

Trust Board – 31 May 2022

Review of the interim arrangements for Trust governance

Purpose of the report

To respond to the Letter (C1647) issued by NHSI on 19 May 2022 regarding the next steps on transition from Covid-19 response to recovery, with a further review of the interim arrangements for Trust governance.

Analysis of the issue

With community cases and hospital inpatient numbers now seeing a sustained decline, the Operational Pressure Escalation Level (OPEL) has reduced from a National Level 4 Incident to a Regional Level 3 Incident.

According to the LPT COVD-19 internal executive capacity alert system, the impact of Level 3 includes the following;

Forums & Meetings



Governance



Proposal

The transition to Level 3 triggers a formal review of the interim governance arrangements which were put in place to ease the burden during the Covid-19 pandemic.

G



Interim Governance Arrangements

Meetings were categorised to determine the governance approach, ranging from critical to low. Those meetings determined as critical or high have continued with a reduced scope and agenda, focussing on escalation. We are proposing to end the assessment of criticality for level 2 meetings and reinstate a full schedule of level 2 meetings from June 2022.

We also intend all level 1 and 2 meetings to operate with a full agenda by removing the covid restricted priorities from June 2022.

In order to balance the OPEL level with the Trust's move towards service restoration and increasing momentum with the delivery of its Step up to Great strategic objectives and priorities, the trust is placing an impetus on reinstating its level 3 meetings with a full remit. However, in line with the internal executive capacity alert system, any level 3 meetings which are risk assessed as low priority can be paused where covid continues to impact on capacity.

Assurance meetings will continue to be virtual on Microsoft Teams unless a Covid 19 secure environment can be offered to staff and/or until such time that the Covid 19 pandemic does not present further risk to health.

Trust Board, level 1 and Executive Team development meetings including workshops may be conducted face to face dependent on a covid secure environment.

Quoracy will continue to apply for all meetings including virtual meetings.

Reducing the Burden

In response to the letter from NHS England and Improvement dated 24 December 2021 (ref. C1518), the Trust put in place measures to reduce the burden of reporting and release capacity to manage the COVID-19 pandemic. Following the recent decrease in OPEL level, the following elements of that response have been formally rescinded as follows;

A. Governance and Meetings

The locally determined interim arrangements relating Board and sub-board meetings, and agile decision making have been addressed in the section above. The Trust is proposing to rescind interim measures for level 1, 2 and 3 meetings, with a flexible approach where demand is impacting capacity to risk assess level 3 meetings; those with low risk may be paused.

B. Reporting and Assurance

The Trust will continue to fulfil requirements for the following;

- To maintain constitutional standards for community crisis, Mental health, learning disability and autism services
- To continue to collect Friends and Family Test data

C. Other areas including HR and staff-related activities

- Appraisal pay step progression will be turned back on in July 2022. Communication has been issued giving notice to staff that mandatory training and appraisal must be completed to enable pay step progression.
- Non-essential workforce reports have not been impacted and continue as usual.
- Non urgent HR employment relations has not been impacted and continue as usual.
- Job evaluation panel is back up and running.
- Training programme (full programme of OD / Leadership / essential HR) has not been impacted and continues as usual.
- Process for undertaking full DBS was not impacted and continues as usual.



Public Inquiry

- The project to support the Public Inquiry into Covid-19 was paused in December 2021. In light of ongoing progress with the national Terms of Reference, work will now formally continue within the Trust to support the preparation of evidence.

ICC

The Incident Control Centre was de-escalated in March 2022 to support reset and rebuild in anticipation of a reduction in the Incident Level. The ICC moved to a 5 day per week model (subject to regional instruction) with the ICC managing routine activity as per below, using the LPT DoC as arms-length support:

- Situation L3 Major Incident SAGE L2
- Daily 0830 Huddle ICC Core Team & DoC (Stood down)
- Daily 1600 By Exception
- ICC Gold Call Wed (Stood down)
- Enhanced huddle Fri 1600 Utilise as On Call Prep for the weekend could open it to all DoC and On Call Managers (**Stood down**)
- No meetings at the weekends or OOH On Call Framework to manage No requirement to monitor ICC Inbox or telephone
- Review the SITREP Process ICC and INFO Team to manage

Decision required

- To approve the proposal for a reinstatement of level 2 and 3 committees from June 2022
- To agree to a flexible approach which allows for level 3 meetings to remain paused where risk assessed as low risk.
- To approve the current activity noted under the 'reducing the burden' categories.



Governance table

For Board and Board Committees:	Trust Board 31 st May 2022	
Paper sponsored by:	Chris Oakes, Director of Governance and Risk	
Paper authored by:	Kate Dyer, Deputy Director of Governance and Risk	
Date submitted:	20 May 2022	
State which Board Committee or other forum within the Trust's governance structure, if any, have	Strategic Executive Board 27 May 2022	
previously considered the report/this issue and the date of the relevant meeting(s):		
If considered elsewhere, state the level of assurance gained by the Board Committee or other forum i.e. assured/ partially assured / not assured:	NA	
State whether this is a 'one off' report or, if not, when an update report will be provided for the purposes of corporate Agenda planning	One off	
STEP up to GREAT strategic alignment*:	High S tandards	
	Transformation	
	Environments	
	Patient Involvement	
	Well Governed	Yes
	Reaching Out	
	Equality, Leadership, Culture	
	Access to Services	
	Trust wide Quality Improvement	
Organisational Risk Register considerations:	List risk number and title of risk	NA
Is the decision required consistent with LPT's risk appetite:	Yes	
False and misleading information (FOMI) considerations:	None	
Positive confirmation that the content does not risk the safety of patients or the public	Confirmed	
Equality considerations:	None	