Date	13th June 2023 – 2pm – 5pm
Location	Virtual via MS Teams

Attendees

The following Board attendance was noted:

Attendees		**Present**	**Apologies**
Amanda Cheesley	Chair	✓	
Paul May	Non-Executive Director	✓	
Lorna Harrison	Non- Executive Director	✓	
Simon MacSorley	Non-Executive Director	✓	
Barbara Brown	Non-Executive Director		✓
Anil Patil	Non-Executive Director	✓	
Julie Sharma	Interim Executive Officer	✓	
Clive Bassett	Chief Finance Officer	✓	
Ceridwen Massey	Chief of Operations	✓	
Julian Fleming	Chief of Digital Strategy & Delivery	✓	
Sheridan Flavin	Interim Chief People Officer	✓	
Mary Lewis	Chief Nursing Officer	✓	
Penny Agent	Chief Therapy and Allied Health Professions Officer	✓	
Kathryn Bateman	Chief Medical Officer	✓	

In attendance

Donna Cairns	Head of Corporate Governance
Rachel Corrigan	Corporate Governance Manager (Minute Taker)
Sue Porto	Chief Executive Officer Designate (Observer)

Presenters:

Andrew Edmondson & Suzanne Golding-Ellis	Item 2 - Our People Story
Becca Wright	Item 10 - Staff Survey Action Plan

Chair	Lorna Harrison

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Item	Notes	ACTIONS
1	**Apologies:** Due to difficulties in connectivity for Amanda Cheesley, Donna Cairns opened the meeting and Lorna Harrison Chaired, noting apologies for Claire Valsler and Barbara Brown. Note: although unable to chair the meeting, Amanda was able to be present remotely and to hear the discussion and engage via the Chat function which was then fed into the meeting accordingly.	
2	**Our People Story – Staff Story** **Integrated Care Making a Difference** Sheridan introduced Andy Edmondson to the meeting to share his experience and learning of a patient safety incident. Andy shared his background and career development pathway then outlined the patient visit and subsequent identification of perianal abscess. He then described the next steps and actions undertaken, to further assessment by clinicians and eventual hospitalisation of the patient for intensive treatment, where his stay lasted six weeks. Patient needed nine operations to correct the damage caused by the wound. Andy described how the patient journey was documented and the actions undertaken. A root cause analysis was undertaken and the clinical outcome for patient was good, with the wound being caught in time to avoid critical or terminal outcome. The triage from SPA was outlined and the subsequent 72 hour review, due to the severity of the patient's condition. Escalations in treatment for this patient proved successful and findings for Andy included the improved communications between internal and external agencies and that the review had been constructive in terms of learning and guidance and not critical. Missed opportunities for earlier identification and interventions have been identified as part of the learning. Andy described how Sirona had reviewed its documentation templates to develop a uniform suite, which had aided the safe transfer of patients via the ambulance service and onwards to hospital. This includes the current pilot on the Healthy IO app, which is being trialled for improved Wound Care. An interview to review Sirona's Duty of Candour in relation to this incident was undertaken with the patient. Suzanne Golding Ellis also joined to support the presentation of this incident management. She commended Andy for his quick assessment and actions undertaken to address the patients wound. Board acknowledged that the RCA had identified clear learning and that this demonstrates a learning rather than blame culture within Sirona. **Action: Glossary of abbreviations and acronyms to be shared with minutes – Mary**	
3	**Declarations of Interest** None other than that previously recorded for Board by Paul May as a Councillor in BANES Council	
4	**Approval of Board Minutes – Meeting in public February 2023**	

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	The minutes of the meeting in public held on 14th February were reviewed and approved as an accurate record.	
5	**Chair and Non-Executive Directors' Report** **CEO Update** As Director appointments must be made by the Board in accordance with our Articles of Association. The Board had previously approved the appointment subject to fit and proper person checks being completed and with the start date of 5th June as CEO designate before commencing in post officially on 17th July. As the outgoing Interim CEO, sincere thanks were extended to Julie Sharma for her service to both Sirona and the wider Healthcare system ahead of her retirement at the end of July. The Board noted the update on Sue Porto's appointment as CEO, and transition arrangements in place, welcoming her to the Board at the meeting on 13th June as part of her induction.	

6	**Executive Committee Report**
	The report was taken as read with the following highlights:
	- Funding for the one-off payment made centrally to NHS bodies following the national pay review was not extended to CICs or Social Enterprises. Sirona however was able to extend this payment to staff due to our strong financial position
	  o In response to the query raised surrounding Sirona's response to the non-funding of this payment and our plans to address, it was shared that specific discussions with commissioners in relation to the impact to targeted savings are ongoing, as are those with Social Enterprise UK to address the funding shortfall.
	  o Concerns expressed regarding setting a precedent of self-funding one off payments, whilst recurring payment funding is included.
	  o Other funding schemes to only NHS bodies are also being given consideration
	- Focus on the continued development of Equality, Diversity, and Inclusion plans
	- Considerable achievements noted and celebrated within the Annual Quality Account
	- Continue to focus attention on long waiters, especially in MSK and Podiatry services, including more scrutiny in the data to ensure mitigation can be put in place to address known issues
	- Identification within Children's Services of additional measures needed to address particular issues, with a detailed plan now in development
	- Reviewing training targets and focusing efforts into ensuring continued compliance against targets are achieved
	- Acknowledgement of the processes in place to meet reporting targets – such as Duty of Candour as detailed in the Our People staff story
	- Assurance surrounding the transition from interim to substantive Chief Executive
	One huge achievement absent from the report is around our approach to COVID and Flu Vaccinations. NHS England national statistics show that Sirona are rated 4th nationwide in the staff uptake for flu and are top, at 75.7%, for COVID vaccinations, this was applauded by the Board
	Report received for assurance.	

7	**Risk Register**	

	Mary reported on the work undertaken to review the Risk Management Policy, and how the monitoring committees detailed within provide the scrutiny and challenge on those risks assigned to them. The movement of the current risk scores was illustrated within the report and Board notified that only four risks remain overdue for review. A number of new risks have been added, including the consolidating of some risks into a new single risk. **Risk 430** – Social Care Staffing, Community Learning Disability Service - escalated to the ICB **Risk 429** – Safeguarding Children – out to recruitment for Safeguarding Nursing Posts and we can fill all advertised positions and awaiting start dates. Anticipate new way of working can be begin in 4-6 weeks For IT and Cyber Risks, Julian was invited to provide Board with an update on these risks. He provided assurance that all of the risks assigned to Digital are being reviewed in detail and that there is a newly formed Cyber Risk Group within the ICB, which ensures more strategic thinking across the system, being proactive rather than reactive. In response to whether comparisons against other system providers is made on the number of risks, it was queried whether the Board should be concerned that we have a high number of risks; Mary reported that recent process reviews and training is ensuring that risk is being appropriately managed, and that Sirona scrutinise these risks through the appropriate committees of the Board. Ceridwen made mention of the work being undertaken by the Risk Team to support operational colleagues through training and how appreciated this has been by operational teams; she added that there is still work to be done in terms of long-standing high scoring risk. Sheridan added that we should also be ensuring that the correct actions to address risks are taken and recognise that actions sometimes maintain a score rather than improving it. Recognition that not all mitigations will reduce score and that we will have some high scoring risks that are tolerated. **Action: Chairs of Committees requested to undertake a Deep Dive of those high scoring risks assigned to their committee** Report received for assurance.	
8	**People's Council Report** In Claire's absence, Penny presented the prepared report drafted for the Board. Key discussions of the group were shared, including planned initiatives to improve and diversify membership and participation. With only a limited number of active members, work is underway to widen membership and increase diversity. Specific areas of focus by the group have included: • Discharge to Assess Programme – Presentation on the various pathways and work on supporting leaflets for this pathway • Customer care – Changes to process shared and feedback from the group helped shape some of the changes • Autism assessment – Presentation by the AD for Children's Services following recent public spotlight on this service. • Green agenda – Sirona's plans and ambitions and how the council can support this Acknowledging the challenges in membership, the group have proposed tiering of membership to enable differing levels of participation, along with the development of their workplan.	

	Links to Experience & Engagement review and Peoples Council have been fundamental in helping with the shaping of our People Engagement strategy. Report received for assurance.	
9	**Business and Financial Plan** Report taken as read and builds on earlier Board discussions, currently in draft and will be reviewed in full by the FEED Committee on Thursday 15th June with a view to recommending to the Board for approval either by Written Procedure or delegating authority to the Chair and CEO following review by FEED. Clive provided a recap on the development of this years' plan, including the recent RESET Programme and the focussed work on the five workstreams to support the development of this plan. In the background, there are now five strands of work, using the Hoshin Kanri methodology to progress and track the delivery of these objectives. FEED received recommendations on the investments to achieve improvements and supported the approval of the Budget Plan to the Board. The Scheme of Delegations of Authority will ensure that Business Cases and improvement plans are appropriately considered and have clear aims towards services and cost savings. Plan ensures focus for the coming year but maintains a level of flexibility to meet any changes in business. Mary added that the work in developing this plan has been collaborative with senior leadership team and has ensured that our key objectives have been given their consideration. In terms of the costs associated with delivering this plan, Lorna was keen to establish whether there would be any cost saving initiatives included. Clive provided assurance that any savings would be tracked against this plan as part of the ongoing review of finance. Board was advised that improvements in service delivery through prioritisation will realise cost savings, as evidenced in improved efficiencies. In response to queries about the longer-term view for the remainder of our 10-year contract, it was shared that there is work ongoing to specifically support this, such as the Safer Staffing Programme. This in turn supports the longer-term financial plan with the aim to take forward a three year rather than one year plan. Board understood that not all savings would be realised directly by Sirona but would within the wider system, such as hospital admissions. Assurance was provided that the Audit, Assurance and Risk Committee would receive the proposed revision to the Reserves Policy in August. Noting that the current version of the Business Plan was still in draft, the governance for signing off the final Business Plan was discussed. As the plan dated back to April, it needed to be agreed whether Julie or Sue's name, or both, were included in the plan. The plan and investment proposals would be subject to further scrutiny by the FEED Committee and all Board Members were invited to make further comments. It was proposed that the final Business Plan be signed off by written procedure by the Board and to aim to conclude this by the end of June if possible, however this could be extended to allow sufficient time for the scrutiny and input required. **Action: Comments and queries to be raised directly to Julie and Clive for consideration as soon as possible - ALL** **Action: Timeframe for review and approval to be agreed, along with consideration to the named CEO, due to the transition between Julie to Sue and the plan start date of April 2023 – CLIVE/JULIE**	

	Action: Approval route agreed as Decision by Written Procedure by Board based on FEED recommendation – SIMON/ Corporate Governance **Action: Performance Committee and others will monitor their assigned areas of the plan for their focus, with FEED monitoring the overall progress and financial aspects of the plan.**	
10.	**NHS Staff Survey Action Plan Update** Sheridan introduced the report and welcomed Becca Wright to the meeting to provide further detail and assurance to the Board on activities, highlights from the report included: - High level results presented to Board on 28.02.23 & leadership team on 08.03.23 - Presentations prepared for each Directorate to help develop engagement plans - OD Team meeting with HR and Comms to ensure teams are appropriately supported - Data gathered around EDI, Bank Team and AHP's - April Pulse Survey run and planning to run further topical pulse survey's each quarter - Developing support information for managers - Comms for 'you said, we listened, and together we did' shared via staff social media, Workplace - EDI, staff networks reviewing data – o Long Term Conditions/Disability working with team o Ethnicity, linked to PDR process. All colleagues have access to career progression o Improved leadership and management training o Sexual Orientation, looking at flexible working options, need to support o Religion, ensuring all religions have equal opportunities o Promotion of awareness and support surrounding violence and aggression Positive feedback from engagement sessions and the development of action plans. This is helping to develop trust within teams, appraisals are completed, and development and career progression is considered. Seven key themes of the action plan were explained and detailed below: • Appraisals – Reviewing the PDR Process – both short and long-term review • Team Effectiveness – Scoped out evidence-based tools – TED, Pack Types and Rate My Shift • Staff Retention - #OneYou phases 1 & 2 – Promoting 1:1 career clinic's • Level of Pay – National pay award agreed and will be paid in June pay run Launched Wagestream – access to wages early • Burnout/Stress – Launched stress risk assessment template for individuals, teams and organisation Burnout & Stress support package developed for managers and teams • Capacity and Demand – Set up capacity and demand working group as part of the RESET programme Recommendations will be made to enable capacity and demand reporting • Violence from Service Users – Violence and aggression reduction group in place/ interventions discussed for Urgent Care Centres Action cards and posters have been created to promote zero tolerance Timetable for Next Steps:	

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Timeline	Actions
June	Triangulation of data – OD and HRBPs working together to triangulate data where possible for teams to include – e.g. NHS Staff Survey response rates and results, absence, vacancies, turnover, wellbeing champions in teams
June	Launch of first quarterly "You Said, Together We Did" comms in June, next addition due out in September
June	Further support for burnout and stress is being developed linking in with UHBW
Ongoing	HRBPs continuing to work with managers to develop action plans with teams
June	NHS Staff Survey provider comparison and decision for the NHS Staff Survey 2023
July	Q2 Pulse Survey live in July
Sept	Preparing for roll out of NHS Staff Survey 2023
Sept	People Promise animation video
Oct	NHS Staff Survey 2023 launch

Consideration was suggested in how we could include the activities detailed within our Business Plan.

In reply to benchmarking survey results against other organisations, it was confirmed that we are able to do this.

Board were assured by the report and work to develop robust action plans.

11. **Equality & Diversity Update**

Further to the regulatory and governance update to the Board in May, Dan Whalley was welcomed to the meeting to make the presentation.

Board members were informed about the activity undertaken since December 2022 and future plans, which included:

- The conclusion of an EDI survey being undertaken by Diverse Matters, with recommendations from due for Board consideration later in the summer.
- Our own staff survey seeking feedback about our colleagues' own experiences.
- Development of an EDI programme, chaired by Sarah Prendergast, pulling together all the strands of activity.

The achievements for 2022 and 2023 to date were shared, along with plans for the remainder of 2023 and into 2024, demonstrating the renewed emphasis in addressing all aspects of EDI with supporting documentation and evidence.

It was confirmed that there is representation from our Disability Network on the Accessible Information Group.

Board were assured by the progress made surrounding EDI and expressed a renewed confidence in this programme, acknowledging how specialist skills and knowledge is helping inform the actions to support this work.

12. **Quality Account 2023**

Mary advised that there is a requirement to publish our account by 30th June and the version being considered by the Board has been informed by work with staff and patient groups and scrutinised by the Quality and Outcomes Committee, who recommend Board approval, and is now awaiting stakeholder/ partner statements for inclusion within the annual report.

Thanks were extended to the Quality and Safety Team, notably Jo Hudson and Coron Wybrow along with Comms colleagues in the development and presentation of this years' account.

ACTION: The final version will be published in accordance with requirements and the link to the website document shared with Board members.

DECISION: Recommendation to approve by the Board was fully supported

13.	**Consent Agenda Cover paper** All papers detailed below were approved under Consent Agenda arrangements.	
14.	**Equality, Diversity & Inclusion Policy** Considered and approved.	
15.	**Risk Management Policy** Considered and approved.	
16.	**Quarterly Summary Report from the Audit, Assurance & Risk Committee** Report noted for information and assurance. **16.1 – AARC Terms of Reference** Revision ratified and approved as the latest version.	
17.	**Quarterly Summary Report from the People Committee** Report noted for information and assurance. **17.1 – People Committee Terms of Reference** Approved as the latest version.	
18.	**Quarterly Summary Report from the Finance, Estates, Environment & Digital Committee** Report noted for information and assurance.	
19.	**Quarterly Summary Report from the Performance Committee** Report noted for information and assurance.	
20.	**Quarterly Summary Report from the Quality & Outcomes Committee** Report noted for information and assurance.	
21.	**Quarterly Professional Council Summary** Report noted for information and assurance.	
22.	**Any Other Business and Close** It was noted that there were no questions received in advance of the meeting from the public for consideration and response by the Board. Chairs summary noted as: - Great People Story, demonstrating the learning culture - Assurance on the recruitment process and subsequent appointment to CEO - Assurance Reporting from the Executive Committee - Discussion on Business Plan and agreement on approval routes - Action plans for Staff Survey - Update on the EDI Initiative Board recognised and shared their appreciation of the leadership and work undertaken by Julie during her interim position as CEO. Meeting brought to a close.	

Next meeting date	Tuesday 12th September, meeting in public

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