contents of the report</b></li> </ul>
36-23	<p><b>Charitable Funds</b></p> <p>Elkan Abrahamson informed the Board that approval is to be sought regarding the Charity Asset Transfer agreement, Data Transfer agreement and Services agreement.</p> <p>The Charity raised £3,409,623 income which is 4% increase on the previous year.</p> <p>The new Charity is registered with the Charity Commission and Companies House, and the model of The Clatterbridge Cancer Centre made out of Lego is now installed in the foyer of the Liverpool site.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>noted the contents of the Report</b></li> </ul>
37-23	<p><b>Joint Committee – Liverpool University Hospital Foundation Trust (LUHFT) and Clatterbridge Cancer Centre (CCC) Chair's Reports including Terms of Reference.</b></p> <p>Kathy Doran advised the Board that a meeting took place between LUHFT and CCC on 21<sup>st</sup> April 2023 involving representatives from both Trusts. The revised Joint Committee Terms of Reference are in line with The Walton Centre and Liverpool Heart and Chest's respective Joint Committees.</p> <p>The Terms of Reference were approved at the meeting with a recommendation to be approved at both LUHFT and CCC Board of Directors.</p> <p>The Joint Committee Work Plan includes the following workstreams:</p> <ul style="list-style-type: none"> <li>• Emergency Pathways</li> <li>• Radiology</li> <li>• Pharmacy</li> <li>• Service Level Agreement Management</li> <li>• Workforce and Education</li> <li>• Estates</li> </ul> <p>The work streams have CCC leads, and the Committee agreed to share organograms to support the identification of LUHFT work stream leads.</p> <p>There will be a Joint Partnership Group which will report into the Joint Committee with the first meeting to be held in May. Terms of Reference for the Joint Partnership Group were approved subject to the inclusion of workforce and education, in the specific areas of work and membership.</p> <p>It is envisaged that the Joint Partnership Group and Joint Committee will meet on an alternate bi-monthly basis.</p>

	<p>The next Joint Committee will take place on 9<sup>th</sup> June 2023 and will report to the Liverpool Joint Committee chaired by David Flory (Chairman of LUHFT) on the 16<sup>th</sup> June 2023.</p> <p><b>The Board:</b></p> <ul style="list-style-type: none"> <li>• <b>noted the contents of the report and</b></li> <li>• <b>approved the Terms of Reference for the Joint Committee.</b></li> </ul>
38-23	<p><b>Actions from Board Development</b></p> <p>The Board recognises that understanding Equality, Diversity and Inclusion improves communication, supports staff to build better relationships and therefore feel more valued; and enhances the experience of patients.</p> <p>The following actions will be progressed through the People Committee:</p> <ol style="list-style-type: none"> <li>A review of the external resources available to Staff and a reflection of these via internal Leadership materials</li> <li>Review current Committee reporting to ensure that it provides an appropriate level of data in terms of the diversity of staff and the population</li> <li>Review the Equality Impact Assessment Tool and training to ensure that it supports staff in decision making.</li> </ol> <p>The Board noted that the use of the term “Equity” had been discussed as a better way of describing and recognising the needs of individuals however, recognised that the use of “Equality” is linked to the legal duty defined within the Equality Act 2010.</p>
	<b>Items for Inclusion on the Board Assurance Framework</b>
39-23	There were no items for inclusion for the Board Assurance Framework
	<b>Questions from Governors and members of the public</b>
40-23	<p>Jane Wilkinson asked if the Trust’s research trials figures are echoed by other Trusts</p> <p>Sheena Khanduri confirmed that the figures are in line with other organisations and reflect the impact of the Covid pandemic and there are no specific themes identified.</p>
	<b>Any Other Business</b>
41-23	No other Business was discussed
	<b>Reflections on the Meeting</b>
42-23	The Board reiterated that the Digital Strategy was an excellent document and was both succinct and extremely helpful.
	<b>Date and time of next meeting: 28<sup>th</sup> June 2023, 09:30am till 12:30pm, The Spine Level 12</b>