



**The Tavistock and Portman**  
NHS Foundation Trust

## **Council of Governors Part Two**

**Agenda and papers of a meeting to be held in public**

**Thursday, 28<sup>th</sup>  
March 2024**

**For timings and venue, please refer to the agenda.**



**COUNCIL OF GOVERNORS – PART TWO  
MEETING HELD IN PUBLIC  
28 March 2024 at 3.10 – 5.30 pm  
Lecture Theatre, 5<sup>th</sup> Floor  
The Tavistock and Portman NHS Foundation Trust  
as well as Online (via Zoom)**

**AGENDA**

		<b>Lead</b>	<b>Timing</b>	<b>Paper No</b>
<b>1 Preliminary Business</b>				
1.1	Chair's welcome and apologies for absence	Chair	3.10	Verbal
1.2	Council members' declarations of interests	Chair		Verbal
1.3	Chairs opening remarks and introduction of new NED	Chair	3.15	Verbal
1.4	Minutes of the meeting held on <ul style="list-style-type: none"> <li>7 December 2023</li> </ul>	Chair	3.25	Paper
1.5	Matters Arising and Action Log	Chair		Paper
<b>2 Reports and Updates</b>				
2.1	Governor Feedback	Lead Governor	3.35	Verbal
2.2	Chief Executive's Report	Chief Executive	3.45	Paper
2.3	Finance Report	Chief Financial Officer	3.55	Paper
2.4	Membership and Engagement Update	Interim Director of Communications and Engagement	4.05	Presentation
<b>3. Reports from the Non-Executive Chairs of the Board Assurance Committees</b>				
3.1	Education and Training Committee Highlight Report <ul style="list-style-type: none"> <li>18 January 2024</li> </ul>	Committee Chair and/or Executive Lead	4.15	Paper
3.2	Integrated Audit and Governance Committee Highlight Report <ul style="list-style-type: none"> <li>06 February 2024</li> </ul>	Committee Chair and/or Executive Lead	4.25	Paper
3.3	Quality and Safety Committee Highlight Report <ul style="list-style-type: none"> <li>4 January 2024</li> </ul>	Committee Chair and/or Executive Lead	4.35	Paper
3.4	People, Organisational Development, Equality, Inclusion and Diversity Committee Highlight Report <ul style="list-style-type: none"> <li>11 January 2024</li> </ul>	Committee Chair and/or Executive Lead	4.45	Paper
3.5	Performance, Finance and Resources Committee Highlight Report <ul style="list-style-type: none"> <li>13 February 2024</li> </ul>	Committee Chair and/or Executive Lead	4.55	Verbal
<b>4. Statutory Duties and Responsibilities</b>				
4.1	Directors' Fit and Proper Test Results 2023/24	Director of Corporate Governance	5.05	

		Lead	Timing	Paper No
4.2	To receive a recommendation from the Nomination Committee for the proposed appointment of a Non-Executive Director	Committee Chair	5.10	To be added
4.3	Review of delivery of Trusts Quality Priorities 2022/23 and Update on selection process for Quality Priorities 2023/24	Chief Nursing Officer	5.20	To follow
<b>5. Closing Business</b>				
5.1	Questions from the Public	Chair	5.30	Verbal
5.2	Any other Urgent Business	Chair	5.35	Verbal
5.3	Issues to be escalated to the Board of Directors	Chair		Verbal
5.4	Review of Meeting	Chair		Verbal
5.5	Date and time of next meeting • <b>Thursday 6 June 2024 at 2.00pm</b> [venue to be confirmed]	Chair		Verbal
	Close of Public Meeting		5.40	
<b>REFERENCE DOCUMENTS</b>				

## UNCONFIRMED MINUTES OF A MEETING OF THE COUNCIL OF GOVERNORS

Part 2: Public Meeting  
Thursday 7<sup>th</sup> December 2023, 3.00 – 5.15pm  
Meeting held in the Lecture Theatre and virtually via Zoom

### PRESENT

#### Members

John Lawlor (JL)	Trust Chair and Chair of the Council of Governors
Kathy Elliot (KE)	Stakeholder Governor and Lead Governor
Sebastian Kraemer (SK)	Public Governor
Ffyona Dawber (FD)	Public Governor
Sheena Bolland (SB)	Public Governor
Michael Rustin (MR)	Public Governor
Michelle Morais (MM)	Public Governor
Kenyah Nyameche (KN)	Public Governor
Stephen Frosh (SF)	Public Governor
Julian Lousada (JLou)	Public Governor
Jessica Anglin d'Christian (JAC)	Staff Governor
Paru Jeram (PJ)	Staff Governor
Natalia Barry	Public Governor
Katharine Knight (KK)	Student Governor
Peter Ptashko (PP)	Stakeholder Local Authority Governor

#### In attendance

Michael Holland (MH)	Chief Executive
Adewale Kadiri (AK)	Director of Corporate Governance
Gem Davis (GD)	Chief People Officer
Peter O Neill (PON)	Interim Chief Financial Officer
Sal Jarvis (SJ)	Non-Executive Director
Aruna Mehta (AM)	Non-Executive Director
Deborah Colson (DC)	Non-Executive Director
Shalini Sequeira (SS)	Non-Executive Director
Janusz Jankowski (JJ)	Non-Executive Director
Claire Johnston (CJ)	Non-Executive Director
Sabrina Phillips (SP)	Non-Executive Director (Associate)
Charlotte Williams (CW)	Acting Director, Tavistock Consulting (item 006)
Amanda Hawke	Corporate Governance Manager
Fiona Fernandes	Business Manager Corporate Governance (Minutes)

#### Apologies for absence

David O'Mahony	Stakeholder Governor
David Levenson	Non-Executive Director
Jocelyn Cornwell	Public Governor

**Apologies not received**

Maisam Dato  
Robert Waterson  
Michael Arhin Acquah

Staff Governor  
Public Governor  
Public Governor

	<b>Administrative Matters</b>
001	<b>Welcome</b>
	JL welcomed all to the meeting.
002	<b>Confirmation of Quoracy</b>
	The meeting was noted to be Quorate.
003	<b>Council members' declarations of interests</b>
	There were no new Declarations of Interest noted. JL advised Governors to declare everything even if it was minimal.
004	<b>Draft minutes of the meeting held on 14<sup>th</sup> September 2023</b>
	The minutes of the meeting held on 14 <sup>th</sup> September 2023 were agreed as a true and accurate record.
005	<b>Action log and matters arising</b>
	Actions 1.3, 2.7, 23-006, 23-008 and 23-017 were completed and closed.
	<b>Reports and Updates</b>
006	<b>Presentation – Tavistock Consulting (TC)</b>
	<p>CW introduced herself as the Acting Director of the service whilst the role was under review. She is a senior consultant. CW presented her slides and gave a background and overview of the work of the service, what it has done and achieved.</p> <p>CW highlighted the following:</p> <ul style="list-style-type: none"> <li>• Tavistock Consulting is made up of organisational consultants with a variety of backgrounds, many of whom trained on, and are now faculty on the Tavistock's Masters and Doctoral Programmes in Consulting and Leadership.</li> <li>• Until November 2022 Tavistock Consulting consisted of just five core staff members, three Consultants, one Director and an Administrator. Alongside this was a pool of highly experienced associate consultants that were called upon to assist with the delivery of the work.</li> <li>• An outcome of the Strategic Review was the creation of the Workforce Innovation Unit (WIU) within DET. WIU housed the National Workforce Skills Development Unit (NWSDU) under the NHS branch, and a collection of services were combined under the Commercial arm.</li> <li>• A three-year business plan was developed which led to the creation of three new organisational consultant posts and a project manager. Within a year TC expanded from 6 to 15 positions.</li> <li>• Services provided range from team effectiveness, custom made development programmes to training and consultancy work using the THRIVE Framework.</li> <li>• The challenges faced are the reduction in the size and authority granted to the role, which led to the departure of the TC Director, delays in recruitment, reputation of the</li> </ul>

	<p>Trust following GIDS decommissioning, impact of the SR on staff and productivity and changes in the economic climate.</p> <ul style="list-style-type: none"> <li>The successes achieved include substantial contracts won in the year with a number of new clients from within the public, private and third sectors.</li> </ul> <p>It is clear that TC makes a significant positive contribution to the reputation of the Tavistock both internationally and nationally.</p> <p>JL on behalf of the meeting thanked CW for her presentation.</p> <p><b>Action:</b> Slides to be sent to the Governors – AH/FF</p>
<p>007</p>	<p><b>Governor Feedback</b></p>
	<p>KE highlighted the following:</p> <ul style="list-style-type: none"> <li>Governors have welcomed the opportunity to undertake service visits and were awaiting the next set of service visit dates.</li> <li>There had been good feedback on the informal sessions.</li> <li>Governors welcomed the re-instating of the Joint Meetings as this would provide better working relationships with the Board.</li> <li>As not all Governors are able to attend all the relevant meetings, it would be useful to find ways of providing feedback.</li> <li>Governors want to have a better understanding of their role in terms of the merger process and future options, so that they are able to carry out their duties of holding the Board to account.</li> </ul> <p>KE thanked all the governors for all that they are doing and encouraged them to continue the feedback.</p> <p>JL noted that the meetings that are mandatory for Governors to attend are the Council of Governors' and Joint Meetings. It is important that the right balance is struck to ensure that Governors feel more involved. There is the expectation that Governors attend at least 3 out of the 4 Council meetings, and at least two of the three joint meetings. Attendance at Board of Directors meetings is optional but Governors are encouraged to attend as observers as part of their role of holding the Board to account.</p>
<p>008</p>	<p><b>Chief Executive's Report</b></p>
	<p>MH presented his report and highlighted the salient points:</p> <ul style="list-style-type: none"> <li>Black History Month in October went well thanks to the hard work of the EDI Team.</li> <li>During Disability Awareness Month - the Disability network has been re-launched, which is now called the Purple Circle.</li> <li>Last month MH and JL attended a benefit event with the local authority and other providers from Camden for Hope Champions.</li> <li>Following the CQC inspection of GIDS, the Trust has received the draft report and the factual accuracy response has been submitted. The report is expected to be published shortly.</li> <li>GIDS will be closing at the end of March 2024. TUPE has not been applied for the service's staff, and consultation has commenced with the colleagues affected. GD and SH are meeting with staff and looking at how best to support them.</li> <li>The 2023 NHS Staff Survey has closed and the Trust has achieved a 53% response rate, which was up from 32% last year and well above average for mental health trusts.</li> </ul>

	<ul style="list-style-type: none"> <li>• The Trust has been notified of potential strikes by junior doctors on 20<sup>th</sup> and 23<sup>rd</sup> December, and 3<sup>rd</sup> to 8<sup>th</sup> January 2024.</li> <li>• Following a review by the NHS Race and Health Observatory about ethnic inequalities in accessing Improving Access to Psychological Therapies (IAPT), an independent review of services provided by NHS Talking Therapies was undertaken in partnership with the National Collaborating Centre for Mental Health. A report was published in November, and the Chief Medical Officer will be considering this.</li> <li>• An inquiry by the All-Party Parliamentary Group on Young and Young Adult Carers has revealed the damaging impact caring has on the life opportunities of young people.</li> <li>• NHS Digital published reports showing that young people’s mental health is getting worse.</li> </ul> <p>JL thanked staff and colleagues in GIDS. In spite of the difficulties, they have responded with professionalism and behaved remarkably. It is a sad day for the NHS to be losing so many dedicated staff.</p>
009	<p><b>Finance Report for Month 7</b></p>
	<p>PON updated on the position of Month 07.</p> <p>He informed the Council that the Trust incurred a net deficit of £2,252k in the period, against a planned deficit of £2,128k that is, an adverse variance of £124k. This is a worsening from the previous month’s negative variance of £45k against plan reflecting some one-off costs paid in October and the ongoing industrial action as well as higher building rates. The distribution of the national funding for industrial action costs of £160k has now been confirmed and will offset some of these costs, bringing the Trust back towards its planned deficit for the period. The Trust still expects to achieve its planned year-end deficit of £2.5m.</p> <p>The agreed capital spend for the year is £2.2m, a reduction from the previous year of £0.9m and will require robust management to ensure the Trust stays within plan.</p> <p>The agreed plan includes a reduction in cash over the year to an outturn of £3.1m, which reflects the planned deficit position, but not the unknown impact of GIDS decommissioning.</p>
010	<p><b>Council of Governors’ Development Programme</b></p>
	<p>AK presented his report and highlighted the key points:</p> <ul style="list-style-type: none"> <li>• It has been acknowledged that in the past, the approach to training and development for the Council has not been consistent.</li> <li>• As part of the Governor role, it is vital that Governors are provided with the necessary training to ensure that they are fully equipped and supported to perform their statutory duties.</li> <li>• Training will be provided through a combination of NHS Providers Governwell programmes as well as in-house bespoke sessions which will include induction as Governors take up their roles. Briefing sessions on Significant Transactions, as well as on-going presentations about various aspects of the Trust’s work will also be put in place.</li> <li>• Plans are being put in place for a refresher induction for current Governors, and an induction plan for the new intake of Governors.</li> <li>• Governors have a unique role in the merger when it happens, and the Trust will need to start preparing them for this part of the on-going development as Governors of Trusts and Foundation Trusts.</li> </ul> <p>KE and SB welcomed this and were glad to see that training and development for Governors is being prioritised.</p> <p>JL noted should any Governors have any ideas of what topics to cover, to forward them to</p>



	AK.
011	<p><b>Governor Observers on Board Committees</b></p>
	<p>AK informed that one of the key statutory roles that Governors have is holding the Non-Executive Directors to account for the performance of the Board. Although Governors attend the Board meetings as observers, these do not always provide opportunities for Governors to observe the full range of NEDs' work. It is proposed that Governors are to be invited to join the Board committee meetings as observers with the exception of the Remuneration Committee.</p> <p>AK explained that observing meetings of the five Board Committees not only allows Council members to see how the NEDs hold the Executives to account for more detailed items of business, but it also gives Governors greater insight into the various aspects of the Trust's work.</p> <p>Governors who are interested in being observers should send their names to AK indicating which of the Committees they would like to shadow. AK will pull the information together and will have a discussion with the Committee Chairs and JL. Those Governors chosen will have the opportunity to meet and work with the Chairs. Chairs will be able to give Governors a chance for feedback.</p> <p>Governors welcomed and approved the proposal.</p> <p><b>ACTION:</b> AK to send an Expressions of Interest email to the Governors.</p>
	<p><b>Statutory Duties and Responsibilities</b></p>
012	<p><b>Appointment of the External Auditors</b></p>
	<p>PON informed that the Trust had undertaken a competitive procurement process to engage a new external audit partner as Mazars, who currently provide this service, had indicated that they did not wish to continue. The Trust did not receive any expressions of interest via this process, as a result of which NHSE advised that the Trust should approach companies directly.</p> <p>The future state work with KPMG was used as a lever to approach Grant Thornton who are currently the external auditors of several of the interested organisations. After initial discussions with the lead partner, Grant Thornton accepted that it would make sense for them to act as the Trust's external auditors in the period up to the merger, even though they had not tendered for the work initially.</p> <p>The cost of the 2022/23 audit was £120k, but Grant Thornton have a commercial policy that sets a minimum fee of £150k for any new audit contracts. After discussion with the IAGC Chair, the CEO and NHSE colleagues it was concluded that although the fee increase is proportionately high compared to last year, the Trust had no other options so needed to proceed with Grant Thornton on this basis.</p> <p>JL noted that in normal circumstances, Governors would be more involved in the process of the appointment of External Auditors, however in this case it was not feasible due to the time constraints. Governors are being asked to approve the appointment of the External Auditors based on what has been presented today.</p> <p>Responding to PJ, PON noted that there would be no conflict of interest with the merger partners as there was no financial link with the Trust.</p> <p>All Governors present agreed and approved the appointment of the Grant Thornton as the Trust's External Auditors.</p>

<p><b>Reports from the Non-Executive Chairs of the Board Assurance Committees</b></p>	
013	<p><b>Education and Training Committee Highlight Report – 16 November 2023</b></p> <p>SJ informed that the Committee:</p> <ul style="list-style-type: none"> <li>Received a first draft full year forecast of the education and training budget including income.</li> <li>Was concerned that the Trust was unable to submit the Annual Financial Return to the Office for Students by the extended deadline date.</li> <li>Had concerns about the level of student debt, particularly old debt (over 365 days) not being addressed. The Integrated Audit and Governance Committee had considered this issue as well, and the likelihood is that some of it would be written off. There is a lack of clarity whether all is debt related or whether it is a system recording error. The new Student Record and Finance Lead will be keeping an eye on this.</li> <li>There has been a good start to the academic year with a 4.65% increase in registrations, however, there still needs to be attention given to upscaling the education offer and a focus on the communications side which has been escalated to the Board.</li> <li>Had heard that the National Workforce Skills Development Unit (NWSDU) 23/24 portfolio projects are progressing well, but as the 2023/24 portfolio is still not fully finalised with NHS England Workforce Training and Education directorate, £250K of the contract value remains unallocated, and the fear is that it will be recalled.</li> <li>The Committee were assured that the Annual Student Survey had gone well and there was increased satisfaction. The first Skills Fest was held at the end of November, and work to re-design the webpages to make information clearer and more accessible.</li> </ul>
014	<p><b>Intergrated Audit &amp; Risk Governance Committee Highlight Report – 23 November 2023</b></p> <p>PON informed the Council that the Committee had:</p> <ul style="list-style-type: none"> <li>Received an updated proposed Scheme of Delegations that would be presented at the Board for approval.</li> <li>Recommended that the appointment of the Trust’s new external auditors Grant Thornton be presented to the Council of Governors for approval.</li> <li>Received a report on the waiting list management in GIC and that was pulled out as a separate item on the risk register.</li> <li>The BAF is to be updated and aligned to the Trusts new strategic aims and merger prospects.</li> </ul>
015	<p><b>Quality &amp; Safety Committee Highlight Report – 02 November 2023</b></p> <p>CJ informed the Council that the Committee had received updates on:</p> <ul style="list-style-type: none"> <li>Complaints and management - following a mapping process, a new policy has been written and it was received with some challenge from Team Managers. CS and CA are informing Team Managers that it complaints management is their responsibility.</li> <li>A review of all the CQC must and should do recommendations issued since the last Trust-wide inspection in 2018 has been undertaken to, firstly, ensure that the actions marked as completed have been embedded to full effect, and to review themes of recommendations to ensure that issues are not being inadvertently replicated in</li> </ul>

	<p>different services. The actions in place to address the themes will be reported into the new CQC Improvement Group.</p> <ul style="list-style-type: none"> <li>• A Learning Lessons ‘CQC Demystified’ event was successfully hosted by the Committee.</li> <li>• PSIRF is a clinical risk information system that has been procured to enable the Trust to get correct data when recording risks. It is an important framework for recording and reviewing incidents, and there are plans in place to provide a three-day training programme to commence in January 2024. The Committee will be overseeing this.</li> <li>• A new sub-group of the Committee has been established to focus on service user experience. The new group will be responsible for oversight and challenge on all patient engagement and experience activity, as well as being responsible for driving improvement and initiatives to further strengthen the Trust’s focus on service user engagement and experience.</li> </ul>
<p>016</p>	<p><b>People, Organisation Development, Equality, Inclusion and Diversity Committee Highlight Report – 2 November 2023</b></p>
	<p>SS informed the Council that the Committee had focussed on and reviewed health and wellbeing, Freedom to Speak Up, EDI and the Accommodation Strategy.</p> <p><b>Health and Wellbeing</b> A last-minute bid was put in to NHS Charities Together and the Trust has been awarded £22k towards health and wellbeing for staff. There will be weekly and online yoga classes and various other training sessions for staff.</p> <p><b>FTSU</b> Stenlake gave an update that was also presented to the Board as highlighted below:</p> <ul style="list-style-type: none"> <li>• that 40% of the caseload was racism related.</li> <li>• 55% of the cases raised were related to bullying and harassment.</li> <li>• Staff were concerned to speak up as they were worried about how they would be perceived.</li> <li>• 1½ days a week is allocated to FTSUG and there are plans to recruit another FTSUG. The job description has been drafted and the expressions of interest will be advertised imminently as the FTSUG role is very important.</li> </ul> <p>AK added that the job description was based on the national FTSU document.</p> <p><b>EDI</b></p> <ul style="list-style-type: none"> <li>• Thanda Mhlanga highlighted the achievements of the EDI Team and, that the pilot Reciprocal Mentoring programme had been launched and that there were 19 pairs. The Committee will receive data on how this has gone.</li> <li>• Thanda Mhlanga was asked to look at the EDI experience of patients and students, and to look at some of the good practices in clinical and DET.</li> </ul> <p><b>Accommodation Strategy</b></p> <ul style="list-style-type: none"> <li>• As staff are being asked to come into the Tavistock Centre more days, the Trust needs to look at how this is better dealt with. Benita Mehra is piloting the 3<sup>rd</sup> Floor for bookable spaces and by looking at how teams use the scheduling room booking system.</li> </ul> <p>JL noted that the building was not fit for full capacity and that a number of Executives</p>

	would be sharing rooms.
017	<b>Performance, Finance &amp; Resources Committee Highlight Report – 26 September 2023</b>
	<p>AM stated that the next Committee meeting will take place after the Board meeting next week. AM highlighted key points from the meeting held in September.</p> <ul style="list-style-type: none"> <li>• Significant progress has been made on IQPR on the wait times in GIC.</li> <li>• There were no major issues raised on the CIPs and Cash position</li> <li>• The GIC operational risks including wait times were agreed to be separated out as a specific set of new risks on the Risk Register.</li> </ul>
	<b>Closing Business</b>
018	<b>Questions form the Public</b>
	None.
019	<b>Any other urgent business</b>
	PJ enquired how the Trust intended to support those staff who were still having issues in the aftermath of the Strategic Review? MH noted that the Deputy HR Director was supporting those who had come forward, but that there is a need to consider how to engage with those who have not yet sought support.
020	<b>Issues to be escalated to the Board of Directors</b>
	<ul style="list-style-type: none"> <li>• Discussion was held about sending a letter to the GIDS staff</li> </ul>
021	<b>Review of Meeting</b>
	KH noted that it was great not discussing the same issues over and over again and, that issues are being progressed.
022	<b>Date of Next Meeting</b>
	Date of the Next Meeting – Thursday 14 <sup>th</sup> March 2024 at 2pm [venue to be confirmed].
	The meeting closed at 5.15pm

Council of Governors Part 2 - Public Action Log (Open Actions)									
Action Ref.	Meeting Date	Agenda Ref.	Agenda Item (Title)	Action Notes as follows:->	Open - New action added Action Due date	To Close - propose for closure Action owner (Name and Job Title)	Overdue - Due date passed Status (pick from drop-down list)	Not yet due - Action still in date Progress Note / Comments (to include the date of the meeting the action was closed)	
	16.3.23	1.5	Action log and matters arising	Expressions of interests from Governors will be sought to observe Board Committees.	8.6.23	Amanda Hawke, Corporate Governance Manager	To Close - completed	Proposal considered with NED Committee Chairs in February 2023. John Lawlor to circulate the proposal to Governors in March 2023. Expressions of interest from Governors will be sought to observe Board Committees. This has now been completed.	
	8.6.23	2.7	Council of Governors Development Programme 2023/24	Training - Governors Development Programme to be developed.	14.9.23	Adewale Kadiri, Director of Corporate Governance	Open	Governors are booked onto relevant events run by NHS Providers. <b>This was discussed at the December 2023 meeting.</b>	
	8.6.23	3.3	Quality Committee Highlight Report	CMcK held an event on suicide events reporting. The slides from this event will be circulated to Governors. Slides to be circulated to Governors.	14.9.23	Caroline McKenna, Deputy Chief Medical Officer	To Close		
23-003	14.9.23		Declarations of Interest	To double check all entries on the Register of Governors' Declarations of Interests 2023/24 for consistency and will do the same for the Board	07.12.23	Adewale Kadiri, Director of Corporate Governance	To Close	This was addressed at the meeting held in December 2023	
23-007	14.09.23		Governor Feedback	To discuss the feedback received from the Governors	07.12.23	John Lawlor, Trust Chair & Chair of the Council of Governors and Kathy Elliott, Lead Governor	Open		
23-007	14.09.23		Governor Feedback	To follow-up with Kathy Elliott on the governance matters raised in items 4 and 5 of the feedback: 4. More information was required on the context and role of the Governors. 5. Some Governors have found hybrid meetings a challenge. The Governors would also like to discuss communications and support available to Governors.	07.12.23	Adewale Kadiri, Director of Corporate Governance	Open	Update to be provided at the meeting	
23-007	14.09.23		Governor Feedback	Following a meeting with John Lawlor, Kathy Elliott and David Levenson regarding John's priorities for 2023-24. A report is to be submitted to the Chief People Officer and externally to NHS England.	07.12.23	Adewale Kadiri, Director of Corporate Governance	Open		

Action Ref.	Meeting Date	Agenda Ref.	Agenda Item (Title)	Action Notes	Action Due date	Action owner (Name and Job Title)	Status (pick from drop-down list)	Progress Note / Comments (to include the date of the meeting the action was closed)
23-008	14.09.23		Chief Executive's Report	Confirmation of the date and time of the AGM to be circulated to all relevant parties	asap	Amanda Hawke, Corporate Governance Manager	To Close	
23-008a	14.09.23		Freedom to Speak Up Guardian Report	As there was no mention in the BAF and the risk register of psychological safety, it was agreed that there should be a review of the risks considered in the inclusion of BAF and risk register.	asap	Sarah Stenlake, Freedom to Speak Up Guardian	Open	The 2024/25 BAF is being drafted in conjunction with the Board Committees and Executive Leads, and the draft document is to be presented at the April Board seminar. This issue will be reflected in the People related risks
23-017	14.09.23		Constitutional Changes on Voting members of the Board	Governors could not consider this agenda item on the proposed Constitutional changes and John Lawlor advised that this item would be deferred and that that Director of Corporate Governance should write to all the Governors to let them know when it would be considered.	asap	Adewale Kadiri, Director of Corporate Governance	To Close	This was addressed at the AMM meeting
	07.12.23	6	Tavistock Consulting	Presentation slides to the sent to the Governors	08.12.23	Amanda Hawke, Corporate Governance	To Close	Email was sent on 07.12.23
	07.12.23	11	Governor Observers on Board Committees	To send the expressions of interest email to governors to be observers at the board committee meetings	as soon as possible	Ade Kadiri, Director of Corporate Governance	To Close	Email was sent to Governors and expressions of interest were received. Governors were nominated to be observers on the board committees.

MEETING OF THE COUNCIL OF GOVERNORS PART II – PUBLIC – Thursday 28 March 2024					
Report Title: Chief Executive's Report				Agenda No.: 2.2	
Report Author and Job Title:	Michael Holland, Chief Executive	Lead Executive Director:	Michael Holland, Chief Executive		
Appendices:					
Executive Summary:					
Action Required:	Approval <input type="checkbox"/> Discussion <input checked="" type="checkbox"/> Information <input type="checkbox"/> Assurance <input type="checkbox"/>				
Situation:	This report provides a focused update on the Trust's response to specific elements of its service delivery and subsequent future, and the evolving health and care landscape.				
Background:	The Chief Executive's report aims to highlight developments that are of strategic relevance to the Trust and which the Board of Directors should be sighted on.				
Assessment:	This report covers the period since the meeting on 13 December 2023.				
Key recommendation(s):	The Council of Governors is asked to receive this report, discuss its contents, and note the progress update against leadership responsibilities within the CEO's portfolio.				
Implications:					
Strategic Objectives:					
<input checked="" type="checkbox"/> Improve delivery of high-quality clinical services which make a significant difference to the lives of the people & communities we serve.	<input type="checkbox"/> Be a great & safe place to work, train & learn for everyone. A place where we can all thrive and feel proud in a culture of inclusivity, compassion & collaboration.	<input type="checkbox"/> Develop & deliver a strategy & financial plan that supports medium & long-term organisational sustainability & aligns with the ICS.	<input type="checkbox"/> Be an effective, integrated partner within the ICS & nationally, supporting improvements in population health & care & reducing health inequalities.	<input type="checkbox"/> Ensure we are well-led & effectively governed.	
Relevant CQC Domain:	Safe <input type="checkbox"/>	Effective <input type="checkbox"/>	Caring <input type="checkbox"/>	Responsive <input type="checkbox"/>	Well-led <input type="checkbox"/>
Link to the Risk Register:	BAF <input checked="" type="checkbox"/>		CRR <input type="checkbox"/>		ORR <input type="checkbox"/>
	Risk Ref and Title: All BAF risks				
Legal and Regulatory Implications:	Yes <input type="checkbox"/>			No <input checked="" type="checkbox"/>	
Resource Implications:	Yes <input type="checkbox"/>			No <input checked="" type="checkbox"/>	
	Yes <input checked="" type="checkbox"/>			No <input type="checkbox"/>	

<b>Equality, Diversity, and Inclusion) implications:</b> (	There are equality, diversity and inclusion implications associated with this report.			
<b>Freedom of Information (FOI) status:</b>	<input checked="" type="checkbox"/> This report is disclosable under the FOI Act.	<input type="checkbox"/> This paper is exempt from publication under the FOI Act which allows for the application of various exemptions to information where the public authority has applied a valid public interest test.		
<b>Assurance:</b>				
<b>Assurance Route - Previously Considered by:</b>	This is a regular report that is produced for every Board meeting.			
<b>Reports require an assurance rating to guide the discussion:</b>	<input type="checkbox"/> <b>Limited Assurance:</b> There are significant gaps in assurance or action plans	<input type="checkbox"/> <b>Partial Assurance:</b> There are gaps in assurance	<input checked="" type="checkbox"/> <b>Adequate Assurance:</b> There are no gaps in assurance	<input type="checkbox"/> <b>Not applicable:</b> No assurance is required



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## Chief Executive's Report 28 March 2024

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1. This report provides a focused update on the Trust's response to specific elements of its service delivery and subsequent future, and the evolving health and care landscape.

### 2. Case for Change engagement sessions

The first of a series of Case for Change engagement sessions was held at the start of January. These highly interactive sessions, which are being held with Trust staff, service users and stakeholders, are an opportunity for attendees to think about and discuss the potential benefits and risks of a merger. They also allow participants to consider what we should look for in a potential merger partner, and what they would look for in us. Sessions for specific groups will continue to run into March.

### 3. The passing away of Isca Wittenberg

We were very sad to learn of the passing of Isca Wittenberg on 23 December 2023 at the age of 100. Isca had witnessed many of the 20<sup>th</sup> century's most turbulent periods, arriving in the UK from Frankfurt aged 16, her father, a rabbi, having already been briefly imprisoned and tortured at the Dachau concentration camp.

Isca trained as a child psychotherapist at the Tavistock, training under and working with some of the pioneers in that field, including Esther Bick, Anna Freud and John Bowlby. She later became Head of the newly developed Adolescent Department and continued to pioneer new approaches including the Young People's Counselling Service. Isca remained at the Tavistock for 25 years, ultimately rising to become its Vice-Chair. She was able to join us virtually last year for celebrations around the 75th anniversary of the NHS, and gave an interview reflecting on her work.

### Providing outstanding patient care

#### 4. PSIRF Training

30 members of Trust staff participated in a 3-day interactive training programme for the Patient Safety Incident Response Framework. The programme focused on four key aims:

- Compassionate engagement and involvement of those affected by patient safety incidents,
- Application of a range of system-based approaches to learning from patient safety incidents,
- Considered and proportionate responses to patient safety incidents, and
- Supportive oversight focused on strengthening response system functioning and improvement.

We know that full implementation of PSIRF will not be achieved by a change in policy alone, and it cannot be done in days or weeks, as it requires the design of a new set of systems and processes. Bringing together groups of staff from across the Trust to think collectively about how we can create a meaningful 'Just Culture' was inspiring and the next step will be to collectively role model and embed the compassionate engagement with and involvement of those affected by patient safety incidents, which is central to PSIRF.

## **5. Time to Talk Day 2024**

1 February was national Time to Talk Day. The Trust's vision, to be a leader in mental health care and education by using talking and relational therapies to make a difference in people's lives, resonates with the day's intention – to encourage open conversations about mental health. The importance that we place on talking therapies and listening to our service users is what makes our clinical work and teaching so impactful and transformative. We should encourage everyone around us to continue to have open conversations about mental health.

## **6. Announced Special Educational Needs and/or Disabilities (SEND) Inspection**

An announced SEND inspection took place across a range of services for school age children and young people in Haringey. The inspection was carried out jointly by Ofsted and CQC and was coordinated by the North Central London ICB; with sampling site visits to Tavistock and Portman on 31 January 2024. The outcome of the inspection will be communicated in due course.

## **7. Kaizen event at the City and Hackney primary care psychotherapy consultation service (PCPCS)**

The PCPS recently held a Kaizen event (based on the Japanese philosophy of continuous improvement) with a focus on improving outcomes and experience for service users, and on supporting local General Practices. All those in attendance were well engaged in trying to understand and solve the issues facing the service.

## **8. Gender Identity Clinic Quality Improvement event**

GIC also recently held a quality improvement event. Feedback received indicated that participants were fully engaged and positive energy flowing throughout. The 6 teams presented their 30-day plans in terms of the quality improvement work they have done and what they plan to complete over the next 60 and 90 days. Colleagues embraced the sessions, fostering a harmonious atmosphere that allowed for meaningful connections and a successful exchange of knowledge and experiences. Overall, the event was seen as a huge success, leaving everyone inspired and rejuvenated.

## **9. Gender Identity Development Service (GIDS) Update**

The Trust has been working collaboratively with the new providers to safely transfer the care of those patients still under our care to them by the end of March. Our staff

are understandably distressed by the closure of GIDS, and we have provided significant resources to support them over this difficult time. Some staff have already been redeployed within the Trust.

## **10. Ongoing Industrial Action**

Junior doctors are to be balloted for further industrial action once again with papers being sent out to BMA members in the second week of February. This comes after the announcement that Consultants have narrowly rejected the pay deal put forward by the government (51% rejected; 49% accepted) and it is now likely that further action will take place. All medical rotas in the Trust were covered during strike action in January which was the longest running period of strike action so far. Services continue to be monitored for safety during industrial action.

## **11. Relaunch of the Trust's Research & Development Group**

The relaunch of the redesigned Research and Development Group, which will feed into the Quality & Safety Committee, was held on 9 January. Chaired by the Chief Medical Officer, it will include representation from clinical, DET and operations staff working together to provide better oversight of all the research taking place across the Trust. It will also set a vision for the research we take part in, ensuring that this is aligned with the Trust's vision, mission and values.

## **Enhancing our reputation as a provider of training and education**

### **12. New senior medical appointments**

Dr Myooran Canagaratnam took up the role of Director of Medical Education on 1 February 2024. He has significant experience in Medical Education and is currently the Child & Adolescent Tavistock Training Program Director, though he will be stepping down from that role in due course. We would like to thank Dr Jessica Yakeley, the previous Director of Medical Education, for the invaluable knowledge, commitment and leadership she has brought to the role over the past 15 years.

In January 2024, Sheva Habel was appointed as the Named Doctor for Safeguarding, and she will also provide clinical advice to the Prevent lead. Sheva takes over as Named Doctor for Safeguarding from Caroline McKenna who has held the role since 2018. Caroline will continue in her role as Deputy Chief Medical Officer, and we would like to thank her for the dedication and expertise that she brought to this important and sensitive area of work. Sheva first joined the Trust in 2009 and has been working as a consultant child and adolescent psychiatrist since 2015. She has a long-term interest in safeguarding and working across networks.

### **13. "Nurturing Natures" updated**

Congratulations to Dr Graham Music, long standing Consultant Child and Adolescent Psychotherapist and lecturer at the Trust, on the publication of the third edition of his book, "Nurturing Natures". Graham has shared a video on the Trust website outlining

the new edition, and this includes the latest knowledge on children's emotional development, integrating research from attachment theory, neuroscience, development psychology and cross-cultural studies.

## **Great and Safe Place to Work, Train and Learn**

### **14. Great Mental Health Day**

26 January 2024 was the third Great Mental Health Day in London. The day forms part of efforts aimed at breaking the stigma that often surrounds discussions about mental health. Events took place across London, and three of our colleagues, John Lawlor, Gem Davies and Alisha Nurse, kindly shared their stories on our website and on our Trust's LinkedIn, Instagram, and X (Twitter) channels.

### **15. LGBTQI+ History Month and EDI Calendar**

February is LGBTQI+ History Month, and this year's theme is celebrating LGBTQI+ peoples' contribution to the field of Medicine and Healthcare. We will be hosting a talk from activist Dr Ronx Ikharia as well as holding a LGBTQI+ History Month exhibition. We are also planning to have an organisational presence at London Pride in July.

We have published our first EDI calendar on the intranet. This new calendar is part of our work towards a culture where all our service users, students and staff feel visible, welcome and celebrated.

### **16. New Stuart Hall Foundation Scholars**

Four students from the Trust's flagship M7 (perinatal, child, adolescent and family work) course are among the 20 new members welcomed into the Stuart Hall Foundation Scholars and Fellows Network. The Stuart Hall Foundation/Tavistock and Portman studentship aims to increase access to the Trust's courses and provide opportunities for students and academics from culturally diverse and disadvantaged backgrounds.

## **Well Led and Effective Governance**

### **17. Integrated Governance Action Plan**

In December 2022, the Trust set up the Integrated Governance Task and Finish Group to oversee and consolidate the implementation of actions emerging from the Office of Modern Governance board and leadership review, outstanding governance actions linked to Single Oversight Framework (SOF 3) exit criteria, internal audit and preparations for a CQC Well Led inspection. The Task and Finish Group worked closely with executive leads and the various Board Committees, taking a risk-based approach to the implementation of the actions.

The Group started with 113 actions and at the end of January 2024, 90 are complete, 6 were on track for completion by 31 January and a further 11 are in

progress with implementation expected by 31 March 2024. 5 actions are now no longer required and 1 will be dealt with as part of “business as usual.”

## **Partnership – Within the ICS and Nationally**

### **18. New Research Partnership with SOAS University of London**

The Trust is partnering with SOAS University of London to develop a new research centre with the aim of understanding and addressing inequalities in access to mental health care, challenges in provision, and deficits in the experience and outcomes of care. The circa £8m funding for the centre comes from Research England’s Expanding Excellence in England Fund. The Trust is excited to be a partner in this project to help reshape mental health care in London and globally.

## **Improving value, productivity, financial and environmental sustainability**

### **19. Development and Delivery of the Trust’s Strategy and Financial Plan**

The Trust’s draft Medium Term Financial Plan has been developed in line with the Integrated Care System planning process. The latest iteration shows the Trust maintaining its current planned deficit in 2024/25 and moving towards a balanced plan in 2025/26. The closure of the GIDS service at the end of 2023/24 with the associated loss of income is the primary driver behind the two-year timescale to get back to a balanced plan position. This will be further developed as part of the ICS planning process in the coming weeks.

The reported financial position at 31 December 2023 (reporting month 09) was a deficit of £2,698k in the period, against a planned deficit of £2,781k i.e. positive variance of £83k. This is a continuing improvement against plan from the earlier part of the year, and reflects the stabilisation of the expenditure, after the series of one-off costs incurred in those earlier months. The Trust therefore expects to achieve its year planned deficit of £2.5m, still predicated on the assumption that GIDS decommissioning costs are funded separately.

## **National and Political Context**

### **20. RCPsych reveals significant rise in urgent CAMHS demand**

To mark Children’s Mental Health Week, the Royal College of Psychiatrists is calling on the Government and ICBs to invest in targeted support for children and young people and turn the tide on the looming mental health crisis. Studies show that in just 4 years psychiatric teams have seen a 53% increase in the number of children in mental health crisis needing emergency support, rising from 21,242 referrals in 2019/20 to 32,251 in 2022/23.

The studies also show that many of these children have experienced deterioration in their mental health while on waiting lists, as overstretched CAMHS teams struggle to meet record levels of demand. Recently reported NHSE data shows that under-18s who are waiting for follow-up after a GP referral have already waited 5 months on average, and almost 2 years in the worst cases.

The Royal College had welcomed the Chancellor's announcement last year of an extra £5m to improve access to existing Early Support Hubs (for ages 11-25), but it cautions that an additional £125 to £205m is required to establish these hubs in every local authority.

## **21. National Review of Higher Education Suicides Announced**

On 25 January, the Minister for Skills, Apprenticeships and Higher Education, Robert Halfon MP, wrote to all higher education providers setting out the steps that they need to take to participate in the National Review of HE Suicides, to be led by University of Manchester's National Confidential Inquiry into Suicide and Safety in Mental Health. Mr Halfon explained that the aim of the Review was to ensure that lessons from past tragedies are learned in order that students are better protected in the future.

As well as announcing additional funding that was being made available to support providers in relation to student mental health and hardship, the Minister stated that NCISH would examine serious incident reports of suspected suicides and non-fatal incidents of self-harm, providing confidential feedback to providers and identifying common factors. He indicated that a report to the whole sector with anonymised findings would be published by Spring 2025 and encouraged all providers to take part in the review.

<b>Council of Governors (Open) 28<sup>th</sup> March 24 (M11)</b>			
<b>Report Title: Finance Report - As at 29<sup>th</sup> February 24 (Reporting Month 11)</b>			<b>Agenda No. 2.3</b>
<b>Report Author and Job Title:</b>	Udey Chowdhury, Deputy Chief Finance Officer	<b>Lead Executive Director:</b>	Peter O'Neill, Interim Chief Financial Officer
<b>Appendices:</b>	None		
<b>Executive Summary:</b>			
<b>Action Required:</b>	Approval <input type="checkbox"/> Discussion <input type="checkbox"/> Information <input checked="" type="checkbox"/> Assurance <input type="checkbox"/>		
<b>Situation:</b>	<p>The report provides the Month 11 (cumulative position to 29<sup>th</sup> February 24) Finance Report.</p> <p><b>Income &amp; Expenditure</b> The Trust incurred a net deficit of £2,933k in the period, against a planned deficit of £3,333k i.e., a positive variance of £400k. The Trust is anticipating achieving its year-end deficit plan of £2,517k.</p> <p><b>Capital Expenditure</b> To date capital spend totals £1,635k, versus the plan total of £1,991k. Anticipated expenditure at the year-end still expected to be on plan at £2,196k.</p> <p><b>Cash</b> The cash balance at the end of M11 is £3,827k against the planned figure of £5,685k. The negative variance of £1.858k reflects the timing of income receivables from NHS sources. This is still anticipated to catch up and be on plan by the year end.</p>		
<b>Background:</b>	The Trust has a plan for a revenue deficit for 2023/24 of £2.5m, with Capital Expenditure of £2.2k and a year-end cash position of £3.1m.		
<b>Assessment:</b>	<p><b>Income and Expenditure</b> The Trusts planned deficit of £2.5m requires the delivery of a £3m efficiency to achieve this. This is to be delivered by £2m of non-recurrent income and identified non-pay schemes of £1m. The Trust will in addition establish a process for planning and delivering recurrent efficiency opportunities to run alongside the current non-recurrent program to support the financial performance in future periods as part of the development of medium-term financial plans designed to get the Trust back further towards a balanced financial position. The Trust will decommission the GIDS at the end of March 24. The cost of decommissioning will need to be provided for in the reported position in this financial year. The actual cash flows associated with these anticipated costs, including significant redundancy costs, will be paid in the main in the next financial year. The current year-end projection assumes that these costs will be funded by NHSE, however at the time of writing discussions to secure funding were still ongoing with no firm agreement reached. Until funding is secured this remains a significant risk to the delivery of the planned deficit position in 23/24.</p>		

	<p><b>Capital Expenditure</b> The agreed capital spend for the year is £2.2m, is a reduction from the previous year of £0.9m and will require careful management to ensure the Trust spends to plan.</p> <p><b>Cash</b> The agreed plan included a reduction in cash over the year to an outturn of £3.1m, which reflects the planned deficit position, but not the then unknown impact of GIDS decommissioning. The impact on cash in 23/24 of GIDS decommissioning is now known to be minimal and will not impact materially on the planned year cash balance.</p>				
<b>Key recommendation(s):</b>	The Council is asked to <b>NOTE</b> the position outlined in the report.				
<b>Implications:</b>					
<b>Strategic Objectives:</b>					
<input type="checkbox"/> Improve delivery of high-quality clinical services which make a significant difference to the lives of the people & communities we serve.	<input type="checkbox"/> Be a great & safe place to work, train & learn for everyone. A place where we can all thrive and feel proud in a culture of inclusivity, compassion & collaboration.	<input checked="" type="checkbox"/> Develop & deliver a strategy & financial plan that supports medium & long-term organizational sustainability & aligns with the ICS.	<input type="checkbox"/> Be an effective, integrated partner within the ICS & nationally, supporting improvements in population health & care & reducing health inequalities.	<input checked="" type="checkbox"/> Ensure we are well-led & effectively governed.	
<b>Relevant CQC Domain:</b>	Safe <input type="checkbox"/>	Effective <input type="checkbox"/>	Caring <input type="checkbox"/>	Responsive <input type="checkbox"/>	Well-led <input checked="" type="checkbox"/>
<b>Link to the Risk Register:</b>	BAF <input checked="" type="checkbox"/>		CRR <input type="checkbox"/>		ORR <input type="checkbox"/>
	<p><b>BAF 8: Delivering Financial Sustainability Targets.</b> A failure to deliver a medium / long term financial plan that includes the delivery of a recurrent efficiency program bringing the Trust into a balanced position in future periods. This may lead to enhanced ICB/NHSE scrutiny, additional control measures and restrictions on autonomy to act.</p> <p><b>BAF 10: Suitable Income Streams</b> The result of changes in the commissioning environment, and not achieving contracted activity levels could put some baseline income at risk, impacting on financial sustainability. This could also prevent the Trust securing new income streams from the current service configuration.</p>				
<b>Legal and Regulatory Implications:</b>	Yes <input checked="" type="checkbox"/>			No <input type="checkbox"/>	
	It is a requirement that the Trust submits an annual Plan to the ICS and monitors and manages progress against it.				
<b>Resource Implications:</b>	Yes <input type="checkbox"/>			No <input checked="" type="checkbox"/>	
	There are no resource implications associated with this report.				
<b>Diversity, Equality and Inclusion (DEI) implications:</b>	Yes <input type="checkbox"/>			No <input checked="" type="checkbox"/>	
	There are no DEI implications associated with this report.				



<b>Freedom of Information (FOI) status:</b>	<input checked="" type="checkbox"/> This report is disclosable under the FOI Act.		<input type="checkbox"/> This paper is exempt from publication under the FOI Act which allows for the application of various exemptions to information where the public authority has applied a valid public interest test.		
<b>Assurance:</b>					
<b>Assurance Route - Previously Considered by:</b>	ELT				
<b>Reports require an assurance rating to guide the discussion:</b>	<input type="checkbox"/> <b>Limited Assurance:</b> There are significant gaps in assurance or action plans	<input checked="" type="checkbox"/> <b>Partial Assurance:</b> There are gaps in assurance	<input type="checkbox"/> <b>Adequate Assurance:</b> There are no gaps in assurance	<input type="checkbox"/> <b>Not applicable:</b> No assurance is required	



CHAIR'S ASSURANCE REPORT TO THE COUNCIL OF GOVERNORS					
Committee:	Meeting Date	Chair	Report Author	Quorate	
Education and Training Committee	Thursday 18 <sup>th</sup> January 2024	Sal Jarvis, Non-Executive Director	Elisa Reyes-Simpson Interim CETO/Dean of Postgraduate Studies	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Appendices:	None	Agenda Item: 3.1			
<b>Assurance ratings used in the report are set out below:</b>					
Assurance rating:	<input type="checkbox"/> Limited Assurance: There are significant gaps in assurance or action plans	<input type="checkbox"/> Partial Assurance: There are gaps in assurance	<input type="checkbox"/> Adequate Assurance: There are no gaps in assurance	<input checked="" type="checkbox"/> Not applicable: No assurance is required	
<b>The key discussion items including assurances received are highlighted to the Board below:</b>					
Key headline				Assurance rating	
<b>1. Finance &amp; Business: CETO Budget 23/24:</b> <ul style="list-style-type: none"> <li>The Committee received an update on the financial position of the Education and Training budget to the current full year forecast, including income by cost centre.</li> <li>The forecast will continue to be updated; this version is likely to be used for the first draft of the 24/25 budget to be submitted to NCL in January 2024.</li> <li>Work to refine the accuracy of the forecast will continue to ensure that the 24/25 Budget is based on the most realistic current data i.e., that non-recurrent income and expenditure is removed, and staff are recorded in the correct cost centres, as well as budgeting for vacancies into 24/25.</li> <li>Fees have been set for AY24/25 and the expected impact of these for tuition fee.</li> <li>income against student number assumptions will be reported in the next ETC report.</li> <li>We are awaiting confirmation of additional resource to take forward the Visiting Lecturer review in a project managed manner.</li> <li>The National Workforce Skills Development Unit will not continue after 31 March 2024.</li> <li>The Annual Financial Return 2023 to the OFS has been submitted.</li> </ul>				Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	
<b>2. CETO/Dean's report:</b> <ul style="list-style-type: none"> <li>There has been much focus on implementing enhancements that have been identified through a range of feedback opportunities from students, staff, and other stakeholders.</li> <li>Work is ongoing to strengthen our fundraising and bursaries offering and we are taking on board applicant feedback in relation to what we might develop.</li> <li>We have continued our staff engagement events, which have been well attended with staff making good use of this space to share their thoughts and concerns.</li> </ul>				Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>	

<ul style="list-style-type: none"> <li>• There continue to be gaps in staffing. We are actively recruiting to the permanent CETO role and vacant Head of Academic Registry role. Interim arrangements are in place to mitigate any impact on staff and student experience.</li> <li>• We have reviewed our staffing and infrastructure in terms of our readiness and ability to embrace our strategic ambitions for growth, with a proposal being developed for FIRM.</li> <li>• Planning is underway in relation to enhancements in respect of this year's recruitment cycle.</li> <li>• Focused work is underway to deliver DET's objectives to achieve our 3-year improvement plan and Trust strategic objectives. Positive progress has been made in relation to the A3 QI work on growing student intake and developing sustainable partnerships.</li> </ul>	
<p><b>3. Workforce Innovation Unit (WIU) regular activity and performance report</b></p> <ul style="list-style-type: none"> <li>• The National Workforce Skills Development Unit is progressing on its 23/24 project portfolio for NHS England Workforce Training and Education directorate (NHSE WT&amp;E). Several Unit and project related risks continue to remain high as a result of NWSDU contract termination in March 2024. Staff received formal redundancy consultation on 9 January 2024.</li> <li>• A new three-year business plan with a range of future options in light of the loss of the NWSDU contract was developed and submitted for review at the December ELT meeting. Following this a further option appraisal will be undertaken led by the Director of Strategy and Business Development.</li> <li>• The National Workforce Skills Development Unit is on target in year with eight open projects in 23/24 but faces two existential challenges, one in the recall of unallocated funding for 23/24 and the other in being decommissioned at the end of 23/24.</li> <li>• The TC / i-THRIVE part of the WIU appears to be on track to achieve a £235k (£20% of revenue) contribution to the Trust in 23/24. This contrasts with the £100,000 (12%) loss that these combined units have generated in the past. (i- Thrive has consistently contributed 25% to overhead over the last three years, hence the losses have been and continue to be driven by TC).</li> </ul>	<p>Limited <input type="checkbox"/>          Partial <input type="checkbox"/>          Adequate <input checked="" type="checkbox"/>          N/A <input type="checkbox"/></p>
<p><b>4. DET Development Update:</b></p> <ul style="list-style-type: none"> <li>• We are currently exploring international opportunities including to develop an overseas placement offer which would build on our existing visitors programme.</li> <li>• We are preparing a submission for the Department of Business &amp; Trade's (DBT) UK Healthcare Education mission to China, taking place in March 2024.</li> <li>• The Trust's international development lead (0.2 WTE) has recently resigned. This provides an opportunity for us to think about how to resource this important, strategic area of work.</li> <li>• We are shortly to go out to recruitment of the Commercial Development Lead for DET and are also exploring the possibility of redeployment of Project Managers from NWSDU to support the work of the Digital and Short Course Portfolio.</li> </ul>	<p>Limited <input type="checkbox"/>          Partial <input type="checkbox"/>          Adequate <input checked="" type="checkbox"/>          N/A <input checked="" type="checkbox"/></p>
<p><b>5. Annual Student Complaint Report:</b></p> <ul style="list-style-type: none"> <li>• We continue to manage complaints in line with our procedures, with the number of complaints received on par with previous years.</li> </ul>	<p>Limited <input type="checkbox"/>          Partial <input type="checkbox"/></p>

<ul style="list-style-type: none"> <li>There are some areas which require further work, particularly around ensuring both professional services staff and faculty are aware of their roles and responsibilities. This is particularly acute given changes in staffing post-strategic review. Several areas of concern in academic year 2022-23 related to these staff changes as well as vacancies in key roles.</li> <li>There is a need to pick up the work in relation to standard operating procedures to remove the risk of being over-reliant on emails.</li> <li>The proposal to the Financial Investment Review Meeting (FIRM) details a structure to address identified gaps in staffing. This includes a dedicated student credit controller. The SITS review will be looking to make sure our system and MyTap are fit for purpose. The cumulative effect of this alongside a general enquiry management/ticketing system, should be a reduction in gaps/single points of failure, shared processes, and a reduction in complaints.</li> </ul>	Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<p><b>6. Student Cases Report 2022/2023:</b></p> <ul style="list-style-type: none"> <li>The number of student cases (appeals, academic misconduct, student conduct concerns, professional suitability) continue to be low in relation to the number of students enrolled at the Trust, for most types of student case.</li> <li>An exception is Extenuating Circumstances, where high numbers of cases continue to be seen, although these have reduced.</li> </ul>	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<p><b>7. Psychoanalytic Clinical Portfolio Report for ETC 2023:</b></p> <ul style="list-style-type: none"> <li>There is a programme underway to consolidate the D58/D58L/BD58 with the D59I and D59F to create a modular master's training (M58/BM58/LM58) over four years that leads to registration with the British Psychoanalytic Council (BPC). The portfolio is also in the process of launching a post-graduate specialist training (Complex Trauma: The Tavistock Model – D19) over two years, based on the clinical model of the Tavistock's Trauma Service.</li> <li>One of the key developments is that discussions are underway to develop international versions of the programme, specifically to a Chinese market. Initial investigations are also underway to potentially extend the M58 programme to incorporate a Doctoral award.</li> <li>In terms of staffing, there is a full compliment. Recruitment is underway for an associate lecturer on M34, and the assessment lead role on M80 has been augmented. A joint research post, across M80 and M4 (in the Interprofessional Portfolio) has also been agreed and is going to advert. This will increase the profile and quality of research teaching across these doctoral programmes and ensure better governance of research degrees.</li> </ul>	Limited <input type="checkbox"/> Partial <input checked="" type="checkbox"/> Adequate <input type="checkbox"/> N/A <input type="checkbox"/>
<p><b>8. Proposal For Tavistock Awards:</b></p> <ul style="list-style-type: none"> <li>We are proposing to create a Tavistock Awards series to run alongside the current University of Essex honorary doctorate process and conferment.</li> <li>By creating a Trust wide Tavistock Award Series, we would be able to widen the pool of potential recipients to others the Trust wishes to recognise, whilst maintaining staff and student experience of the event.</li> </ul>	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<p><b>9. Strategic and Operation Risks relating to Education and Training:</b></p> <ul style="list-style-type: none"> <li>It was noted that Education &amp; Training is not a specific risk on the BAF. It was suggested that the A3 documents could be used as a starting point for thinking and developing the risk.</li> </ul>	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/>

	N/A <input type="checkbox"/>
<b>10. Integrated Governance Action Plan (IGAP) Milestones for Sign-off</b> <ul style="list-style-type: none"> <li>All of the milestones/ actions on the Integrated Governance Action Plan (IGAP) within the remit of the Committee have been completed.</li> </ul>	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<b>Summary of Decisions made by the Committee:</b>	
<ul style="list-style-type: none"> <li>The Committee <b>APPROVED</b> the recommendations to develop a Tavistock Award Series</li> <li>The Committee <b>AGREED</b> to hold a dedicated BAF seminar to determine the risks that could prevent the Trust from achieving its strategic ambition around education and training.</li> <li>The Committee <b>APPROVED</b> the 7 completed actions as final sign-off of implementation of the actions from the IGAP by the Committee.</li> </ul>	
<b>Risks Identified by the Committee during the meeting:</b>	
<p>The Committee identified the following risks for escalation to the Board of Directors:</p> <ul style="list-style-type: none"> <li>There is a risk that Visiting Lecturers could try and take legal challenge to the current contract in force without a review.</li> <li>Growing a sustainable source of bursaries applicable to a broader pool of students remains a significant challenge.</li> <li>There is a risk to student experience if we do not recruit to the Head of Academic Registry role in a timely manner.</li> <li>There is a risk we will not be able to meet our strategic ambitions for growth if we do not address gaps in our staffing and infrastructure.</li> <li>If commissions fall short of last years' the Digital and Short Course Portfolio will fail to meet its 10% increase in contribution.</li> <li>There is a risk that if we do not respond to student complaints and make enhancements/improvements to our education and training delivery in accordance with complaint outcomes, then this could lead to an increase in or repeat of student complaints, impacting on progression and recruitment, resulting in reputational damage and potential financial impact.</li> <li>There is a risk that if we are not seen to be responding to student complaints, then students will not raise their concerns until it is too late and/or use other avenues to raise their concerns.</li> <li>Ineffective senior leadership arrangements - A prolonged period of instability across the Trust Executive and senior management could impact on the effectiveness of governance, performance and engagement across the Trust, resulting in poor outcomes, levels of compliance, and staff performance.</li> </ul>	
<b>Items to come back to the Committee outside its routine business cycle:</b>	
The Committee did not request any items to be tabled outside its routine business cycle.	
<b>Items referred to the BoD or another Committee for approval, decision or action:</b>	
<b>Item</b>	<b>Purpose</b>
	<b>Date</b>

CHAIR'S ASSURANCE REPORT TO THE COUNCIL OF GOVERNORS					
Committee:	Meeting Date	Chair	Report Author	Quorate	
Integrated Audit and Governance Committee	6 <sup>th</sup> February 2024	David Levenson, Non-Executive Director	Peter O'Neill, Interim Chief Financial Officer	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Appendices:	None		Agenda Item: 3.2		
<b>Assurance ratings used in the report are set out below:</b>					
Assurance rating:	<input type="checkbox"/> Limited Assurance: There are significant gaps in assurance or action plans	<input type="checkbox"/> Partial Assurance: There are gaps in assurance	<input checked="" type="checkbox"/> Adequate Assurance: There are no gaps in assurance	<input type="checkbox"/> Not applicable: No assurance is required	
<b>The key discussion items including assurances received are highlighted to the Board below:</b>					
Key headline			Assurance rating		
<b>1. External Audit Planning:</b> <ul style="list-style-type: none"> <li>The Committee welcomed Grant Thornton to their first IAGC meeting.</li> <li>Parris Williams (GT) outlined the proposed approach to the 2023/24 audit and described the planning work done to date with the internal team. No major concerns or risks were highlighted by Parris, with a bespoke detailed audit plan to be finalized, as the pre audit work continues.</li> <li>The Committee discussed the potential risk that the limited internal resource could pose. It was recognized that the key to mitigating this risk is the early identification of the likely peaks in work, in particular sampling of transactions, and a more robust management of the audit as it progresses.</li> <li>GT are planning to complete all of the detailed audit work by mid-June to allow sign off by the deadline of 28th June.</li> </ul>			Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>		
<b>2. Internal Audit:</b> <ul style="list-style-type: none"> <li>The Committee received the draft internal annual plan for 2024/25, that had previously been agreed by ELT. The plan was agreed as presented with changes needed.</li> <li>The Committee received an update on the 2023/24 Internal Audit work, including the HFMA action plan. There are a reducing number of outstanding action points, with the majority relating to ongoing budget cleansing work and the development of the 24/25 efficiency program.</li> </ul>			Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>		
<b>3. Local Counter Fraud Plan:</b> <ul style="list-style-type: none"> <li>The Committee received the draft annual local counter fraud plan for 2024/25, that had previously been agreed by ELT. The plan was agreed as presented with changes needed.</li> </ul>			Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>		
<b>4. IGAP Assurance:</b>			Limited <input type="checkbox"/> Partial <input type="checkbox"/>		

<ul style="list-style-type: none"> <li>The Committee received an update on the IGAP plan to complete the recommendations from the Well-led review, with no significant risks to be referred to the Board of Directors.</li> </ul>	Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<p><b>5. Pre-Employment Checks:</b></p> <ul style="list-style-type: none"> <li>The Committee referred the findings in the local counter fraud report to the POD/EDI subcommittee, as the majority of the actions sit with the Chief People Officer.</li> </ul>	Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>
<p><b>Summary of Decisions made by the Committee:</b></p>	
<p><b>Risks Identified by the Committee during the meeting:</b></p> <p>The Committee identified the following risk for escalation to the Board</p> <p><b>BAF 8: Delivering Financial Sustainability Targets.</b>  A failure to deliver a medium / long term financial plan that includes the delivery of a recurrent efficiency program bringing the Trust into a balanced position in future periods. This may lead to enhanced ICB/NHSE scrutiny, additional control measures and restrictions on autonomy to act.</p> <p><b>BAF 10: Suitable Income Streams</b>  The result of changes in the commissioning environment, and not achieving contracted activity levels could put some baseline income at risk, impacting on financial sustainability. This could also prevent the Trust establishing sustainable new income streams and adapt the current Trust service configuration.</p>	
<p><b>Items to come back to the Committee outside its routine business cycle:</b></p> <p>There was no specific item over those planned within its cycle that it asked to return to the Board.</p>	
<p><b>Items referred to the BoD or another Committee for approval, decision or action:</b></p>	
<p><b>Item</b></p>	<p><b>Purpose</b></p>
<p><b>Date</b></p>	



CHAIR'S ASSURANCE REPORT TO THE COUNCIL OF GOVERNORS					
Committee:	Meeting Date	Chair	Report Author	Quorate	
Quality & Safety Committee	4 January 2024	Claire Johnston, Committee Chair, Non-Executive Director	Emma Casey, Associate Director of Quality	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
<b>Appendices:</b>		<b>Agenda Item: 3.3</b>			
<b>Assurance ratings used in the report are set out below:</b>					
<b>Assurance rating:</b>	<input type="checkbox"/> Limited Assurance: There are significant gaps in assurance or action plans	<input checked="" type="checkbox"/> Partial Assurance: There are gaps in assurance	<input type="checkbox"/> Adequate Assurance: There are no gaps in assurance	<input type="checkbox"/> Not applicable: No assurance is required	
<b>The key discussion items including assurances received are highlighted to the Board below:</b>					
Key headline			Assurance rating		
<p><b>1. Patient Safety Incident Response Framework (PSIRF)</b> The Committee received an update on the work of the PSIRF Transition Group, and the work undertaken to support the Trust's transition to implementing the new framework. The new national framework sets out the NHS's approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety.</p> <p>It was noted that;</p> <ul style="list-style-type: none"> <li>30 members of staff will undertake three days of formal PSIRF training in January 2024, delivered by an external training provider. Plans are also underway to introduce the level 1 Essentials of Patient Safety training for all staff via ESR. There is training and strengthened responsibilities relative to patient safety and PSIRF for the Board which is currently being developed.</li> <li>Three Patient Safety Partners were recruited in December 2023 following successful applications and interviews. Work planning for the new roles is underway including training and orientation with the Trust.</li> <li>A series of engagement workshops with staff to introduce the principles of PSIRF and the difference this means in practice took place during November and December 2023. These were very successful in terms of beginning the conversations around PSIRF and what it means for our staff and processes.</li> </ul> <p>The Chair noted the speed at which the teams had progressed the PSIRF and commended the inclusivity of this work.</p>			Limited <input type="checkbox"/> Partial <input type="checkbox"/> Adequate <input checked="" type="checkbox"/> N/A <input type="checkbox"/>		

<p><b>2. Physical Health review</b></p> <p>The Committee received an update on the review of the Trust’s physical health service, alongside proposals on future steps. Scoping work has taken place over the past year to gather feedback and evidence on what patients and staff need from a physical health provision benchmarked against national evidence and drivers. The findings of the scoping work indicated that the Trust’s future provision may be different to that which was previously provided, but in line with a holistic approach to health and wellbeing.</p> <p>It was noted there are initially two phases of work in the next steps phase; firstly, a trainee health psychologist will undertake phase one of the work of developing the Physical Health Form along with its contents in the next six months. Phase two of the next steps will focus on refreshing the resource pack, which will be maintained as part of the NCL Waiting Room project.</p> <p>The Committee noted the significance and innovation of this piece of work.</p>	<p>Limited <input type="checkbox"/></p> <p>Partial <input type="checkbox"/></p> <p>Adequate <input type="checkbox"/></p> <p>N/A <input checked="" type="checkbox"/></p>
<p><b>3. Local Risk Management System (LRMS) replacement</b></p> <p>The Committee received an update in relation to the new Local Risk Management System (LRMS). It was noted that good progress had been made in the project and implementation plan, however the project is in amber status due to the ambitious timescales and breadth of work that is needed. The Communications &amp; Engagement plan, plus training requirements, is currently under development.</p>	<p>Limited <input type="checkbox"/></p> <p>Partial <input checked="" type="checkbox"/></p> <p>Adequate <input type="checkbox"/></p> <p>N/A <input type="checkbox"/></p>
<p><b>4. Complaints</b></p> <p>The Committee reviewed a new version of the Trust’s Complaints &amp; PALS process, alongside a strengthened investigation report for formal complaints. This followed an extensive engagement exercise with clinical services and lead members of staff for complaints.</p> <p>The main points noted included:</p> <ul style="list-style-type: none"> <li>• The removal of 25 day working process timeline for response and replaced with 40 working days.</li> <li>• The Complaints &amp; PALS team are developing a SOP and documents to support the local resolution process.</li> <li>• There is a current backlog of 48 open complaints, which was a significant reduction in number from previous months.</li> <li>• Training around the new complaints process will commence in January 2024.</li> <li>• Strengthened accountability of all managers to be responsible for timely complaints management and the culture of feedback within their teams.</li> </ul> <p>The Committee approved the new investigation report template and process for complaints.</p>	<p>Limited <input type="checkbox"/></p> <p>Partial <input checked="" type="checkbox"/></p> <p>Adequate <input type="checkbox"/></p> <p>N/A <input type="checkbox"/></p>

**Summary of Decisions made by the Committee:**

- The Committee APPROVED the PSIRF Transition Group Terms of Reference
- The Committee APPROVED the CQC Improvement Group Terms of Reference

**Risks Identified by the Committee during the meeting:**

There were no new risks identified by the Committee during this meeting.

**Items to come back to the Committee outside its routine business cycle:**

None.

**Items referred to the BoD or another Committee for approval, decision or action:**

Item	Purpose	Date
N/A		



CHAIR'S ASSURANCE REPORT TO THE COUNCIL OF GOVERNORS (CoG)					
Committee:	Meeting Date	Chair	Report Author	Quorate	
People, Organisational Development, Equality, Diversity and Inclusion Committee	11 January 2024	Shalini Sequeira, NED	Gem Davies, Chief People Officer	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Appendices:	None		Agenda Item: 3.4		
<b>Assurance ratings used in the report are set out below:</b>					
Assurance rating:	<input type="checkbox"/> Limited Assurance: There are significant gaps in assurance or action plans	<input type="checkbox"/> Partial Assurance: There are gaps in assurance	<input checked="" type="checkbox"/> Adequate Assurance: There are no gaps in assurance	<input type="checkbox"/> Not applicable: No assurance is required	
<b>The key discussion items including assurances received are highlighted to the Board below:</b>					
Key headline			Assurance rating		
<b>1. EDI considerations</b>			Limited <input type="checkbox"/>		
<ul style="list-style-type: none"> <li>The committee received a paper from TM on the work on EDI considerations across the organisation, including a review of patient demographics. The chair made a request that a deep dive is undertaken at the next EDI Programme Board, focussing on ascertaining if the patient data is significant and whether it requires attention and if so, what the next actions should be.</li> <li>The committee received AK's EDI review report and was comfortable with the recommendations provided. In relation to potential EDI training, the committee asked AK and GD to consider and bring to POD EDI the outcomes we hope to achieve through the training before sourcing a relevant provider.</li> </ul>			Partial <input checked="" type="checkbox"/> Adequate <input type="checkbox"/> N/A <input type="checkbox"/>		
<b>2. Leadership &amp; Management Development Programme</b>			Limited <input type="checkbox"/>		
<ul style="list-style-type: none"> <li>The committee received a paper from SM, updating on the take up and cost of the programme to date. It was noted that there was a disappointing level of cancellations on the day of training, and disappointing uptake of the programme as none of the cohorts were full or nearly full. and that whilst some participants were clear that the programme was mandatory, others had not understood this. Exec presence on the first day of two cohorts had not been there however this has been addressed for future cohorts. The committee asked the EMT to ensure that all managers in their teams were freed up to go on the programme and enrolled themselves. The committee noted the excellent feedback for the programme from participants.</li> </ul>			Partial <input checked="" type="checkbox"/> Adequate <input type="checkbox"/> N/A <input type="checkbox"/>		
<b>3. Policy Review</b>			Limited <input checked="" type="checkbox"/>		
<ul style="list-style-type: none"> <li>The committee discussed the progress on producing and approving new/ updated policies to date and was informed that progress had stalled due to the rather confusing approval route. AK noted that FT's post had now been recruited to and that a review and revision</li> </ul>			Partial <input type="checkbox"/> Adequate <input type="checkbox"/> N/A <input type="checkbox"/>		

<p>of the Policy Approval Group would be a priority for the incoming postholder. This should ensure that a number of policies awaiting final sign off can quickly be signed off.</p>		
<p><b>4. Merger and service decommissioning impact</b></p> <ul style="list-style-type: none"> <li>The committee received a paper from GD, outlining potential impacts of both the merger preparations and implementation, and the closure of decommissioned services. It was noted that EDI considerations will be paramount in indicating the likely success of a merger and an equality impact assessment will be undertaken in due course. It was also noted that one of the impacts is a huge amount of extra work, on top of BAU, for the People team.</li> </ul>	<p>Limited <input type="checkbox"/>          Partial <input type="checkbox"/>          Adequate <input type="checkbox"/>          N/A <input checked="" type="checkbox"/></p>	
<p><b>Summary of Decisions made by the Committee:</b></p>		
<p>The Committee approved the Terms of Reference for the POD Delivery Group.</p>		
<p><b>Risks Identified by the Committee during the meeting:</b></p>		
<p>There was no new risk identified by the Committee during this meeting, however a paper was circulated after the meeting on BAF risks and the committee members were asked to read it and return comments to AK.</p>		
<p><b>Items to come back to the Committee outside its routine business cycle:</b></p>		
<p>There was no specific item over those planned within its cycle that it asked to return.</p>		
<p><b>Items referred to the BoD or another Committee for approval, decision or action:</b></p>		
<p><b>Item</b></p>	<p><b>Purpose</b></p>	<p><b>Date</b></p>
<p>None</p>		

MEETING OF THE COUNCIL OF GOVERNORS PART 11 - PUBLIC – Thursday, 28 March 2024			
Report Title: Fit and Proper Persons Test – Annual Checks 2023/24			Agenda No.: 4.1
Report Author and Job Title:	Dorothy Otite, Governance Consultant	Lead Director:	John Lawlor, Chair of the Trust Board and Council of Governors
Appendices:	None		
<b>Executive Summary:</b>			
Action Required:	Approval <input type="checkbox"/> Discussion <input type="checkbox"/> Information <input checked="" type="checkbox"/> Assurance <input checked="" type="checkbox"/>		
Situation:	This report provides the outcome of the Fit & Proper Persons Test Annual Checks for 2023/24.		
Background:	<p>The amendment to the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 which took effect from 27 November 2014 resulted in a new <i>'Directors Fit and Proper Persons'</i> test. This applies to all NHS organisations and includes Executive and Non-Executive Directors (NEDs) appointed to the Board.</p> <p>NHSE published a new Fit and Proper Person Framework for Board Members on 2 August 2023 alongside guidance for Chairs and staff on implementation. NHSE expect the full implementation of the framework by 31 March 2024.</p> <p>The framework introduced a new requirement for an annual submission to the NHS England Regional Director (<b>for 2024 the deadline is 31 March 2024</b>).</p> <p>To ensure alignment with the new framework, the Board approved a new FPPT Policy for the Trust in December 2023. The FPPT policy requires the Trust to review the fitness of Directors annually to ensure they remain fit and proper to perform their Board roles.</p>		
Assessment:	<p>Each Board member completed an annual self-attestation (annual declaration) in 2023/24 confirming they remained 'fit and proper' to carry out their Board roles.</p> <p>An annual check was conducted between February and March 2024 to confirm compliance with the new framework. This included individual director checks on the bankruptcy and insolvency register; the disqualified directors register; the removed charity trustee register; and employment tribunal records.</p> <p>The Trust Chair carried out a review of individual Directors' evidence files and signed off all Board Directors as being fit and proper. The SID also reviewed the Trust Chair's evidence file and confirmed the Trust Chair as being a fit and proper person.</p> <p><b>On the basis of the above, the 2023/24 FPPT checks confirm that, at the time of the checks all Board Directors were considered to have met the Fit and Proper Persons Test.</b></p>		

	Following approval by the Board, the Director of Corporate Governance will submit the FPPT report to the NHSE Regional Director on 28 March 2024.				
<b>Key recommendation(s):</b>	The Council of Governors is asked to: - <b>NOTE</b> and receive <b>ASSURANCE</b> from the outcome of the FPPT annual checks for 2023/24 which confirms the fitness of all Board members.				
<b>Implications:</b>					
<b>Strategic Objectives:</b>					
<input type="checkbox"/> Improve delivery of high-quality clinical services which make a significant difference to the lives of the people & communities we serve.	<input type="checkbox"/> Be a great & safe place to work, train & learn for everyone. A place where we can all thrive and feel proud in a culture of inclusivity, compassion & collaboration.	<input type="checkbox"/> Develop & deliver a strategy & financial plan that supports medium & long-term organisational sustainability & aligns with the ICS.	<input type="checkbox"/> Be an effective, integrated partner within the ICS & nationally, supporting improvements in population health & care & reducing health inequalities.	<input checked="" type="checkbox"/> Ensure we are well-led & effectively governed.	
<b>Relevant CQC Domain:</b>	Safe <input type="checkbox"/>	Effective <input type="checkbox"/>	Caring <input type="checkbox"/>	Responsive <input type="checkbox"/>	Well-led <input checked="" type="checkbox"/>
<b>Link to the Risk Register:</b>	BAF <input type="checkbox"/>		CRR <input type="checkbox"/>		ORR <input type="checkbox"/>
	None				
<b>Legal and Regulatory Implications:</b>	Yes <input checked="" type="checkbox"/>			No <input type="checkbox"/>	
	The amendment to the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 requires all Trusts to ensure that all executive and non-executive director posts (or anyone performing similar or equivalent functions) are filled by people that meet the requirements of FPPR.				
<b>Resource Implications:</b>	Yes <input type="checkbox"/>			No <input checked="" type="checkbox"/>	
	There are no additional resource implications associated with this report.				
<b>Equality, Diversity, and Inclusion (EDI) implications:</b>	Yes <input checked="" type="checkbox"/>			No <input type="checkbox"/>	
	The Leadership Competency Framework will support the recruitment and appraisal of NHS Board members. The Framework will cover six competence categories including equality; and creating a compassionate and inclusive culture. These will feed into job descriptions and the appraisal process.				
<b>Freedom of Information (FOI) status:</b>	<input checked="" type="checkbox"/> This report is disclosable under the FOI Act.			<input type="checkbox"/> This paper is exempt from publication under the FOI Act which allows for the application of various exemptions to information where the public authority has applied a valid public interest test.	
<b>Assurance:</b>					
<b>Assurance Route - Previously Considered by:</b>	Board of Directors (Closed) – 27 March 2024				



<b>Reports require an assurance rating to guide the discussion:</b>	<input type="checkbox"/> <b>Limited Assurance:</b> There are significant gaps in assurance or action plans	<input type="checkbox"/> <b>Partial Assurance:</b> There are gaps in assurance	<input checked="" type="checkbox"/> <b>Adequate Assurance:</b> There are no gaps in assurance	<input type="checkbox"/> <b>Not applicable:</b> No assurance is required
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