



## Minutes of the Council of Governors Public Meeting

Tuesday 18 May 2021 – 14:00 – 16:00 hours

Via MS Teams LIVE

Present:

Rob Hughes	Chairman
Caroline Walker	Chief Executive Officer
Ray Harding	Non-Executive Director
Mark Sanderson	Non-Executive Director
Mike Ellwood	Non-Executive Director
Christine Hill	Non-Executive Director
Mary Dowglass	Non-Executive Director
Bev Shears	Non-Executive Director
Gareth Tipton	Non-Executive Director
Taff Gidi	Company Secretary
Paul Denton	Deputy Company Secretary
Junaid Bhatti	Greater Peterborough
David Evans	Public Governor - Greater Peterborough
Kevin Burdett	Lead Governor - Huntingdonshire
Rob Gardiner	Public Governor - Huntingdonshire
Kenneth Leafe	Public Governor - Huntingdonshire
Amanda Buckenham	Public Governor - Huntingdonshire
Zbys Fedorowicz	Public Governor - Huntingdonshire
Duncan Lawson	Public Governor - South Lincs & Stamford
Rebecca Neno	Partner Governor - South Lincs CCG
Sue Prior	Public Governor - South Lincs & Stamford
Steve Reiss	Public Governor - South Lincs & Stamford
Roberta Roulstone	Public Governor - South Lincs & Stamford
Rebecca Wade	Public Governor - Greater Peterborough
Bernard Weiss	Public Governor - Greater Peterborough
Joe Wey	Public Governor - South Lincs & Stamford
Asif Mahmood	Staff Governor - Peterborough
Keith Reynolds	Assistant Director of Strategy & Planning
Janice Thompson	Executive Assistant to Company Secretary & Minute Taker

Apologies:

Bob Mason	Public Governor - Huntingdonshire
Nik Johnson	Staff Governor - Hinchbrook

## **1.0 Welcome, Apologies for Absence & any Declarations of Interest**

Apologies were received from Bob Mason and Nik Johnson.

## **2.0 Minutes from the meeting held on 16 March 2021 – for approval**

The Minutes were approved.

## **3.0 Action Tracker – for review**

The Action Tracker was updated.

# Trust Overview

## **4.0 Chairman Update – for information**

- 4.1 Rob Hughes emphasised the very challenging period for the Trust however noted the encouraging news of the number of patients with Covid-19 decreasing. He noted this had allowed the Trust to reintroduce more elective procedures, critical to addressing the build-up of waiting lists during the pandemic.
- 4.2 Rob Hughes advised the Trust was progressing cautiously, with meetings continuing to be held virtually until further notice. He advised both Patient and Staff Stories were being introduced for the Governors to gain an insight into how the Trust was providing care on the wards, and these would be presented at the Council of Governors meetings going forward.
- 4.3 Regarding the Integrated Care System (ICS), Rob Hughes confirmed that further guidance was still awaited from the Government. He assured whilst the Trust was not part of the Lincolnshire ICS both Caroline Walker and he had good links with the Chair and Accountable officer to ensure patients residing in the South Lincolnshire areas were recognised in future plans. Rob Hughes confirmed that Cambridgeshire and Lincolnshire ICS would have statutory responsibilities from 1 April 2022.
- 4.4 Updates would be provided on the ICS for the Governors and Rob Hughes also advised that members of the public can attend the ICS Board meetings in public. The next meeting would take place on 19 May 2021. Rob Hughes provided a link for Governors to join this meeting in his report.
- 4.5 A new Non-Executive Director, Carmel O'Brien, would be joining the Trust in June 2021, Rob Hughes advised, after the usual checks. He noted this had been approved by the Governors. Rob Hughes advised Carmel O'Brien would be joining the Trust from the Queen Elizabeth

Hospital in King's Lynn and had considerable nursing leadership experience including Midwifery within Providers and Commissioners.

4.6 Alongside this, a new role of trainee Non-Executive Director (NEX Director) had been supported by the Governors. This had been offered to Tariro Matango who would be in training for a 12 month period, Rob Hughes explained, with Bev Shears acting as Tariro Matango's mentor during this time. Rob Hughes clarified this would be a non-voting role as a member of the Trust Board. Rob Hughes advised the NEX Director scheme was supported by NHS Improvement and added that Tariro Matango's background and experience would also add diversity to the Trust Board.

4.7 Rob Hughes offered congratulations to Staff Governor and Paediatrician at Hinchingsbrooke Hospital, Nik Johnson, on his success at being elected Mayor for Cambridgeshire and Peterborough.

## **5.0 Chief Executive Officer Update – for information**

5.1 Caroline Walker gave a verbal update, noting the Covid-19 numbers thankfully remained very low with just 7 Covid-19 patients currently in the Trust, 4 at Peterborough City Hospital and 3 at Hinchingsbrooke Hospital. She noted the peak had taken longer than expected to come down.

5.2 The hospitals remained very busy, Caroline Walker advised, with high occupancy.

5.3 Caroline Walker explained the difficulty in the arrangement of waiting rooms because of social distancing. She advised these were being reintroduced in a phased way and noted the Trust was seeing more activity, with the positive news of visitors being able to see their loved ones.

5.4 Caroline Walker emphasised that with staff recovering from the Covid-19 experience, a gradual introduction of patients into the Trust was important.

5.5 NHS Planning Guidance for the first half of the year, Caroline Walker advised, had guided the Board to agree a firm plan. This would focus on taking forward strategic projects and redevelopment plans.

5.6 Caroline Walker reported the high level of activity at all hospital sites during the last two weeks as had been experienced by the whole of the NHS nationally. She noted increased numbers of patients contacting GP Surgeries and calling 111. She advised the importance of developing methods to cope with increased demands being currently devised with the Trust's system partners. Caroline Walker noted the large strategic project involved in moving the Urgent Treatment Centre to Peterborough City Hospital.

- 5.7 To summarise, Caroline Walker noted the increased pressure on the NHS currently with significant pressure on urgent care. She added the waiting list reduction remained a priority and assured all was being done to address these issues.
- 5.8 Sue Prior asked if the plans to accelerate the Minor Illness and Injury Unit at Stamford were being brought forward to assist in coping with the increased pressures.
- 5.9 Caroline Walker said no plans to bring this forward were being looked at, noting the pride taken in the Stamford site remaining at Green status (free from Covid-19). She added if walk-in patients were introduced this would present significant risk to the site in losing the Green status. Caroline Walker confirmed the Trust was committed to re-opening the Unit in June or July however with the land sale and access routes this would need careful planning. She added the numbers had shown only 8 or 9 patients a day from Stamford had been presenting at Peterborough City Hospital, with only 5 or 6 patients a day during the peak of Covid-19. She noted the challenge of safely re-opening the Unit in June.
- 5.10 Sue Prior thanked Caroline Walker for the very clear statement.
- 5.11 Sue Prior asked if the Governors could have an action on Lite Governance to share ideas on assurance from the Non-Executive Directors. Rob Hughes confirmed that all Board sub-committee meetings were fully operational but virtual and he would be happy to support a proposal from Sue for discussion at the Private Governors meeting on how further assurance in addition to the Board sub-committee meetings.
- Action: Sue Prior to bring proposals on assurance ideas for discussion at the Private Governor meeting on 22 June.***
- 5.12 Cllr Wayne Fitzgerald asked Caroline Walker for the timetable of the move from Thorpe Road to the main site, advising he had been asked this question by a member of the public.
- 5.13 Caroline Walker advised this switchover would take place at midnight on 30 June 2021, with walk-ins being welcomed on 1 July 2021. She confirmed the Unit was currently being refurbished.
- 5.14 Plans for the City Care Centre had not yet been confirmed, Caroline Walker explained, however as part of the ICS this site would be utilised due to the excellent location, possibly though not decided yet, as a diagnostic centre.
- 5.15 Rob Hughes assured the plans for the utilisation of the City Care Centre would be communicated extensively.

## **6.0 2021/22 Annual Plan**

- 6.1 Keith Reynolds presented the annual plan slides and invited questions.
- 6.2 Caroline Walker advised the finances behind the annual plan were similar to the previous year, with a financial envelope for the Peterborough & Cambridgeshire finance system. She advised the expectation was for this to be confirmed during the next quarter. She added that the whole of the NHS had only received budgets for the first half of the year.
- 6.3 Sue Prior asked Keith Reynolds if the Governors were required to comment on the Executive Summary. Keith Reynolds confirmed the full plan would go before the Board of Directors at which point the Chairman would advise further action for the Governors.
- 6.4 Rob Hughes confirmed the slides from the plan could be shared.
- Action: Keith Reynolds to distribute slides to the Governors.**
- 6.5 Sue Prior commented on the use of the word 'staff sustainability' which did not reflect innovation and ideas that were passed up through the staff. She asked if the wording could be built up to help with the culture.
- 6.6 Caroline Walker agreed this was a valid point, with the aim to celebrate and support staff.
- 6.7 Sue Prior noted the importance of the Trust on committing to fully support staff and also acknowledged the good work carried out on risk by Paul Denton.

## Assurance

### **7.0 Quality Assurance Committee**

- 7.1 Rob Hughes reported the change in the template for the Board Assurance Reports which would be used in future.
- 7.2 Mark Sanderson noted the key issues being around mortality rate statistics which remained significantly high, increasing from 111.8 to 116.5 at Peterborough City Hospital and with the Hinchingsbrooke Hospital rate being 99.4 in the 'expected' range and slightly improved. He noted the high figures compared to other Trusts, and explained this was thought to be down to coding, confirming changing to the coding system have now gone ahead at Hinchingsbrooke and were in place to be actioned at Peterborough. He assured the Chief Medical Officer and the Board would be reviewing this before the next CQC visit.

- 7.3 Mark Sanderson confirmed the staffing report is currently presented to the People & Culture Committee on alternative months and the Quality Assurance Committee on a monthly basis and noted this split assurance arrangement would be reviewed after two months.
- 7.4 Pressure ulcers remained high at 4.3 per 1000 bed days but had been decreasing for three months, Mark Sanderson reported.
- 7.5 Mark Sanderson noted the high performance metrics in QAC and sepsis, with being focussed on to maintain consistency throughout the Trust.
- 7.6 The Quality Account for 2020/21 had been reviewed by the Committee, Mark Sanderson reported, and found to be an excellent document highlighting many good areas in the Trust. He noted the actions and priorities from the Dementia Report for Q3/Q4 2020/21 and the assurance provided for the screening levels.
- 7.7 Finally Mark Sanderson confirmed the NWAngliaFT Research & Development report for Q3/Q4 2020/21 had been received, noting the focus on the delivery of urgent public health studies, including the delivery of the Novovax vaccine trial.
- 7.8 Mark Sanderson asked the Governor Observer for the Committee, Amanda Buckenham for her comments. Amanda Buckenham advised the meeting had been both enjoyable and highly informative into the business of the Trust with all Committee members conducting themselves very well and asking fair and relevant questions.
- 7.9 Sue Prior asked if the Patient Partner Voice would rejoin the QAC for additional input . Mark Sanderson confirmed he had met with Jo Bennis to confirm this and currently a volunteer was being sought to represent the Patient Partner Voice.

### **Finance & Digital Committee**

- 7.10 Ray Harding confirmed the Draft Budget had been supported and recommended to the Board for 2021/22, incorporating a First Half Deficit of £6.0m and a full year expenditure of £548m.
- 7.11 The Capital Budget, Ray Harding confirmed, had been agreed with both the Region and ICS at £36.6m and had included specific items at Hinchingsbrooke totalling £20.4m and had been supported by the Committee.
- 7.12 Ray Harding noted the financial performance for the year was break-even, and confirmed the Cost Improvement Plan (CIP) target had been met for the year. He advised the 2021/22 CIP Programme would be presented in May.

- 7.13 The Covid Swabbing Service at Peterborough City Hospital and Hinchingsbrooke Hospital had received an investment appraisal of £365K from the committee for the first six months, Ray Harding confirmed.
- 7.14 Ray Harding confirmed the Digital Year End Report had been reviewed by the Committee and the Terms of Reference agreed for the Digital Steering Group.
- 7.15 Risks were planned for detailed review at the May meeting, Ray Harding advised.
- 7.16 Ray Harding noted the positive news of the second year in succession of the Trust breaking even, in excess of budgets.
- 7.17 Ray Harding offered thanks to the Finance Team for their efforts and clarity of reporting and forecasting and also mentioned the commendable IT resilience during the pandemic.
- 7.18 Duncan Lawson, the Committee Observers was invited to offer comments. Duncan Lawson advised he had been impressed by the competence of the committee with the meeting being conducted in an exemplary fashion with relevant questions and reassuring answers. On behalf of all the Governors, Duncan Lawson gave his congratulations to the Finance Team and the Trust as a whole on a second year of break even, which he noted was an exceptional outcome in spite of all the difficulties faced by the pandemic.

### **Performance & Estates Committee**

- 7.19 Gareth Tipton confirmed assurance had been received on the Stamford land sale progress however noted the Committee retained a light-touch oversight given the importance of the project.
- 7.20 Gareth Tipton noted the positivity in the Key Performance Indicators (KPI's) being met for Time, Cost and Quality at Hinchingsbrooke Hospital Phase1. He confirmed the Committee had been asked to carry out a deep dive on the H1 plan at the next meeting.
- 7.21 Gareth Tipton announced discussions were planned regarding Hinchingsbrooke Hospital Phase 2 relating to the theatres with NHSEI regional teams in May. He noted this would consider the potential of an early start on the site. He assured the Committee would monitor this progress.
- 7.22 On Hinchingsbrooke Hospital Phase 3, relating to the site redevelopment, Gareth Tipton advised, this was currently being discussed at Executive level and with NHSEI to determine a way forward.
- 7.23 Regarding the Urgent Treatment Centre (UTC), Gareth Tipton confirmed the final report on the design and construction had been received. He

assured the Committee would be seeking regular updates on the project given the complexity and importance.

- 7.24 The Cath Lab refurbishment work had commenced Gareth Tipton reported, with a mobile unit installed on site.
- 7.25 Following the Health & Safety Executive inspection of the Health Records Archive Document Storage area a review had been carried out on the ventilation at all three sites, with refurbishment currently going out to tender, Gareth Tipton reported.
- 7.26 Gareth Tipton gave updates on the RAAC Failsafe and the Operational Performance Reports and highlighted the key areas of interest.
- 7.27 Gareth Tipton gave an update on the UTC relocation and noted the Committee had received a detailed presentation on the Restoration and Recovery Plan and Profile for H1 21/22 with a baseline position developed through a bottom up approach. He noted the challenges for delivery and assured the Committee would receive monthly updates during this time.
- 7.28 Gareth Tipton confirmed the Estates and Operational risk registers and related Board Assurance Framework had been reviewed, with risk workshops to review and update the risks.
- 7.29 Sue Prior, the Governor Observer offered feedback, noting the Committee meeting had been excellent in offering reassurance on the topics involved.

### **People & Culture Committee**

- 7.30 Bev Shears reminded the Governors the Committee was held on a bi-monthly basis and that the report provided today was the one that went before the Public Board.
- 7.31 The Committee had received the Trust's response to the Health & Safety Executive Contravention notice dated 1 March 2021 relating to the two staff Covid-19 deaths in December 2020, Bev Shears advised. She confirmed a Task & Finish Group had been set up to ensure robust plans were in place, along with involving the National Audit in the smart delivery of an action plan. Bev Shears assured the recommendations from the HSE would be integrated along with providing a comprehensive response to the audit.
- 7.32 Bev Sears noted the Staff Survey 2020 highlighted the need for different engagement models and leadership approaches. She confirmed the Committee endorsed a more strategic approach informed by current and emerging people risk and metrics.

- 7.33 The Trust maintained a strong performance compared to the national standard in relation to National Workforce Race Equality Standards, Bev Shears reported. She assured this excellent work would continue.
- 7.34 Bev Shears noted the Committee was assured on the work that had taken place on the Non-Medical Workforce aspect on the agility, flexibility and responsiveness of staffing.
- 7.35 The medical workforce job planning had introduced remote working the Committee had noted, Bev Shears reported. She noted the disappointment regarding the Deanery reallocating anaesthetic trainees affecting location of training and noted the ongoing projects including packages for overseas doctors in specialities experiencing shortages.
- 7.36 The Trust had applied to become an Associated Teaching Hospital of the University of Leicester, Bev Shears announced.
- 7.37 Regarding risks, Bev Shears confirmed the Committee had identified risks that were longstanding and requested these be included in the current work to ensure these were articulated accurately and historical risk closed out and removed. She noted the emerging risks around staffing levels and the fatigue, stress and anxiety experienced by staff.
- 7.38 Finally, Bev Shears noted the endorsement of the Equality Diversity & Inclusion Strategy for Board approval. She noted the work carried out on this was comprehensive, coherent and high quality, highlighting the strong link between staff, services and patients.
- 7.39 Rebecca Wade, the Governor Observer was invited to comment. She advised it had been very positive to see the triangulation of data and found the meeting comprehensive and highly relevant.

### **Audit Committee**

- 7.40 Mike Ellwood presented the Board Subcommittee Assurance Report noting the review of Losses & Special payments. He advised the Draft Risk Policy had been discussed and recommended for Board Approval.
- 7.41 The Annual Report and Accounts 2020/21 timetable process had been discussed and agreed by the Committee, Mike Ellwood confirmed.
- 7.42 Mike Ellwood advised the internal audit progress report had been reviewed with actions arising, and confirmed the Fraud, Bribery and Corruption report had been scrutinised along with the Local Counter Fraud report.
- 7.43 Debate had been given on the Gifts and Hospitality policy, Mike Ellwood detailed.

- 7.44 Mike Ellwood confirmed risks at all levels had been reviewed with appropriate actions implemented. He noted risk training had been re-established with bespoke training in place on a priority basis. Mike Ellwood gave his thanks to Jo Bennis, Paul Denton and Taff Gidi in putting the risk training together.

### **Strategy & Transformation Committee**

- 7.45 Rob Hughes noted the Estates team had been reviewing delivery which was a considerable piece of work with methods of communicating the works to the local population being discussed.
- 7.46 Rob Hughes confirmed Hinchingsbrooke Hospital phase 1 was about fixing the roof therefore this was part of the Estates Committee, and now the focus was on a full business case to assist with the funding of the various projects.
- 7.47 The Stamford Hospital sale delay had been discussed, Rob Hughes confirmed, along with the impact on the building of the car park and Minor Injuries Unit.
- 7.48 Rob Hughes confirmed the outline business case for Hinchingsbrooke Hospital new theatres, Phase 2, had been approved by NHSE/I.
- 7.49 Phase 3, the rebuilding of Hinchingsbrooke Hospital, Rob Hughes noted, had been supported by the Committee to develop a compelling case to bid for funds from the next round of NHS funding.
- 7.50 Transformation Topics would be focussed on at the next meeting, Rob Hughes confirmed.
- 7.51 Rob Hughes referenced the risks associated with the Transformation Programme, the delivery of STP priorities through the Northern Alliance and the Hinchingsbrooke phase 2 full business case partial assurance.
- 7.52 Finally, Rob Hughes highlighted the major achievement of the approval of Hinchingsbrooke phase 2 along with the Place based care being implemented through the Northern Alliance including the role played by the Alliance during Covid-19 and the impressive collaboration between primary, community and secondary care.
- 7.53 Kevin Burdett, the Governor Observer for the Strategy & Transformation Committee, advised the information provided by the Committee was highly relevant and informative.

## **8.0 Patient Story**

- 8.1 Laura Stent presented the Patient Story, highlighting the success of the alternative methods of communication which had enabled patients and their families to keep in touch during Covid-19. Named JABBA, this had

created close links with wards and family members, with 1119 calls to date.

- 8.2 Amanda Buckenham shared her experience of the breakdown in communication between ambulance and staff during a recent hospital admission of a family member.
- 8.3 Rob Hughes thanked Amanda Buckenham for sharing her experience.
- 8.4 Laura Stent explained the rules of next-of-kin and how these could impact on communication when the details had not been updated. She spoke of the importance of checking these details on patient admission.
- 8.5 Rob Hughes thanked Laura Stent for the comprehensive and interesting presentation.

## Governance

### **9.0 Lead Governor Update**

- 9.1 Kevin Burdett thanked Sue Prior for her assistance with the Quality Account.
- 9.2 Kevin Burdett confirmed the slide presentation from Mike More had been distributed to the Governors.
- 9.3 Regular contact with Partner Governors ensured how accountability was progressed, Kevin Burdett assured, and how focus was maintained on communication with the public.
- 9.4 Kevin Burdett confirmed his forthcoming meeting with Regional Lead Governors on 1 June 2021 at which he would have the opportunity to hear about the progress in other Trusts. Kevin Burdett confirmed his continued meetings with Rob Hughes and Paul Denton, in particular relating to Agenda Planning.
- 9.5 The Governors Self-Assessment process was continuing, Kevin Burdett confirmed, with the prospect of this being sent out shortly.
- 9.6 Kevin Burdett confirmed the Chairman appraisal process was beginning with both Gareth Tipton and himself to carry out the appraisal.
- 9.7 Kevin Burdett gave his congratulations to Nik Johnson on his appointment as Mayor of Cambridgeshire & Peterborough.

### **10.0 Appointment of the Deputy Lead Governor**

- 10.1 Rob Hughes advised that Rob Gardiner, Public Governor for Huntingdonshire constituency had put his name forward for the role of Deputy Lead Governor and his nomination was uncontested.
- 10.2 Rob asked the Governors for support. The nomination for Rob Gardiner was fully supported by the Governors.

### **11.0 Membership Engagement Committee**

- 11.1 Amanda Buckenham thanked the Committee Members for their input into what had been a productive meeting.
- 11.2 The Terms of Reference had been agreed, Amanda Buckenham confirmed.
- 11.3 Amanda Buckenham advised an update on the Membership Engagement Strategy had been provided at the meeting by Mandy Ward, Head of Communications with plans for meetings going forward.
- 11.4 Rob Hughes confirmed the next three meetings would take place with one on each site.
- 11.5 Roberta Roulstone noted the excellent Chairing of the meeting by Amanda Buckenham with good discussion encouraged especially on increasing diversity.
- 11.6 Rob Hughes notified the Governors of a review into the Trust's Communications Strategy by an outside agency to look at how Communications could be improved working on a variety of angles.

### **12.0 AOB**

- 12.1 Cllr Wayne Fitzgerald announced this would regrettably be his last Council of Governors meeting due to another role he had taken on which was due to be ratified shortly. He confirmed he would advise the details of his replacement as Partner Governor for Peterborough City Council.
- 12.2 Rob Hughes thanked Cllr Wayne Fitzgerald for his contribution to the Council of Governors and wished him success in his new role.

### **13.0 Questions Received from the Public**

#### **13.1 Bill Proudlock, Stamford:**

*“Given that the new NHS guidance is focussed on collaborative working, how can we be assured that the two ICS proposals are relevant to Stamford/South Lincs will meet the needs of that community? In particular, how can we be assured that the Stamford Hospital site will be developed for the needs of the community not and not simply for the benefit of the NWA Trust budget?”*

*The consultation on the ICS proposals was very broad brush and to quote Alan Bennett has a lot of 'vague promises of better things to come'. When will the proposals be published and will we be presented with a 'fait accompli' or will there be meaningful consultation before implementation?"*

- 13.2 Caroline Walker acknowledged this was a good question with many parts. She confirmed the Stamford site would continue to be developed as required in order to provide the requirements to meet the strategy. Caroline Walker confirmed Kanchan Rege had appointed a clinical lead to review this strategy. She added the plans to replace theatres, the sale of excess land etc had a long-term future within North West Anglia NHS Foundation Trust. Regarding the question about the Trust budget vs the needs of the Stamford/South Lincs community needs, Caroline Walker assured all decisions are with patient needs and requirements regarded as a top priority.

Caroline Walker confirmed any changes made in Stamford/South Lincs are consulted with changes being made for the benefit of the region.

- 13.3 **Cllr Roy Gerstner, Whittlesey Town Council:**

*"What is the waiting time and how many people are waiting for routine operations, such as orthopaedic knee or other joint replacements?"*

- 13.4 Caroline Walker referred to the waiting times discussed during the meeting. She confirmed waiting times had risen due to the inability to treat non-urgent patients throughout the pandemic. Caroline Walker confirmed the current waiting time as 24 weeks with 3800 patients waiting time over 52 weeks.

Caroline Walker confirmed the Trust had prioritised all of the patients on waiting lists into six categories, she confirmed orthopaedics as being one of the categories which was usually not priority resulting in many patients on the waiting list. She confirmed the Trust was treating patients in clinical priority as opposed to waiting times and the Trust were 'harm reviewing' patients to identify those with the most urgent need.

The overall picture was complex, Caroline Walker agreed, with waiting lists longer than ideal, however confirmed any patients with life-threatening conditions were being treated.

- 13.5 **Peter J Wilson:**

*"I have read that some staff will be sacked in August, this year, because they will not be able to get the training that is required, because of the backlog. In view of the very hard work they have carried out in a very trying year is it not possible to:*

- *Delay the training until it is possible to carry it out?*

- *Ask their Line Managers to vouch for their ability to carry out their job?*
- *Can we afford to lose good staff, just so we can tick a box?*

*As I see it the Trust will need all the medical staff available, to enable them to catch up with the backlog of patients. Surely it is better, and cheaper, to keep the staff we have, who know how the Trust and team work?"*

13.6 Caroline Walker admitted to not understanding entirely what is behind this question and needed more specifics. She confirmed the Trust has no plans to make anyone redundant.

Caroline Walker confirmed training had paused, especially face-to-face training as some training could not be carried out digitally.

She asked if the question was behind a recent National press announcement relating to aesthetic trainees. Caroline Walker confirmed training was halted as a result of risk assessment, and advised work was currently being carried out with Anglia Ruskin University to bring staff into place to complete their training.

Rob Hughes closed the meeting at 15:56 hours

Next Council of Governors Public Meeting:

Tuesday 17 August 2021  
14:00 to 16:30 hours – Via MS Teams LIVE

Minutes signed as an accurate and true record of the meeting:

..... Rob Hughes – Chairman

..... date