

Meeting: Trust Board Meeting in Public

Date: Wednesday, 25 September 2024

Time: 09.45 – 12.00

Venue: Hampden Lecture Theatre, Wycombe Hospital and live streamed to the public

Start Time	Item	Subject	Purpose	Presenter	Encl.
09.45	1.	<ul style="list-style-type: none"> Chair's Welcome to the Meeting Meeting Guidance Who's Who of the Board Apologies for absence 	Information	Chair	Verbal
	2.	Declarations of Interest	Assurance	Chair	Verbal
	3.	Colleague Voice	Discussion	Chief People Officer	Paper
General Business					
10.05	4.	Minutes of the last meeting <ul style="list-style-type: none"> 31 July 2024 	Approval	Chair	Paper
	5.	Actions and Matters Arising	Assurance	Chair Chief Nurse	Paper
	6.	Chief Executive's Report	Information	Chief Executive Officer	Paper
	7.	Acute Provider Collaborative Update	Information	Chief Executive Officer	Verbal
Committee Reports					
10.20	8.	Audit Committee Chair Report <ul style="list-style-type: none"> Appointment of External Auditors 	Assurance Approval	Committee Chair	Paper Paper
	9.	Finance and Business Performance Committee Chair Report	Assurance	Committee Chair	Paper
	10.	Quality and Clinical Governance Committee Chair Report	Assurance	Committee Chair	Paper
	11.	Quality and Clinical Governance Committee Terms of Reference	Approval	Committee Chair	Paper
	12.	Charitable Funds Committee Chair Report	Assurance	Committee Chair	Paper
Performance					
10.40	13.	Integrated Performance Report	Assurance	Chief Operating Officer	Paper
	14.	Urgent Treatment Centre Contract <ul style="list-style-type: none"> Letter from Unison 	Assurance	Chief Operating Officer	To follow

QUESTIONS FROM THE PUBLIC

COMFORT BREAK – 10 minutes

Finance

11.15	15.	Finance Report	Assurance	Chief Finance Officer	Paper
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Risk & Governance

11.20	16.	Organisational Risk Report	Assurance	Head of Corporate Governance	Paper
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Quality

11.30	17.	Maternity Quality Reports	Assurance	Chief Nurse	Paper
	18.	Safe Staffing	Assurance	Chief Nurse	Paper

Information

11.45	19.	Summary of Trust Board in Private	Information	Head of Corporate Governance	Paper
	20.	Infection Prevention & Control Annual Report	Information	Chief Nurse	Paper
	21.	Equality, Diversity & Inclusion Annual Report	Information	Chief People Officer	Paper
	22.	NHS response to 2024 riots and social media guidance	Information	Chief People Officer	Paper

AOB

	23.	School Age Immunisation Contract	Information	Chief Nurse	Verbal
	24.	Risks identified through Board discussion	Discussion	All	Verbal

ANY OTHER BUSINESS

QUESTIONS FROM THE PUBLIC

Date of Next Meeting:
30 October, 9:45am

The Board will consider a motion: “That representatives of the press and other members of the public be excluded from the remainder of the meeting, having regard to the confidential nature of the business to be transacted, publicity of which would be prejudicial to the public interest” Section 1 (2) of the Public Bodies (Admission to Meetings) Act 1960.

Papers for Board meetings in public are available on our website www.buckshealthcare.nhs.uk

TRUST BOARD MEETINGS

MEETING PROTOCOL

The Buckinghamshire Healthcare NHS Trust Board welcomes the attendance of members of the public at its Board meetings to observe the Trust's decision-making process.

Copies of the agenda and papers are available on our website www.buckinghamshirehealthcare.nhs.uk.

Members of the public will be given an opportunity to raise questions related to agenda items during the meeting or in advance of the meeting by emailing: bht.communications@nhs.net

If members of the public wish to raise matters not on the agenda, then arrangements will be made for them to be discussed after the meeting with the appropriate director.

An acronyms buster has been appended to the end of the papers.

David Highton
Trust Chair

THE SEVEN PRINCIPLES OF PUBLIC LIFE

The Committee has set out '**Seven Principles of Public Life**' which it believes should apply to all in the public service. These are:

Selflessness

Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other benefits for themselves, their family or their friends.

Integrity

Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.

Objectivity

In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

Accountability

Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

Openness

Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

Honesty

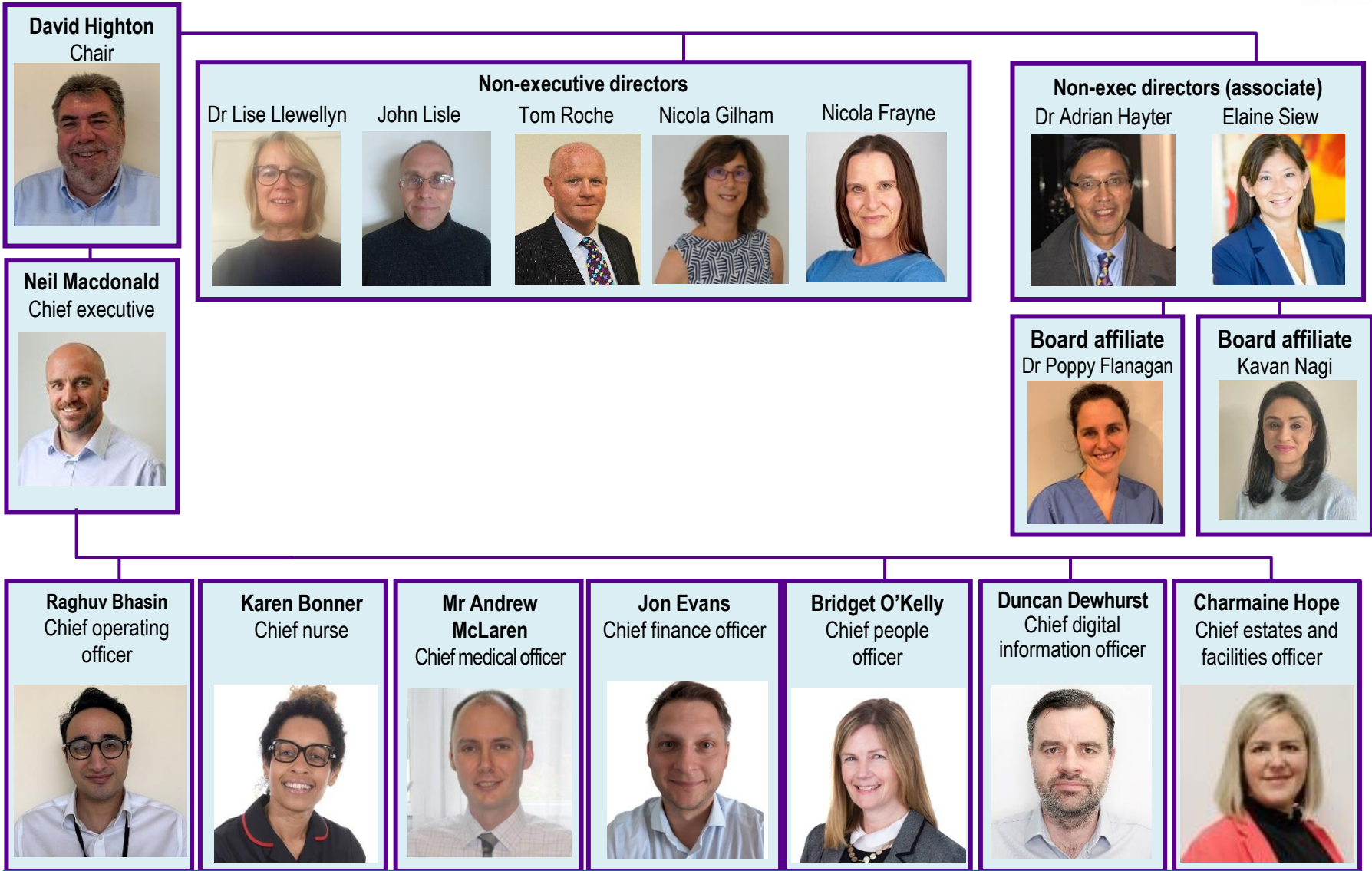
Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

Leadership

Holders of public office should promote and support these principles by leadership and example.

This document should be read in association with the NHS Code of Conduct.

Board of directors



Meeting: Trust Board Meeting in Public

Date: 25 July 2024

Agenda item	Colleague Voice – Selma Lino
Board Lead	Bridget O’Kelly, Chief People Officer
Author	Amir Khaki, Director of Education, Inclusion & OD
Appendices	Presentation
Purpose	Information
Previously considered	Leadership Briefing 20.06.24, SPC 08.07.24

Executive summary

The 2023 National Staff Survey

- Selma Lino, the Community Team Lead for Southern ACHT and Thame ACHT will provide an overview of the work conducted with two teams in response to staff survey results.
- Thame ACHT were in the top 5 teams for staff engagement scores.
- Southern ACHT were in the top 5 most improved teams for staff engagement scores.
- A focus will be provided on creating an environment where it is safe to speak up.

Decision	The Board is requested to note the information shared
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Relevant strategic priority

Outstanding Care <input type="checkbox"/>	Healthy Communities <input type="checkbox"/>	Great Place to Work <input checked="" type="checkbox"/>	Net Zero <input type="checkbox"/>
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Relevant objective

<input type="checkbox"/> Improve waiting times in ED <input type="checkbox"/> Improve elective waiting times <input type="checkbox"/> Improve safety through clinical accreditation	<input type="checkbox"/> Give children living in most deprived communities the best start in life <input type="checkbox"/> Outpatient blood pressure checks	<input type="checkbox"/> Zero tolerance to bullying
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Implications / Impact

Patient Safety	There is evidence of the link between colleague engagement and patient care
Risk: link to Board Assurance Framework (BAF) and local or Corporate Risk Register	Principal Risk 6: Failure to deliver our People priorities
Financial	Retention and sickness absence
Compliance <small>Select an item.</small> Staffing	NHS National Staff Survey & the People Plan
Partnership: consultation / communication	The Trust Engagement Leads meeting includes members from operational teams across the Trust.
Equality	Staff surveys are one of our key sources of data both on break down of our number of staff with protected characteristics and their feedback about their experience.
Quality Impact Assessment [QIA] completion required?	No

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Time: 09.45 – 12.15

Venue: R&I Centre, Stoke Mandeville Hospital and live streamed to the public

MINUTES

Voting Members:

Mr D Highton (DH)	Trust Chair
Mr R Bhasin (RB)	Chief Operating Officer
Ms K Bonner (KB)	Chief Nurse
Mr J Evans (JE)	Chief Finance Officer
Ms N Frayne (NF)	Non-Executive Director (via Teams)
Mr J Lisle (JL)	Non-Executive Director (via Teams)
Dr L Llewellyn (LL)	Non-Executive Director
Mr N Macdonald (NM)	Chief Executive Officer
Mr A McLaren (AM)	Chief Medical Officer
Mr T Roche (TR)	Non-Executive Director

Non-Voting Members:

Dr P Flanagan (PF)	Board Affiliate
Ms K Nagi (KN)	Board Affiliate
Mrs B O'Kelly (BOK)	Chief People Officer
Ms E Siew (ES)	Associate Non-Executive Director (via Teams)

In attendance:

Miss J James (JJ)	Trust Board Business Manager
Mrs E Jones (EJ)	Senior Board Administrator (minutes)
Ms G Thomas (GT)	Director of Strategic Delivery (deputising for Chief Digital and Transformation Officer)
Mr S Squire (SS)	Head of Medical Technology and Clinical Engineering Services (deputising for Chief of Estates and Facilities Officer) (via Teams)
Mrs T Underhill (TU)	Freedom to Speak Up Guardian (for agenda item 21)
Ms Annabelle Batista (AB)	Ward Sister Bucks Neuro Rehabilitation Unit (for agenda item 3)
Ms Holly Wilkinson (HW)	Chief Executive of Bucks Carers (for agenda item 3)

01/07/24 Welcome, Introductions and Apologies

The Chair welcomed everyone to the meeting.

Apologies had been received from Nicola Gilham, Non-Executive Director; Adrian Hayter, Associate Non-Executive Director; Duncan Dewhurst, Chief Digital and Transformation Officer and Charmaine Hope, Chief Estates and Facilities Officer.

02/07/24 Declarations of Interest

None

03/07/24 Patient Story

KB introduced a film which told the story of Colin, who was a patient in the Bucks Neuro Rehabilitation Unit (BRNU) following a stroke, and his wife, Pamela, and their experience of the use of the Carers Passport.

The multiple benefits of the programme for both patients and colleagues were discussed by the Board and the following points noted:

- The BHT Carer Passport had been launched during Carer's Week in June 2024.
- The passport was an effective way of letting patients and their carers know they were valued, recognised, and supported.
- Carers were able to access the organisation at times outside of the usual visiting hours.
- There had been positive feedback from the current 9 passport holders.
- The passport holder was recognised as part of the caring team and could help with transition at the point of discharge.
- The passport promoted engagement and inclusiveness for patients, relatives, and ward staff.
- Carers Bucks worked closely with the wards to help identify any issues.
- The nursing teams recognised carers were part of the healing process and positive feedback had been received from the nursing team recognising the change in culture required.

The Board **NOTED** the Patient Story.

04/07/24 Minutes of the last meeting

The minutes of the meeting held on 28 June 2024 were **APPROVED** as a true and accurate record.

05/07/24 Actions and Matters Arising

The Action Matrix was **NOTED**.

06/07/24 Chief Executive's Report

NM referred to the submitted report and highlighted the following points:

- Since the last meeting there had been a change of government and a process of engagement had begun with national and local politicians.
- The new secretary of state had three priorities; the shift from hospitals into community and primary care; the shift from analogue to digital and the shift from treatment to prevention all of which were linked to the work ongoing to develop the overall strategy for Buckinghamshire.
- The issues of Wycombe tower had been raised with the new Labour MP for Wycombe.

The Board commended the improvements in performance related to Cancer and Diagnostics.

The Board **NOTED** the CEO report.

07/07/24 Place and System Partnership Working Report

NM presented a summary of the key developments in health with partners in Buckinghamshire ('place') and within the Buckinghamshire, Oxfordshire and Berkshire West (BOB) Integrated Care System (ICS). The following points were noted:

- The ICB had received a letter around the significant financial challenges related to the system and was moving the segmentation rating applied to the ICS by NHS England to 3+ ('significant concern').
- It was a challenging position and work was underway to understand real and material risk as there was no more money to come with the added pressure of the pay awards which had been announced.
- A proposal had been published of the new structure of the Integrated Care Board (ICB)
- At Place level work was ongoing putting together the overall health and care strategy which the Trust was leading on.

The Board discussed the report and highlighted the following:

- The funding of the pay awards was a major outstanding issue and understanding the quantum and timing of the awards would potentially have a major impact on in year cash performance if they didn't align.
- Workstream 4 was more than just financial.

The Board **NOTED** the report.

08/07/24 Audit Committee Chair Report

- Audit Committee Annual Report 23/24

JL highlighted the following points:

- The Committee had received the clinical audit plan and were assured.
- There had been a significant improvement on the data security and protection toolkit with four areas to close before September.

- An internal audit report on governance had received a reasonable assurance.
- There needed to be a continued focus on following up tasks arising from audits and better tracking of assets.
- There was some challenge around the net zero report which would come to Board later in the Autumn.

The Board were **ASSURED** by the Committee Chair report.

09/07/24 Finance and Business Performance Committee Chair Report

The Board were **ASSURED** by the Committee Chair report.

10/07/24 Quality and Clinical Governance Committee Chair Report

LL highlighted the following points:

- The Committee had held a deep dive into the community and rehabilitation care group and were assured on the ongoing reviews and quality improvement actions related to pressure ulcers including understanding and bolstering preventative work.
- There had been a positive perinatal quality surveillance report which had been complimentary on maternity and response to incidents and learning themes and trends which were not recurring.
- The safe medical staffing report had been received recognising the link to the quality agenda.
- The Committee were assured by the Public Sector Equality Duty report.
- An update on the home birth guidance had been received and the committee noted the vulnerability of midwives, balancing the wishes of mums and the duty of care to midwives and teams.

The Board were **ASSURED** by the Committee Chair report.

11/07/24 Strategic People Committee Chair Report

TR highlighted the following points:

- The appraisal completion rates were significantly improved on the previous year.
- The importance of having regular feedback sessions and listening to colleagues.
- The committee discussed the recent trends in sickness levels including the impact of hyper fatigue and the importance of learning from other industries.

The Board were **ASSURED** by the report.

12/07/24 Integrated Performance Report (IPR)

RB referred to the submitted report and highlighted the following points:

- There was a delay to the opening of the new ward which was affecting efforts to reduce the 12 hour waits.
- There had been improvements in the numbers around planned care with slow activity in June which had recovered in July.
- There was a focus on pressure ulcers particularly in the community and sickness levels and consequences on productivity including the lost month of activity due to industrial action and estates issues. Work was ongoing to minimise this particularly in the theatres at Wycombe.

During Board discussion the following points were noted:

- The plan to increase utilisation of the discharge lounge for the benefit of both patients and capacity recognising the shift in culture required for increased use.
- The reasons for the fluctuations behind the targets and effectiveness of development and health reviews for children due to a significant increase in referrals.
- The acute waiting list would be managed by clearing the backlog and having more activity. RB assured the Committee no patient harm was associated with the delays.
- There had been an increase in referral rates for Dermatology due to the deterioration of long-term conditions and a change of behaviour which was distorting the referral pattern.
- Work was underway with primary care to build relationships around who deals with wound care etc.
- Impact of industrial action by the BMA.

The Board were **ASSURED** by the report.

GT referred to the submitted report and highlighted the following:

- The Digital Strategy set out a vision to transform clinical practice, processes, and culture to reflect a modern approach to using digital systems, data, and technology to provide high quality, preventative, proactive and personalised care and how this would be delivered.
- Trust applications would be digitised, and colleagues supported to build capability and have the right digital skills.
- Remote monitoring and an improved booking process would enable patients to have great control of their own care and health and wellbeing.
- Improved data would enable patient care to be focussed on real time information and enable integration between teams.

The Board discussed the strategy and noted the following:

- Concern around the IT service-desk call wait times and the need to improve processes and recruit the right colleagues.
- The need to work collaboratively with partners on, and confirm methods of funding for, the automation of processes and the benefits of greater integration with the NHS App and other patient portals.
- The Digital Health Programme Board would maintain oversight of the benefits of digitisation including improvements in productivity and efficiency.
- The importance of demonstrating value for money.
- The strategy would empower patients specifically around integration with the NHS App and patient portals.
- There was an opportunity to connect the digital strategy with how it supported the obligations under PSED which the Trust was legally obliged to do.
- Productivity and efficiency would come from through digitising the Trust and being clear on the investment value and payback to make lives easier and make it more efficient.

The Board **APPROVED** the Digital Strategy.

GT provided an update on progress to date with the Buckinghamshire 'Place Strategy' including the local challenges and next steps to finalise the strategy. The following points were highlighted:

- The strategy was intended to act as a framework for how health, social care, voluntary and community organisations worked together with local communities to realise the vision of helping people live healthier and more independent lives.
- The Trust was working with partners to create the strategy and deliver the plan which was being designed to consider the greater demands of the aging population and the complexity of their conditions.
- The Strategy was focussed on empowering communities increasing preventative and proactive care.

During discussion the Board noted the following:

- The strategy was hugely important and crucial for the Trust to link it to the health and well-being strategy.
- The strategy was more developed than previously with stronger proactive and preventative care and was in line with the plans of the new government.
- Building trust amongst the leadership in the Place and colleagues working together including district nurses, GPs, community teams and social care colleagues was essential.
- The importance of all the strategies being complimentary to one another was highlighted.

The Board were **ASSURED** by the Place Strategy and that it was in line with the Trusts strategic direction and welcomed the simplicity of the vision and those factors which would support the achievement of the strategy including leadership, commitment and the expected changes within both workforce and population health.

GT provided the quarterly update on the Trust's six strategic programmes:

- Healthy Communities (Opportunity Bucks)
- Improving Together
- Digital Health
- Workforce Transformation

- Acute Provider Collaborative (APC)
- Buckinghamshire Executive Partnership (BEP) priorities

The programme set out the key work delivered to support the delivery of the above and to build the culture of the Trust around what was needed for the future.

The Board discussed the programme and noted the following:

- When talking about healthy communities this should be aligned with the work with the Council around Opportunity Bucks.
- A connected care board was working through the development of connected care and increasing use of segmentation.
- A review of Health on the High Street was requested detailing what had gone well and plans for the future.

Action: Review of Health on the High Street model after it has been open a year – DD

The Board were **ASSURED** by the report.

16/07/24 Improving Together Programme

BOK provided a verbal update on progress with the 'Improving Together' programme which was an approach focussing on a culture of continuous improvement. The programme focussed on underpinning principles, the leadership behaviours required, and methods needed to deliver the programme.

The importance of recognising the need to work and act differently to achieve the strategic aims was highlighted which included new models of care, having consistent improvement, and developing leaders.

The Board were **ASSURED** by the report.

17/07/24 Finance Report

JE provided an update on the month 3 financial position including performance against the year-to-date plan and closing cash balance. The following points were highlighted:

- At the end of month 3 (June) the Trust reported a deficit of £10.8m, £1.3m worse than the planned deficit of £9.5m. This variance was attributable to unplanned industrial action however it was unclear what the national response on dispensation would be.
- The Trust was broadly on plan regarding pay noting need to reduce pay costs.
- Clinical income was in line with the plan.
- The Trust was running a cash deficit and had requested and had approved a requirement for cash support. This was now happening monthly, and JE noted the risk the Trust may not receive as much as was required to support working capital and pay suppliers on time.

The Board discussed the report and noted the following:

- The processes related to waiting list initiatives and the financial challenges related to those processes around high-cost drugs.
- The risk around not having enough cash to support the capital plan.

The Board were **ASSURED** by the report.

18/07/24 Organisational Risk Report

JJ presented an overview of the risk within the Trust including details from the Corporate Risk Register (CRR) and Board Assurance Framework (BAF). The following points were highlighted:

- The addition of a risk around consultant microbiologist staffing noting the national shortage.
- The risk related to environment on Ward 2a at Wycombe had been deescalated reflecting recent work undertaken.
- There was no significant change in the position of risk of the organisation.

The Board discussed the report and noted the following:

- The need to disaggregate and standardise workforce risks with consistency and an accurate view of risks.
- The risk around microbiology had an action plan and mitigations were in place.
- The importance of the Board having sight of IPC risks.
- The Board discussed the global IT outage and the need to revisit business continuity planning.

The Board were **ASSURED** by the report.

19/07/24 Medical Appraisal and Revalidation Report

AM presented the annual report providing assurance on internal processes supporting medical appraisal and revalidation for 2023/24.

AM noted the increase in the number of appraisal compliance reflecting the tightening of processes and support with training and proactively seeking out doctors who were new to the NHS and had not done appraisals before.

The Board **APPROVED** the report.

20/07/24 Guardian of Safe Working Hours

BOK presented a summary of activity related to exception reporting and immediate safety concerns for 2023/24 recognising the importance of culture related to reporting. The report now contained demographic data to understand who was reporting. The actions arising sat with the individual departments both qualitative and quantitative to move forward and make improvements for junior doctor colleagues.

The Board noted the accuracy of the commentary was misleading and BOK would review. The inclusion of both additional analysis and demographic details including ethnicity was welcomed and this information would be triangulated for the next report with national training survey feedback and what happens next.

The Board were **ASSURED** by the report.

21/07/24 Freedom To Speak Up Guardian (FTSUG) Annual Report

TU presented the annual report detailing the activities of the Freedom to Speak Up (FTSU) service throughout 2023/24. The following points were highlighted:

- 91% of colleagues completed the training.
- 2700 contacts were made across the Trust, these were not concerns but contacts which was raising awareness of the service.
- The People Promise results showed slow steady progress.
- Results showed colleagues trust in the service.
- Access to the service was monitored through the diversity lens.

The Board discussed the report and noted the following:

- The Board noted the Trust was reflective of the national picture and commended the team on progress made during the year. Ambitious targets were encouraged for 2024/25.
- The importance of the FTSU culture was highlighted in ongoing work related to reducing bullying and harassment and supporting sexual safety in the workplace.
- Effective methods of triangulation were discussed including the need to align with the Patient Safety Incident Response Framework (PSIRF). Maintaining colleague confidentiality was considered paramount.
- Measurable outcomes were requested to be included in the next report.

The Board were **ASSURED** by the report.

22/07/24 Modern Slavery Act; Annual Statement

BOK presented the annual statement which aligned to the requirements of the Modern Slavery Act 2015, related to 2023/24, outlining actions taken by the Trust to identify, prevent and mitigate modern slavery within the organisation.

A question was raised around overseas nurses and ensuring all requirements had been met.

Action: BOK to review details around framework agencies that are used.

The Board **APPROVED** the statement.

23/07/24 Public Sector Equality Duty

GT presented the overview of activities during 2023/24 to ensure the Trust met its obligations related to the Public Sector Equality Duty (PSED). Key achievements were reducing smoking rates in

pregnancy, improving experience outcomes for patients of a South Asian background and improvements in access to the sign language interpretation services and health and well-being days at community sites. Further developments were to work with patients from ethnic backgrounds to understand why they didn't attend appointments to help define the required improvements to support those patients.

The Board expressed the need to be more ambitious and more specific when articulating future plans in this area.

The Board were **PARTIALLY ASSURED** by the report.

24/07/24 CQC Improvement / Action Plan

KB provided an update on the action plan related to all CQC inspections since February 2022 including confirmation that all 'Must Do' actions following the 2023 inspection into Maternity Services had been completed.

The outstanding action related to moving to electronic documentation and the Board would be updated on progress.

The Board were **ASSURED** by the CQC Improvement / Action Plan.

25/07/24 Maternity CQC Action Plan

The Board were **ASSURED** by the CQC maternity action plan.

26/07/24 Safe Staffing

KB presented the quarterly overview of the nursing and midwifery workforce during Q4 2023/24 (Jan-Mar) noting full compliance with the National Quality Board (NQB) Standards and Expectations for Safer Staffing. It was noted the pockets of vacancies were being mitigated with bank and agency staff.

The Board were **ASSURED** by the report.

27/07/24 Health & Safety, Fire and Security Annual Reports

SS noted all the annual reports had been through Strategic People Committee and the Health and Safety Committee.

The Board requested tangible outcome goals and headline objectives and milestones included in the reports for next time.

Action: Headline objectives for annual reports ensuring integrated objectives – Execs

The Board **NOTED** the reports.

28/07/24 Private Board Summary Report

The Board **NOTED** the report.

29/07/24 Risks identified through Board discussion

The following risks were identified during board discussion:

- Impact of potential GP industrial action on secondary care services
- Cash position.

30/07/24 Any other business

- Overview of Trust activities in support of Organ & Tissue Donation Week; 23 – 29 September 2024.

31/07/24 QUESTIONS FROM THE PUBLIC

No questions from the public had been received.

Date of the next Trust Board Meeting in Public: 25 September 2024 at 09.45

Generated Date	18 Sep 2024 21:07
Action Criteria	
Project	Public Board

Public Board							
Reference	Minute Reference	Agenda Item	Detail	Owner	Fixed Target	Variable Target	Last Update Description
1813		External Reviews	Combine reporting with the annual Compliance with Legislation Report	Chief Nurse	31 Jan 2024	25 Sep 2024	Propose close: Audit Committee considered paper outlining recent review of Compliance with Legislation process and proposal for future management of this and external reviews. Quarterly review of outputs planned by EMC with oversight annually by Audit Committee.
2211	16/06/2024	Integrated Safeguarding Annual Report	Undertake a gap analysis against the Safeguarding Assurance and Accountability Framework to make the necessary preparations for 2024/25 planning.	Chief Nurse	29 Jan 2025	29 Jan 2025	Recruitment for Interim Safeguarding Lead underway. Plan for a full review of the integrated safeguarding model including development of a case for investment.
2863	16/07/2024	Strategic Programme Overview	Review of Health on the High Street model after being open for a year	Chief Digital & Transformation Officer	30 Oct 2024	30 Oct 2024	
2864	22/07/2024	Modern Slavery Act; Annual Statement	Review of details of nursing frameworks used and report back to Board.	Chief People Officer	30 Oct 2024	30 Oct 2024	