

Agenda and Papers

for the

Kent Community Health NHS Foundation Trust
Council of Governors

to be held at 1pm
on

Wednesday 27 April 2022

Boardroom, The Oast, Unit D, Hermitage Court,
Maidstone, ME16 9NT

and via MS Teams

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*The NHS Staff Survey Benchmark Report is included under separate cover due to its size

**Meeting of the Kent Community Health NHS Foundation Trust
Council of Governors
to be held at 1.00pm on Wednesday 27 April 2022
Boardroom, The Oast, Unit D, Hermitage Court, Maidstone, ME16 9NT
and via MS Teams**

AGENDA

1. STANDARD ITEMS

1.1	Introduction by Chair	Chair	
1.2	Apologies for Absence	Chair	
1.3	Declarations of Interest	Chair	
1.4	Minutes of the Kent Community Health NHS Foundation Trust Council of Governors meeting held on 26 January 2022	Chair	Att. 1
1.5	Matters Arising of the Kent Community Health NHS Foundation Trust Council of Governors meeting held on 26 January 2022	Chair	Att. 2
1.6	Chair's Report	Chair	
1.7	Trust Quarterly Report	Acting Chief Executive	Att. 3

2. ITEMS FOR REVIEW AND DISCUSSION

2.1	Quality Strategy	Chief Nurse	Presentation
2.2	Staff Survey Results	Director of People and Organisational Development / Chair of Strategic Workforce Committee	Att. 4
2.3	Governor feedback from each of the constituencies	Full Council	Verbal
2.4	Report on Patient and Public Engagement, Experience & Complaints	Director of Participation, Experience and Patient Engagement	Att. 5

2.5	Freedom to Speak Up Report	Freedom to Speak Up Guardian / Non-Executive Director Lead	Att. 6
2.6	Governor Elections	Director of Corporate Services	Att. 7
2.7	Edenbridge Memorial Health Centre project and property transfers from NHS Property Services	Director of Corporate Services	Presentation

3. ITEMS FOR APPROVAL

4. PAPERS AVAILABLE FOR GOVERNORS

- 4.1 The following papers are shared for Governor information and are available on Flo: For noting only
- Formal Board Agenda – 12 February 2022
 - Confirmed Board Minutes – 11 November 2021
 - Chief Executive's Report
 - Committee Assurance Reports
 - Integrated Performance Report

5. ANY OTHER BUSINESS

- 5.1 Any other items of business previously notified to the Chair.

6. QUESTIONS FROM MEMBERS OF THE PUBLIC RELATING TO THE AGENDA

7 DATE AND VENUE OF NEXT MEETING

The next meeting of the Kent Community Health NHS Foundation Trust Council of Governors will take place in public at 1pm on Wednesday 20 July 2022 at the Clive Emson Conference Centre, Kent Event Centre, Maidstone, Kent, ME14 3JF



UNCONFIRMED Minutes
of the Kent Community Health NHS Foundation Trust Council of Governor's Meeting
Held at 1pm on Wednesday 26 January 2022
Held virtually via MS Teams

Present:

John Goulston, Chair
Janet Allen, Staff Governor, Corporate Services
William Anderson, Staff Governor, Adult Services
Elaine Ashford, Public Governor, Dartford
Dr Loretta Bellman, Public Governor, Tunbridge Wells
Alison Carter, Appointed Governor
Carol Coleman, Public Governor, Dover and Deal
Ruth Davies, Public Governor, Tonbridge and Malling
Dawn Gaiger, Staff Governor, Adult Services
Gill Harris, Public Governor, Sevenoaks
Miles Lemon, Public Governor, Swale
Kimberley Lloyd, Staff Governor, Health and Wellbeing Services
Dot Marshall, Public Governor, Gravesham
John Norley - Appointed Governor for Age UK
David Price, Public Governor, Maidstone
Lynne Spencer, Public Governor, Canterbury
Dr Sue Plummer, Appointed Governor, Universities
John Woolgrove, Public Governor, Rest of England

In Attendance:

Pippa Barber, Non-Executive Director
Natalie Davies, Director of Corporate Services
Gordon Flack, Acting Chief Executive
Joy Fuller, Governor Lead (Minute Taker)
Victoria Robinson-Collins, Director of People and Organisational Development
Gerard Sammon, Director of Strategy and Partnerships

26/1/1 Introduction by Chair

Mr Goulston welcomed everyone present to the meeting of the Council of Governors (the Council).

Mr Goulston reminded the Council that the meeting would be recorded, and the recording would be available on the public website.

26/1/2 Apologies for Absence

Apologies were received from Maria-Loukia Bratsou - Staff Governor, Matthew Wright - Appointed Governor, Kathy Walters - Public Governor for Ashford and Daniel Mott – Public Governor for Folkestone and Hythe.

The meeting was quorate.

26/1/3 Declarations of Interest

No conflicts of interest were declared other than those formerly recorded.

Mr Goulston confirmed that his appointment as Interim Chair of the Kent and Medway Integrated Care Board (ICB) had ended on 30 November 2021, and Cedi Frederick had been appointed as the new substantive Chair.

26/1/4 Minutes of the Kent Community Health NHS Foundation Trust (the Trust) Council of Governors meeting held on 3 November 2021

The Council **AGREED** the minutes.

26/1/5 Matters Arising

Mr Goulston confirmed that Cedi Frederick and Paul Bentley, Chair and Chief Executive of the ICB respectively, had been invited to the Governor Development Day on 6 April to update the Council, along with the Executive and Non-Executive Directors who had also be invited to attend.

The Council **RECEIVED** the Matters Arising.

26/1/6 Chair's Report

Mr Goulston presented a verbal report to the Council.

Mr Goulston welcomed Gordon Flack as the Acting Chief Executive to the Council meeting. He confirmed that the appointment would be in place for approximately six months until a new substantive Chief Executive was in post. Mr Goulston recorded his thanks to Mr Bentley who had been Chief Executive of the Trust for six years.

Mr Goulston confirmed that Ms Gill Jacobs, Deputy Director of Finance, had been appointed as Acting Director of Finance.

On behalf of the Council, Mr Goulston recorded thanks to two Non-Executive Directors, Mr Francis Drobniowski and Ms Sola Afuape, who had stepped down from their posts. He confirmed that the Trust had appointed two new Non-Executive Directors (NEDs) and an Associate NED. He thanked governors involved in the stakeholder event and the interview panel.

Mr Goulston confirmed that a Board development day would take place on 10 March with an external facilitator to reflect on lessons learnt, review leadership and chairs of committees. It was agreed that the board designations proposal would be brought to the next Council of Governors meeting.

Action – Mr Goulston

The Council **RECEIVED** the Chair's Report.

26/1/7 Trust Quarterly Report

Mr Flack presented the report to the Council.

Mr Flack asked the Council to take the report as read, and highlighted a number of items contained within the report.

Mr Flack explained that it continued to be a pressurised time, with Kent and Medway Trusts set at Operational Pressures Escalation Level (OPEL) 3. He explained that only around 9% of beds had been occupied with Covid patients, but bed occupancy levels remained high overall.

In response to a question from Ms Lloyd, Mr Flack confirmed that the Covid vaccination rate for staff was high, and added that the Trust had been working through business continuity issues in relation to staff that remained unvaccinated. Ms Robinson-Collins confirmed that the Trust had held an open webinar for staff to discuss the implications of not having the vaccine and mitigations for loss of staff. Ms Robinson-Collins confirmed that the teams had been working hard to talk to staff to ask them to submit evidence of their vaccine status. She added that sessions had been planned for staff who remained hesitant, where they would offer to provide the vaccine with as much support as possible.

In response to a question from Dr Plummer, Mr Flack explained that the Trust hoped it would reach the same level of flu vaccine uptake as in the previous year, approximately 60%, and he highlighted that the uptake of the flu vaccine had improved year on year. He added that the Trust had continued to impress on staff the importance of having the flu vaccine, and a peer vaccination programme had been implemented. Ms Barber commented that the Trust had conducted a benchmarking exercise which had showed that the Trust were similar to other Trusts in terms of uptake.

In response to a question from Ms R Davies, Mr Flack agreed that the Council should receive an update on workforce development and the Academy. Ms Barber commented that both the Council and Non-Executive Directors would benefit from an update on the Academy.

Ms Robinson-Collins agreed to provide presentation on workforce development and the Academy at a future Governor Development Session. It was agreed that it would be added to the forward plan.

Action – Ms Robinson-Collins / Ms Fuller

Ms Barber explained that the Quality Committee had conducted a deep dive into Musculoskeletal (MSK) to seek assurance around Physios and the need to work across the system and ensure that there was enough training.

In response to a question from Ms Ashford, Mr Flack confirmed that the Trust had not seen a large impact of long Covid. Ms Robinson-Collins echoed that the numbers of staff impacted had remained small, but continued to offer as much support as possible to those affected, and to ensure that they could return to work in a supportive way. Mr Goulston added that Maidstone and Tunbridge Wells NHS Trust had taken the lead on running long Covid clinics for the population of Kent and Medway.

Ms Coleman thanked Ms Verity Barton, Widening Participation Lead, for sending two representatives from the academy, to a careers fair at a school where she was a Trustee. She highlighted that there had been a lot of interest from pupils.

Ms Coleman commented on the good research work being conducted by the Trust, which she had been involved in as a lay research champion. She commented that she would like to see better promotion of the research work, and better collaboration with Quality Improvement (QI).

The Council **RECEIVED** the Chief Executive's Report.

26/1/8 Strategic Priorities for 2022/23

Mr Sammon presented the report to the Council.

Mr Sammon explained that the Trust would continue to engage with as many people as possible, including staff and stakeholders, on the strategic priorities and what the Trust should work further and faster on. He added that the Trust had already pulled together feedback received to date, via staff surveys and the Trust's leadership forum. He invited the governors to send their comments on the Strategic Priorities.

In response to a question from Mr Price, Mr Sammon explained that the final pie chart on the report (item 2.1) had related to feedback received in relation to what the Trust needed to focus on and the alignment to the four key goals.

In response to a question from Mr Anderson, Mr Sammon agreed that a more integrated system strategic workforce plan was needed and he explained that workforce was one of the top priorities for place-based partnerships. He explained that trusts and primary care had started to work more strategically in relation to the training needs of the future workforce and developing relationships between the organisations. He added that there had been some learning around coastal and rural communities, where even more innovative solutions had to be found to attract and develop workforce.

Mr Sammon commented that the Trust's academy approach to recruiting and developing staff locally was being discussed for roll out in a much more strategic manner with the implementation of the ICB.

In response to a question from Ms R Davies, Mr Sammon explained that the 18-week Referral to Treatment (RTT) target was set nationally. He was pleased to report that the majority of patients were being seen and treated within the 18-week target. Mr Sammon explained that there was often a triaging aspect to the waiting times, and those who required urgent treatment based on clinical need were seen as quickly as possible. Mr Flack added that the Trust had set local targets of 12 weeks rather than 18 weeks, and were based on clinical need rather than a target.

In relation to a question from Ms Spencer regarding diversity in Trust workforce, Mr Sammon commented on the recent successful recruitment of colleagues from overseas, had been successful and was looked at to expand over the next year. It was important for the Trust to look at all opportunities for recruiting the right people into the organisation.

Ms Robinson-Collins reiterated the successful recruitment of colleagues from overseas. She added that there was a plan to recruit a further 100 international colleagues within the next 12 months.

It was agreed that the final version of the Strategic Priorities for 2022/23 including outcomes would be presented to the Council at their Development Session in April.

Action – Mr Sammon

The Council **RECEIVED** the Strategic Priorities for 2022/23.

26/1/9 **Chief Executive Recruitment**

Mr Goulston presented the report to the Council, which had been approved at the Remuneration Committee.

Mr Goulston confirmed that the Trust had appointed an executive search company to assist with the recruitment of the Chief Executive and the closing date for applications was 31 January 2022. He explained that there would be a Stakeholder event for the shortlisted candidates on Friday 11 March. It was agreed that an invitation for governors to attend the stakeholder event would be circulated.

Action – Ms Robinson-Collins / Ms Fuller

Mr Goulston confirmed that the Lead Governor or Deputy Lead Governor would be a member of the interview panel. He added that Anne Eden, NHS Regional Director (South East) would be on the interview panel as an external assessor. He confirmed that the final appointment would need to be approved at an extraordinary Council of Governors meeting.

In response to a question from Ms R Davies, Ms Robinson-Collins confirmed that candidates shortlisted for interview would be subject to a series of ability and psychometric tests, which would include numerical reasoning, written information and pulling out key themes.

Mr Goulston explained that the stakeholder event would be a good opportunity for governors to review each of the shortlisted candidates, and to gain an understanding of their values.

The Council **RECEIVED** the Recruitment Process for the Chief Executive.

26/1/10 **Governor Feedback from each of the Constituencies**

Mr Goulston invited governors to provide feedback or issues.

Ms Coleman attended a presentation by the Clinical Commissioning Group, which had provided an update report on the pandemic, and how it had impacted on primary care and acute care, and to a much smaller degree, community care. Ms Coleman had been concerned that the presentation did not mention community nurses. She confirmed that she had requested for future reports to give more focus to the impact on community nurses and community hospitals. Mr Flack agreed to flag this with Mr Bentley, in his new role as Chief Executive Designate of the Integrated Care Board.

Action – Mr Flack

Ms Spencer and her partner had attended the Queen Elizabeth The Queen Mother Hospital (QEQM) as her partner had fallen ill. She reported that her partner had received excellent care. Ms Spencer confirmed that she was a member of her local practice participation group, and reported that there had been unprecedented demand with patients becoming increasingly frustrated.

Ms Harris reported that she was due to visit Sevenoaks Hospital to view the Stroke ward. The Matron had already provided Ms Harris with some information.

Ms R Davies had been in contact with the League of Friends at the Tonbridge Cottage Hospital and had volunteered at one of the vaccination centres. Ms R Davies had reported on the low profile of school nurses, and had received some concerns about the mental health of pupils in relation to Covid.

The Council **RECEIVED** the governor feedback.

26/1/11 Report from the Communications and Engagement Committee

Ms Coleman provided a verbal report to the Council.

Ms Coleman explained that the Trust had been unable to deliver the “Let’s Discuss...” events during 2021 due to the pandemic.

The Committee had provided some assistance to the Communication and Engagement Team who had worked on Winter Well, a 7-day initiative in December, which provided members of the public with useful health information such as how to deal with slip, trips and falls, urgency care services, and how to look after your family and children. Ms Coleman confirmed that all videos and initiatives remained available online. She added that the initiative was successful with over 13,000 contacts made within the first week via various social media platforms, and to date they had received in excess of 65,000 contacts where it had been shared or revisited. Ms Coleman explained that the Trust did not receive any support from the local media due to other priorities at the time, and the initiative was only shared via media which the Trust owned or ran themselves, such as social media platforms and the Community Health magazine. The Committee recommended that planning for the initiative should start earlier in the year, so that local media could be notified in good time.

Ms Coleman congratulated the Communications and Engagement Team for their work on the Winter Well initiative.

It was asked if the Communications Team could share the report on the Winter Well initiative with the Council and Board.

Action – Ms Robinson-Collins

The Council **RECEIVED** the report.

26/1/12 Feedback from Charitable Funds Committee

Ms Coleman provided a verbal report to the Council.

Ms Coleman confirmed that there were remaining unspent funds from various charitable sources and contributions made.

It had been agreed that some funds from the Charitable Trust would be spent on up to four omiVista tables, which were found to be very helpful for people with learning disabilities and dementia and could be adapted for various patient use. One table had already been trialled at Tonbridge Community Hospital and was found to be very helpful.

Ms Coleman explained that the value of the funds bequeathed to the Trust for the upgrade to Heron Ward had reduced as the money had remained unspent. She confirmed that if they were unable to spend the money on the planned upgrade, there were other suggestions from staff on how to spend the money.

Ms Coleman encouraged people to come up with ideas on how to spend the charitable funds.

Ms Barber thanked Mr Drobniowski, Ms Afuape and Ms Coleman for their significant contribution to the Committee.

Ms Barber confirmed that the Committee had agreed the annual accounts statement.

Ms Barber provided assurance that the Committee was keen to ensure that the Mermikides money was spent, and confirmed that another meeting had been arranged for April. By then it was hoped that the Trust would know the plans for Heron Ward.

The Council **RECEIVED** the report.

26/1/13 Report on Membership

Ms Robinson-Collins presented the report to the Council.

Ms Coleman raised the issue that only approximately 4,000 out of 8,500 members of the trust were actively engaged.

Ms Harris had been concerned that approximately two thirds of members did not open emails received from the trust. In response to a question from Ms Harris, Ms Coleman confirmed that a data cleanse of the members database had taken place approximately three years ago, but agreed that it would be good to run a data cleanse again. Ms N Davies commented that it was also important for data protection and GDPR.

Ms N Davies explained that open rate for e-mail was recorded only for emails that were fully opened, not just read in the reading pane which was common for staff members. The Trust had agreed to stop actively recruiting new members, in favour of trying to engage with the whole population instead, including those that were already members.

The Council **RECEIVED** the report.

26/1/14 Nominations Committee Report

Mr Price presented the report to the Council.

Mr Price confirmed that the Chair and NED appraisal process had been shared with the Council prior to the meeting, and was being presented to the Council for formal approval.

In response to a question from Ms R Davies, Mr Price agreed to include a reminder about the importance of completing the appraisal questionnaire in his covering email to governors.

Action – Mr Price.

The Council **RECEIVED** the report and formally **APPROVED** the recommendations.

26/1/15 Papers Available for Governors

The papers had been circulated to the Council prior to the meeting.

26/1/16 Any Other Business

Mr Goulston thanked the governors who were coming to the end of their terms of office, and encouraged them to submit a nomination form to re-stand in the forthcoming elections. Additionally, Mr Goulston thanked Ms R Davies, Mr Lemon and Mr Price for their contribution to the Nominations Committee, and Ms Coleman for her contribution as Chair of the Communications and Engagement Committee and as a member of the Charitable Funds Committee.

The Council gave thanks to the governors who would be coming to the end of their term of office.

26/1/17 Questions from members of the public

There were no questions from the public.

The meeting ended at 14.28.

26/1/18 Date and Time of Next Meeting

Wednesday 27 April 2022 at 1pm.
Venue to be confirmed.

MATTERS ARISING FROM THE COUNCIL OF GOVERNORS MEETING

OPEN ACTIONS

Meeting Date	Agenda Item	Action Agreed	By Whom	Current Status/Update
26 January 2022	26/1/6	To present the board memberships and designations proposal at the next Council of Governors meeting.	Mr Goulston	Action complete. Paper on Board memberships and designations presented to the Council of Governors at the extraordinary meeting held on 21 March 2022.
26 January 2022	26/1/7	To provide presentation on workforce development and the Academy at a future Governor Development Session.	Ms Robinson-Collins	Action complete. Added to the forward plan.
26 January 2022	26/1/8	To present the Strategic Priorities for 2022/23 including outcomes to the Governor Development Day in April.	Ms Sammon	Action complete. Presentation on Strategic Priorities took place at the Governor Development Day on 6 April 2022
26 January 2022	26/1/9	To invite governors to attend the stakeholder event for the recruitment of the Chief Executive.	Ms Robinson-Collins	Action complete.
26 January 2022	26/1/10	To ask Mr Bentley, Chief Executive Designate of the Integrated Care Board, to include community nursing in any future presentations/reports to the public.	Mr Flack	Action complete.
26 January 2022	26/1/11	To ask the Communications Team to share the report on the Winter Well initiative with the Council and Board.	Ms Robinson-Collins	Action complete.
26 January 2022	26/1/14	To include a reminder about the importance of completing the appraisal questionnaire in his covering email to governors.	Mr Price	Action complete.

11 November 2020	11/11/7 – Trust Quarterly Report	To share NHS Provider's guidance on the role of Council of Governors and Non-Executive Directors in provider collaboratives, when published.	Mr Goulston	Consultation on the role of Council of Governors in system working and collaboration to be launched in the Spring.
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MATTERS ARISING FROM THE COUNCIL OF GOVERNORS MEETING

CLOSED ACTIONS

Meeting Date	Agenda Item	Action Agreed	By Whom	Current Status/Update
3 November 2021	03/11/7 - Trust Quarterly Report	To forward any suggestions of measures that could be introduced to ease the pressures on staff.	Staff governors	Action closed.
3 November 2021	03/11/7 - Trust Quarterly Report	To liaise with Ms Pauline Butterworth, Chief Operating Officer regarding moving staff between services delivered by different stakeholders but on the same site in order to respond to changes in demand and capacity.	Mr Flack	<p>Action closed. Ms Clare Thomas, Community Services Director (Adults) responded to confirm that Physios were not part of the KCHFT/ Urgent Treatment Centre (UTC) team. They are employed by Channel Health Alliance (CHA) as part of the primary care visiting service. The UTC team does sometimes seek advice as they are onsite but there is a separate referral route for accessing physio internally.</p> <p>The Trust has worked with 111 to increase the direct bookings to the UTC which has increased utilisation, including walk-ins.</p>
3 November 2021	03/11/9 - Report from Communication and Engagement Committee	To send feedback to Ms Julia Rogers, Deputy Director of Communications and/or Ms Amy Rutland, Communications and Media Officer and cc'd to Ms Carol Coleman regarding the Comms plan for the winter health messaging programme by 8 November.	All governors	Action closed.

3 November 2021	03/11/9 - Report from Communication and Engagement Committee	To contact Mr Goulston or Ms Davies regarding being considered for the role of Chair of the Communication and Engagement Committee.	All governors	Action closed.
3 November 2021	03/11/11 - Report on Patient and Public Engagement, Experience and Complaints	To circulate the link for the video to the Council of Governors.	Ms Davies	Action closed.
3 November 2021	03/11/11 - Report on Patient and Public Engagement, Experience and Complaints	To include the provision of private dental services in the discussion of the Trust's future business development strategy at its Leadership Forum in November.	Mr Flack	Action closed.
3 November 2021	03/11/13 - Digital Strategy	To provide a six-monthly update to the Council of Governors on progress with the Trust's strategies within a consolidated report.	Ms Davies	Action closed
3 November 2021	03/11/16 - Papers Available for Governors	To circulate the papers to the Council of Governors by email.	Ms Davies	Action closed.
3 November 2021	03/11/17 - Any Other Business	To update the pronouns in the non-executive application pack.	Ms Davies	Action closed.
3 November 2021	03/11/17 - Any Other Business	To meet with all the governors appointed in 2021 for feedback on their induction.	Mr Goulston	Meeting arranged for 22 April 2022. Action closed.
3 November 2021	03/11/17- Any Other Business	To arrange for one to one technical support for individual governors as requested.	Ms Davies	Individual meetings arranged on request. Action closed.

11 November 2020	11/11/7 – Trust Quarterly Report	To provide an update on the collaboration between KCHFT and Kent and Medway Partnership NHS Trust (KMPT) at a future Council meeting.	Mr Goulston	On development session agenda for April 2022. Action closed.
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Title of Meeting	Council of Governors
Date of Meeting:	27 April 2022
Agenda Item:	1.7
Subject:	Trust Quarterly Report
Presenting Officer:	Gordon Flack, Acting Chief Executive

Since the last time the Council met in January, our Trust along with the rest of the country has continued to manage the consequence of the global COVID-19 pandemic whilst simultaneously providing the non-pandemic services which we provide.

I would like to share with the full Council some of the issues which have arisen since the last time we met. I did speak at the recent Governors development session where we discussed our priorities and took useful feedback on where we could go faster. As with previous reports, these have been grouped into the categories; quality, patients, our people, and partnerships.

1. Performance

1.1 Quality

Quality indicators continue to report a strong position providing assurance that we are continuing to deliver high quality care. The Friends and Family Test (FFT) scores remain high, with 98.9% of people rating their overall experience of the service they received in as good or very good during February 2022.

Turnover of our workforce has continued in an upward trajectory since the start of the financial year. The turnover rate was 17.35% in February 2022. This is a concern as even after stripping out fixed term contracts the rate is nearly 16%. Our priorities (in section 2) describe how we are addressing this issue.

From June 2021, the vacancy rate has continued to decrease, however in February 2022 the vacancy rate has reported an increase to 4.95%. The vacancy rate continues to remain below the target of 6%.

The sickness absence in February was 5.26%, a reduction from December and January. However, the absence rate continues to report above the mean and target of 4.2%. 292 employees were recorded as absent in February due exhibiting COVID-19 symptoms, which accounts for 28.9% of the total number of staff absent in the month.

During February, there was one lapse in care which resulted in an avoidable pressure ulcer.

1.2 Financial Position

The Trust continues to deliver a balanced financial position as shown in the tables in Appendix 1.

2. Patients

2.1 Trust Priorities 2022/23

As a trust we have established our strategy and identified our goals and enablers. Following recent engagement with key groups, including our Trust leadership, Board and Council we have identified four key priorities for the next six months;

Reigniting our passion

- supporting staff to move on from COVID
- a clear focus on staff health and wellbeing
- make KCHFT a place everyone can bring their full selves to work
- tackling waiting lists and urgent response times.

Increasing staffing levels

- improving staff work-life balance
- reducing our vacancy rate
- international recruitment, bringing an additional 100 international nurses to join the 19 new colleagues already recruited from Ghana and Nigeria
- looking at our local recruitment and continuing to 'grow our own' through our academies.

Quality improvement is the way we do things here

- equipping colleagues with the confidence and the tools to look at how we do things, to see if we can do things better
- reducing frustrations for colleagues and allowing fulfilment in work
- embedding quality improvement to continually improve.

Delivering on digital

- using and hosting the Kent and Medway Care Record to give staff a joined-up view of patient care and treatment and give patient access.
- investing in equipment and software to help staff do their job

2.2 Medway looked after children service

Medway Looked After Children Service will be provided by Kent Community Health NHS Foundation Trust from 1 April.

Kent and Medway Clinical Commissioning Group has agreed the transfer from Medway Community Healthcare (MCH), to ensure a robust regional offer across the area.

The service is led by registered nurses and provides health assessments and specialist advice to support children placed in care in Medway.

We understand just how vulnerable these children are. We are working closely together to make sure there is a smooth transition for all children, their families or carers. Nurses will TUPE and therefore children should continue to see the nurse they are familiar with, where appropriate.

As MCH has done, KCHFT will provide:

- initial health assessments (IHA) within 28 days of a child being placed in care
- review health assessments (RHA) every six months for children under five and once a year for children over five, up to age of 19 years
- medical provision and nursing
- health action plans and health histories.

3. Our People

3.1 Staff Survey

Despite the huge challenges faced by our staff over the past two years, we had a positive set of results from the annual staff survey when compared to other trusts. We had the highest response rate in six years, with 3,217 (65%) staff completing the survey. This is significantly higher than other community trusts.

The questions were grouped into nine themes and in the majority of these we scored significantly higher than trusts we were benchmarked against. We saw significant improvement in colleagues feeling secure in raising concerns about unsafe clinical practice and in most cases, questions showed a positive aspect of staff experience, including feeling valued by their team and the organisation respects individual differences. The results also highlighted that pressures remain high on our services and colleagues are understandably expressing that they feel burned out and exhausted.

We also saw that:

- 84 per cent of staff said the people they work with are polite and treat each other with respect
- 80 per cent said their immediate manager is interested in listening to them when they describe the challenges faced
- 77 per cent said they are able to make suggestions to improve the work of their team/department
- four in 10 said they often/always feel worn out at the end of the working day/shift
- three in 10 said the work often/always frustrates them.
- seven out of 10 said they would recommend the organisation as a place to work, which is six per cent better than other community trusts.

However, we cannot be complacent as we did see a downward trend overall as did the rest of the country. The Trust is already working on projects to improve the pressure on colleagues, which includes embracing our health and wellbeing initiatives, increasing staff levels with international recruitment and system-wide recruitment opportunities, enhancing our training opportunities and continuing to develop our equity and diversity strategy – Nobody Left Behind.

3.2 New Chief Executive appointed

I am really pleased to report that Mairead McCormick has been appointed as KCHFT's new Chief Executive, and will take up her role on 1 July 2022. A nurse by background, Mairead is an experienced director with 34 years in the NHS. For the past five years, she has been Chief Operating Officer and Deputy Chief Executive at Kingston Hospital NHS Foundation Trust which, like KCHFT, holds an outstanding Care Quality Commission (CQC) rating.

3.3 Healthwatch Awards Ceremony

Our amazing teams were recognised for their excellence in involving and listening to patients at the first Healthwatch Awards, which took place on Wednesday 30 March.

The event celebrated the best in health and social care across the county with 200 guests brought together to recognise achievements at St Mary the Virgin Church in Ashford.

The trust picked up four gongs for our Quality Account, listening to feedback to make changes to its vaccination centres, for giving trans and non-binary community a voice and for our work as part of the East Kent Health and Care Partnership engaging with patients to establish a new model for diabetes.

Healthwatch works with every single health and social care service in Kent and Medway and has a unique position listening to people's feedback about services and helping them to navigate the system.

3.4 Celebrating patient participation

I joined our Patient and Carer Partnership Team to welcome our participation partners, patients, carers and volunteers to the Repton Community Centre in Ashford, on Thursday 31 March, as part of a big thank you for getting involved and making a difference.

Delegates heard about the fantastic work our patients and carers have already got involved in and the new opportunities on their way including Research and Quality Improvement.

Congratulations to the winners; The Easy Read Group (East Kent Mencap) for Group of the Year, Sarah Ansell for Participation Partners of the Year, East Kent Community Engagement Group for Project of the Year and the Health Visiting Team for Service of the Year.

4. Partnerships

4.1 New architecture of the NHS in Kent and Medway

Work has continued to develop the Integrated Care Systems and the local context for Kent and Medway. All proposals are subject to the Health and Care Bill going through Parliament. The original timeframe for the transition was 1 April 2022, however this has been delayed until at least 1 July 2022 to allow for the Bill's progress through Parliament. The Trust continues to be fully engaged with the development of the system architecture.

Gordon Flack
Acting Chief Executive
April 2022

Appendix 1

Assurance on Financial Sustainability

Surplus		Rag rating: Green	
	Actual	Plan	Variance
Year to Date £k	0	0	0
Year End Forecast £k	0	0	0
<p>The Trust is in a breakeven position to the end of February.</p> <p>YTD pay and non-pay have overspent by £6,293k and £598k respectively offset by an underspend on depreciation/interest of £364k and an over-recovery on income of £6,527k.</p>			

Cash and Cash Equivalents		Rag rating: Green	
	Actual	Forecast	Variance
Year to Date £k	38,106	41,717	-3,611
Year End Forecast £k		35,679	
<p>Cash and Cash Equivalents as at M11 close stands at £38,106k, equivalent to 54 days operating expenditure. The Trust recorded the following YTD public sector payment statistics: 83% for volume and 85% for value.</p>			

Use of Resourcing Rating		Rag rating: Green	
	Year to Date Rating	Year End Forecast Rating	
Capital Service Capacity	1	1	
Liquidity	1	1	
I&E margin (%)	2	2	
Distance from Financial Plan	1	1	
Agency Spend	1	1	
Overall Rating	1	1	
<p>The Trust has scored overall the maximum 1 rating against the Use of Resource rating metrics for M11 2021-22. The YTD I&E margin % has returned a rating of 2 as a result of the current break-even regime.</p>			

Capital Expenditure		Rag rating: Amber	
	Actual/Forecast	Plan	Variance
YTD Expenditure £k	5,239	7,312	2,073
Year End Forecast £k	8,289	12,698	4,409

Spend to March was £5,239k against a YTD plan of £7,312k (72% achieved). The reported year to date underspend is primarily due to the delayed commencement of Estates and IT schemes.

As at M11, the full year forecast is £8,289k with £4,933k being internally funded and £3,356k being funded by PDC. The Trust expects to utilise this in full with a number of o/s projects or new schemes being completed in March.

The full year variance of £4,409k is the net effect of the redistribution of the £4,924k ringfenced funding held on behalf of the K&M system for system priorities plus the additional spend forecast (£243k) for the KMCR project and new external funding applications totalling forecast spend of £272k.

CIP		Rag rating: Amber	
	Actual	Plan	Variance
Year to Date £k	3,766	4,047	-281
Year End Forecast £k	4,415	4,415	0
<p>The Trust achieved CIPs of 3,766k to the end of February against a risk rated plan of £4,047k and so CIP is £281k behind plan to date.</p> <p>93.5% of the total annual CIP target has been removed from budgets at month eleven.</p> <p>The Trust is forecasting to achieve the full plan of £4,415k by the end of the year.</p>			

Agency Targets		Rag rating: Green				
M11			YTD			
	Actual	Target	Variance	Actual	Target	Variance
External Agency Excluding Covid-19 Expenditure £k	212	491	279	3,369	5,404	2,035
External Agency Including Covid-19 Expenditure £k	485	491	6	3,937	5,404	1,467
<p>External Agency and Locums excluding Covid-19 expenditure was £212k against £491k target in February.</p> <p>External Agency and Locums including Covid-19 expenditure in February was £482k against £491k target in February.</p>						

Title of Meeting	Council of Governors
Date of Meeting:	27 April 2022
Agenda Item:	2.2
Subject:	Staff Survey Results
Presenting Officer:	Victoria Robinson-Collins, Director of People and Organisational Development

1. Introduction

This report provides the Council of Governors with a summary of the key findings of the 2021 national NHS staff survey.

The Trust has been benchmarked against 15 other Community Trusts. We had the highest response rate in six years, with 65% of staff completing the survey, significantly higher than other community health trusts.

2. Key Results

All the questions are grouped into 9 themes and in the majority of these we scored significantly higher than trusts we were benchmarked against.

Five of the seven People Promise scores were significantly better than scores for similar organisations. These were:

- we are compassionate and inclusive
- we are recognised and rewarded
- we are always learning
- we work flexibly
- we are a team

We saw significant improvement in colleagues feeling secure in raising concerns about unsafe clinical practice and in most cases, questions showed a positive aspect of staff experience, including feeling valued by their team and the organisation respects individual differences.

A summary of the results is shown in the attached toolkit, and the 2021 NHS Staff Survey Benchmark Report is included under separate cover due to its size.

3. Recommendation

The Council is asked to receive the Staff Survey results for information.

Victoria Robinson-Collins
Director of People and Organisational Development



Kent Community Health
NHS Foundation Trust

Staff survey 2021

You shared your views
...we've listened



Search **staff survey** on **flo** for more details.

Staff survey 2021

3,217 of you took the time to complete the national staff survey

That's the highest response rate ever

Here's what you told us...



Questions are grouped into seven people promises

Five of the **seven** People Promise scores are significantly better than the scores for similar organisations.

These are:

- we are compassionate and inclusive
- we are recognised and rewarded
- we are always learning
- we work flexibly
- we are a team



We are compassionate and inclusive

What you said...

- 80 per cent felt the organisation **respects individual differences** – five per cent better than other organisations
- 20 per cent said you **have personally experienced harassment, bullying or abuse** at work from patients/service users, their relatives or other members of the public in the last 12 months – three per cent more than KCHFT's score last year
- 67 per cent felt **KCHFT acts fairly** with regard to career progression/promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age – six per cent better than other organisations but one per cent less than last year's score

What are we doing?

- Launched Nobody Left Behind strategy
- Continue to develop networks and welcome feedback; BAME, LGBTQ+, Menopause, Disability and Veterans'
- Resources available on flo
- Range of E-learning available through TAPs.
- No abuse campaign



We are recognised and rewarded

What you said...

- 80 per cent felt **your immediate manager values your work** – four per cent better than other organisations but two per cent less than KCHFT's score last year
- **95 per cent of you said you have an appraisal, annual review, development review** in the last 12 months – six per cent better than other organisations ...
- **But only 53 per cent of you said you feel satisfied** with the extent to which the organisation values your work – seven per cent less than KCHFT's result last year



What are we doing?

- Providing support for you to have a good appraisal
- Celebrating your achievement at our Staff Awards, recognising long service.
- Don't forget flo rewards.



Staff survey 2021

We each have a voice that counts

What you said...

- 80 per cent said **your immediate manager is interested in listening** when you describe the challenges you face – four per cent better than other organisations
- **85 per cent would feel secure raising concerns about unsafe clinical practice** – two per cent better than other organisations and three per cent better than KCHFT's score last year
- Only **53 per cent feel involved** in deciding on changes introduced that affect you work area/team/department – **five per cent less than KCHFT's score last year**

What are we doing?

- Regular People Pulse surveys throughout the year
- Staff survey returns in November
- Freedom to speak up guardians and ambassadors – find your local one on flo
- Other trust-wide opportunities will be coming throughout the year.



Staff survey 2021

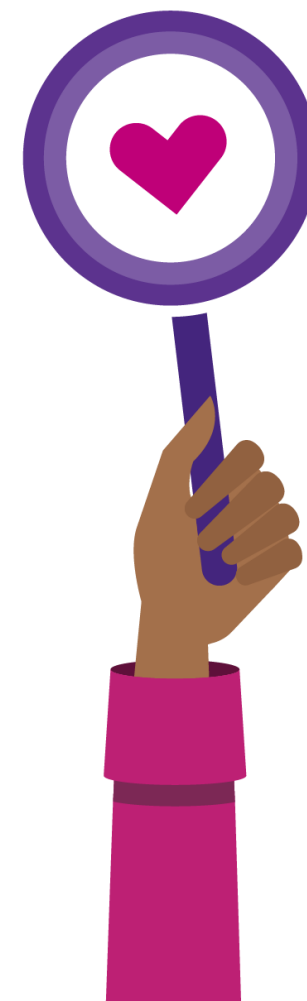
We are safe and healthy

What you said...

- 80 per cent of you felt your immediate manager takes a **positive interest in your health and wellbeing** – five per cent better than other organisations and two per cent less than KCHFT's score last year
- 29 per cent said you often/always feel **burnt out because of your work** – three per cent less than other organisations
- 52 per cent said you have come to work despite not feeling well enough to perform my duties in the last three months – **12 per cent more than KCHFT's score last year**

What are we doing?

- You pages continuously updated on flo, as well as new finance initiatives and the usual opportunities available including discounts, fast track physio etc
- Monthly health and wellbeing newsletter – Hello from Joe
- Increased H&WB training opportunities on TAPs
- Burnout sessions
- Mental health first aiders.



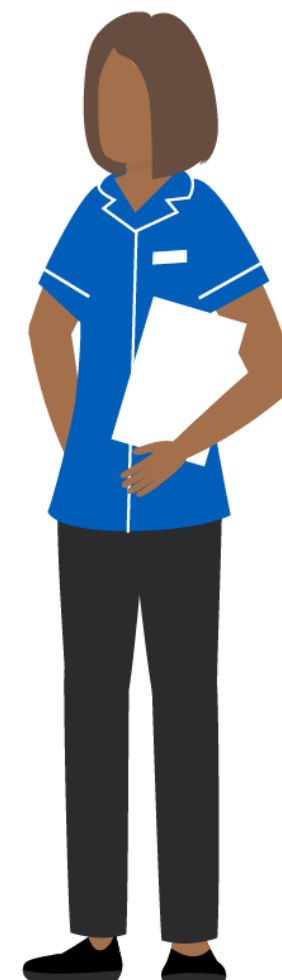
We are always learning

What you said...

- 65 per cent **felt supported to develop your potential** – four per cent better than other organisations
- 65 per cent said you were able to **access the right learning and development opportunities** when you need to – seven per cent better than other organisations
- 74 per cent felt there are **frequent opportunities for you to show initiative** in your role – three per cent less than KCHFT's score last year

What are we doing?

- Ongoing project to improve TAPs
- Added new and enhanced training offers
- Qi as a priority for the trust
- Encouraging Qi approach to challenges
- Enhanced apprenticeship scheme – more details available on flo.



Staff survey 2021



Kent Community Health
NHS Foundation Trust

We work flexibly

What you said...

- 79 per cent said you can approach your immediate manager **to talk openly about flexible working** – three per cent better than other organisations
- 68 per cent of you felt **satisfied with the opportunities for flexible working patterns** – four per cent better than other organisations.
- But 25 per cent of you said you have worked **additional PAID hours for the organisation**, over and above your contracted hours – **five per cent more than KCHFT's result last year**



What are we doing?

- Improvements to flexible working, find out more on flo
- Tell us what would work for you in your appraisal – keep those conversations going
- Read more about flexible working opportunities available on flo.



Staff survey 2021



Kent Community Health
NHS Foundation Trust

We are a team

What you said...

- 80 per cent of you said you **receive the respect you deserve** from your colleagues at work – three per cent better than other organisations and one per cent less than KCHFT's score last year
- 65 per cent of you feel **teams within this organisation work well together** to achieve their objectives – seven per cent better than other organisations
- 77 per cent said you were able to make **suggestions to improve the work of your team/department** – but this is five per cent less than KCHFT's score last year



What are we doing?

- Working together to set our priorities – recent quality priorities survey had the highest engagement from colleagues to date
- More teams using quality improvement which embraces teams working together to help improve our services.



Morale and staff engagement

What you said...

- Only 32 per cent of **staff felt there are enough staff in the organisation to do the job properly** – 14 per cent less than KCHFT's score last year
- Only 57 per cent of you said you **look forward to going to work** – seven per cent less than KCHFT's score last year
- 70 per cent **said they would recommend the organisation as a place to work** – six per cent better other organisations, however this is five per cent less than KCHFT's score last year, and 27 per cent of you also said you often think about leaving the organisation – seven per cent more than KCHFT's score last year



What are we doing?

- Increasing staff levels through international recruitment, with 19 nurses from Nigeria and Ghana
- Committed to recruiting 100 more nurses this year – they will work in other areas across the trust
- 14 nursing associates, trained through our academy, joined us
- KCHFT leading the joint health and social care Ready to care recruitment campaign in east Kent
- Taking a bespoke approach to recruiting key staff, for example facilities
- Tell us more in the Big Listen soon.



Tell us how we can improve

- 66 per cent of you said you have worked additional UNPAID hours for the organisation, over and above your contracted hours – two per cent more than other organisations
- 17 per cent of you said you have experienced discrimination on grounds of disability – six per cent more than other organisations
- Only 28 per cent felt the appraisal/review left you feeling that your work is valued by the organisation – four per cent less than other organisations

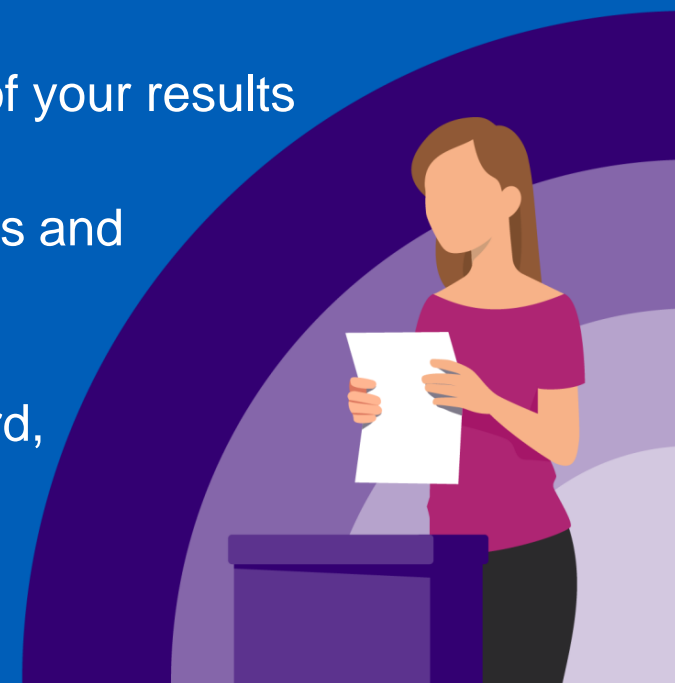




Kent Community Health
NHS Foundation Trust

Find out the results for your directorate or division

- Your PODBPs will be giving a breakdown of your results at team meetings
- Make sure you are part of the conversations and feedback your ideas on what the solutions could be
- If you have an idea you want to take forward, use an quality improvement approach to take it forward and share the results.



You shared your views
...we've listened

Next steps

What changes would make the
biggest difference to you?

Staff survey 2021

Let's work together to make a real change

You can read our full results at
www.nhsstaffsurveyresults.com





Kent Community Health

NHS Foundation Trust

Title of Meeting	Council of Governors
Date of Meeting:	27 April 2022
Agenda Item:	2.4
Subject:	Patient and Public Engagement, Experience and Complaints
Presenting Officer:	Sue Mitchell, Assistant Director of Participation and Involvement

This report gives an overview of public and patient engagement, volunteer services, interpreting, accessible information, complaints and patient advice liaison service (PALS), equality, diversity and inclusion, the healthy communities project Kent and patient experience during quarter three (October to December 2021).

Sue Mitchell
Assistant Director of Participation and Involvement
April 2022

Patient and Carer Partnership Team report October to December 2021

Executive summary

This report gives an overview of public and patient engagement, volunteer services, interpreting, accessible information, complaints and patient advice liaison service (PALS), equality, diversity and inclusion, the healthy communities project Kent and patient experience during quarter 3 (October to December 2021). The data below indicates changes in relation to the previous period, quarter 2 (July to September 2021).

Highlights



Patient and Carer Council

The Patient and Carer Council held meetings in October and November with no meeting in December due to operational pressures. The Council continues to oversee and monitor the Participation and Experience work plan and ensure that there are continued opportunities for patient and carer involvement across the organisation. The Council received updates from equality, diversity and inclusion and in particular, the Healthy Communities Project which seeks to reduce health inequalities for migrant communities.

An update and review were completed of the two quality priorities overseen by the Council; to increase the patient and carer voice in service development and to develop quality improvement projects initiated by patient or family carer feedback. A highlight report was

presented on the implementation of the Triangle of Care, and the Council were informed about the work undertaken to improve carer involvement across the organisation. Patients and carers attending the meeting had an opportunity to feedback with ideas, suggestions and views with regards to further development of the work presented.

People's Network

The network received presentations relating to:

- public health engagement
- ethnicity recording and the development of cultural awareness training
- the expert patients programme
- Kent County Council's Kent and Medway Listens project.

The network met in December for an end-of-year presentation on the participation and involvement highlights of the year. All members had an opportunity to report back on activities they take part in across the trust, including the patient experience volunteers and research champions. The research champions will be presenting at a patient and carer council meeting in 2022 to report on the work they have supported throughout 2021.

The network has voted to rebrand their title as Participation Partners, superseding 'patient representative'. At the next network meeting, a communications plan will be developed to advertise the new title and promote involvement opportunities.

Three Participation Partners have taken part in interview panels for the roles of Voluntary Service Manager, Equality and Diversity Project Lead, and Patient Care Coordinator.

The participation recruitment film was finalised in October and was first presented at the quality improvement conference on Thursday, 7 October 2021. It is available to view on the public website and the trust social media pages. So far it has had 65 external views. It will be advertised at any trust events going forward and sent out regularly in the volunteer and participation newsletters.

The latest Participation Matters newsletter was sent on Tuesday, 4 January to 3863 public members and volunteers. So far, there is a 30 per cent open rate and a member of the public has enquired about joining the East Kent Community Engagement Group.

A thank you event has been planned for Thursday, 31 March to celebrate the work of all the patients, carers and families that have supported services across the trust with participation and involvement work. The event planning is being led by a working group of Participation Partners. Invitations have been sent for the event which will feature presentations, a marketplace of service stalls, and an awards ceremony.

Triangle of Care

Two thirds of the self-assessments currently being completed against the standards of the Triangle of Care have been received. These will be analysed and in addition to local actions a number of key trust wide workstreams will commence to fully embed the standards. These will be delivered utilising a QI approach where relevant.

Ongoing support is being provided to the remaining hospitals yet to submit their returns. We have commenced work to plan for our Year One Accreditation application in April/May 2022. Co-produced carer awareness training is available to all staff. Six training sessions have been delivered with 18 attendees. The training has received excellent feedback and evidenced improved learning and knowledge around issues relating to carers.

Work is in progress to develop a Carers Pack providing information, advice, and signposting to support services. This is a QI project and is anticipated to be complete by the February 2022.

There are a total of 30 Carer Champions across the 9 community hospitals. The Carer Champions continue to support at a local level to complete the benchmarking self-

assessments and develop action plans. Carer Champions have designed a lapel badge to identify them with the plan for circulation by February 2022.

Work has commenced on phase 2 of implementation of the scheme into community services and deliver the introductory session to staff and support the recruitment of Carer Champions.

Volunteers

The new Voluntary Service Manager joined the team in December and has identified key priorities to take forward:

- Undertake a cleansing exercise of the Volunteers Database
- Create a service contact list to match volunteer enquiries and requirements to appropriate volunteer vacancies
- Develop new volunteer vacancies and role descriptions
- Develop a discharge support volunteer role for the community hospitals
- Move volunteer recruitment to the trac system to mirror the recruitment process for paid staff.

A Voluntary Service Administrator has been recruited and will join the team in January on a temporary contract, funded by NHS England/Improvement. Their first priority will be to support the volunteer database update.

The focus has been on recruiting volunteers to support the community hospitals during the winter. Four volunteers are new in post and 14 are ready to start in the in the following roles:

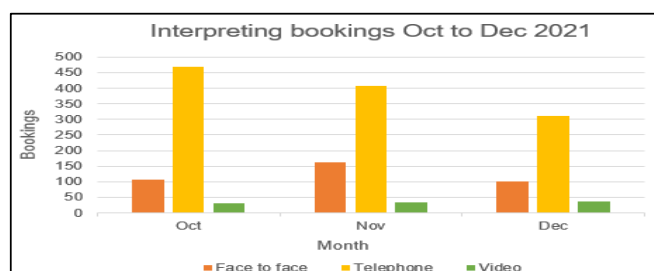
- Meet and greet
- Ward support
- Dementia café support

The government's announcement to ramp up the booster programme has meant that the vaccination sites have increased their hours and therefore the demand for additional volunteer shifts has been required. Our vaccination site in Chatham (The Pentagon) has commented on how well they have been able to fill the volunteer shifts for the booster programme with existing volunteers and by using the Royal Voluntary Society. Volunteers are managed locally by the sites which has helped them co-ordinate the shifts and react to changes in demand much quicker. We will continue to recruit and provide support for any changes in the vaccination programme over the coming months.

Interpreting

Telephone interpreting continues to be the main method of communication with foreign language speaking patients and families. 8.9% of interpreting bookings this quarter took place in the COVID-19 vaccination centres.

The graph below gives an overview of the completed interpreting bookings each month, from October to December with the majority being completed by telephone.



Top 10 languages requested for interpreting (October to December)

(1) Romanian	(6) Bulgarian
(2) Slovak	(7) Punjabi
(3) Polish	(8) Nepali
(4) Turkish	(9) Arabic
(5) Bengali	(10) British Sign Language

Accessible information and Easy Read**Accessibility reviews**

Healthwatch Kent will be carrying out accessibility reviews in two community hospitals in summer 2022. In preparation for this, all hospitals have been contacted to arrange a pre-visit with a member of the team and a Participation Partner. This will be an opportunity to review the accessible information and communication support they have in place for patients, carers and families.

Easy Read

The following Easy Read documents have been progressed this quarter:

- Urinary catheter passport – reviewed and updated.
- End of life care survey for community services – in progress. This will be an updated version of the survey for community hospitals.
- Having your ears syringed – complete, in partnership with the learning disability team.
- Volunteer training pack – tested by East Kent Mencap and updated. The full volunteer pack is now available in Easy Read.
- Ready Steady Go Hello surveys – in progress, in partnership with the learning disability team.
- Participation event invite and agenda – tested with East Kent Mencap and completed.

Expert Patients Programme

Two 6-week Expert Patients Programme (EPP) Toolkit courses have been delivered this quarter and participants have been invited to complete feedback on their experience. This feedback will be reviewed bi-monthly to identify any trends.

One of the EPP facilitator's story will feature in the January edition of Community Health magazine. Work has started on renewing the EPP leaflet, a new EPP film and currently updating the EPP page on Flo and the public website with the help of the EPP facilitators and comms. 3 facilitators have been issued with a trust laptop to support the delivery of virtual courses and remove the need for facilitators to use their own devices.

Presentations to raise the profile of the programme have been given to the People's Network, the community matrons and EPP featured in the team's presentation to the Non-Executive Directors. The programme continues to work towards delivering courses virtually and raising the profile through internal and external communications to increase referrals.

Equality, Diversity & Inclusion

Two new patient focussed equality objectives for 2021-2024 were agreed:

Objective 1: Increase equality monitoring across all services**Aim:**

- To ensure the information we hold on our patients accurately reflect how a patient identifies

- Use the data outputs to develop our services according to patient need, directing resources where they are needed most
- Develop targeted interventions where health inequalities and barriers are identified

Objective 2: All relevant procedural documents identify equality related impacts including risks, and how risks will be managed

Aim:

- To have an Equality Impact Assessment (EqIA) that highlights where in a process, due regard to protected characteristics and Inclusion Health Groups has been given, any mitigations made and how equality related risk is being managed.
- All relevant KCHFT procedural documents, policies, strategies and business plans will have a completed EqIA
- Reduce health inequalities; improve access, health outcomes and patient experience

The new objectives will continue to build on previous objectives and ensure decision making reflects the needs of the local population through robust Equality Impact Assessments and improvements to data collection and equality monitoring of our patients and their carers. Using data in this way will enable us to better engage protected and health inclusion groups to deliver co-designed services that reflect the needs of local people and communities.

Work towards the aims for 2021-2022 has begun with the Healthy Communities Project reviewing service level patient ethnicity data and will continue in January 2022 with the recruitment of an Equality, Diversity and Inclusion Project Lead to focus on the rest of the protected characteristics. The new EqIA process has been developed and is currently being embedded into practice.

Healthy Communities Project Kent

The Healthy Communities Project Kent has continued its work towards reducing health inequalities experienced by migrant communities and ethnic minorities across Kent.

Ethnicity Recording

- A deep-dive benchmarking data analysis exercise was repeated following corrections to the data set to explore ethnicity recording for the period from November 2020 to March 2021. This showed an average ethnicity recording rate of 57.63% across services included in the exercise.
- Data analysis for Quarter 1 and Quarter 2 (2021) was completed, allowing trends to be visualised by service.
- We have met with over 75% of services identified within the benchmarking exercise to learn more about ethnicity recording within the service, share data analysis, and offer support, including personalised voice-over presentations for each service. We are continuing to meet with services into 2022.

Resources, Cultural Awareness and the HCPK Team

- A bank of resources is being designed and developed to support services to improve ethnicity recording and to raise cultural awareness within the Trust, including patient information leaflets, an infographic video, and the production of cultural awareness e-learning modules and workshops which will be available to all staff.
- We are working alongside colleagues to produce a Trust-wide video promoting the recording of protected characteristics, focussing on why we ask and how we use this information.
- We welcomed our Healthy Communities Advisor to the HCPK Team, who works with the Roma community to promote healthier behaviours and lifestyle, support public health initiatives, and share health information. We are also currently recruiting for our Community Development Officer.

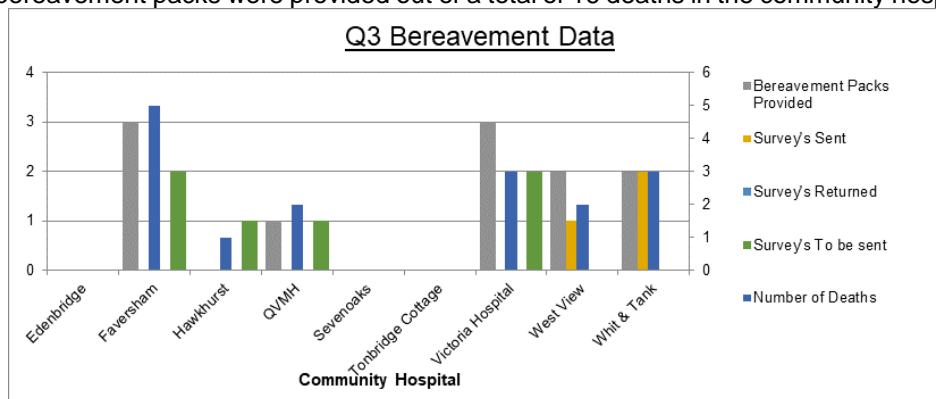
Conferences, Events and Relationship Building

- The HCPK Project Manager was a guest speaker at the Healthy Communities Together Conference in November 2021, held by Social Enterprise Kent CIC, where a presentation outlining the project was given.
- We organised and held, alongside a contact from Central London Community Healthcare NHS Trust, the National Ethnicity Recording Discussion: an online conference with presentations and opportunities to share learning. Twenty-seven individuals attend from Trusts across England.
- The HCPK and its work has been presented to the Patient and Carer Council and the People's Network, and regularly attends meetings.
- We have met with over 20 community groups, local organisations and key public health contacts, and will continue to build these relationships.

East Kent Bereavement QI Project

The revised bereavement packs have now started to be used by long-term services in east Kent. There has been some delay with availability of the packs resulting in the need to revise the initial planned go live date. Further revision to the pack ordering process has now been completed to ensure there is clear advice and direction available to staff and this has been shared on FLO.

11 bereavement packs were provided out of a total of 16 deaths in the community hospitals.



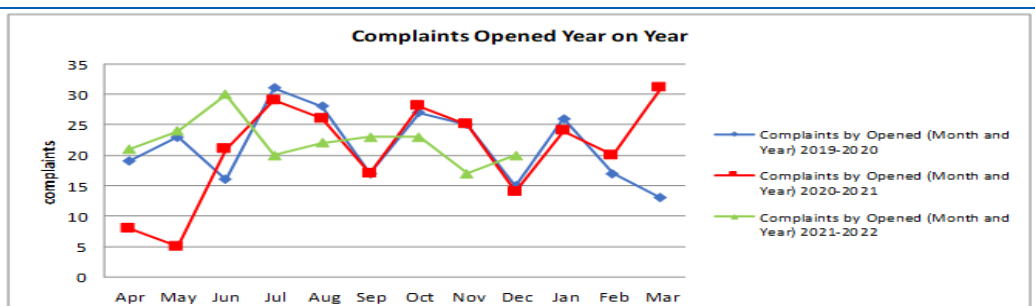
It is hoped in early 2022, the packs will be in use in long-term services across east Kent with a plan to roll out the packs for use by west Kent. This will be supported by the Patient & Carer Partnership Team. Good practices will be shared and celebrated with the teams along with areas identified for review and improvement. This work is supported by the End of Life Mortality Steering Group meeting.

Complaints and Patient Advice Liaison Service (PALS)

60 complaints were received which is a small decrease in complaints received during the same period last year. Of those, 28 different services were logged:

- 6 Community Nursing
- 6 Dental
- 5 Community hospitals
- 4 Community paediatrics
- 4 Urgent Treatment Centres
- 3 Children's Therapies, Clinical Nutrition and Dietetics, Chronic Pain, Covid vaccination sites and Health Visiting

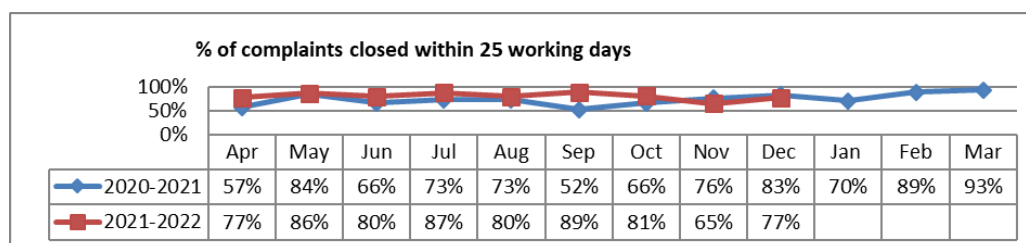
There were also complaints for Cardiac Nursing, Frailty, Radiology, Community Orthopaedics, Continence, ESCITES, Intermediate Care Team, Lymphoedema, Medicines Management, Medway Learning Disability Service, Minor Injury Units, Musculoskeletal service, Podiatry, Rapid Transfer, South East Drivability, TB Service and the wound clinics.



Closed complaints

72 were closed, 64 had a 25-working day response target and of these 16 did not meet the target:

- 1 was due to a delay as patient had ongoing orthotic appointments and waiting for patient to be satisfied with outcome
- 4 were due to awaiting contact or trying to arrange meetings with complainants
- 2 were due to delays within the complaints team
- 9 were due to delays in response from the services and during the approval process.



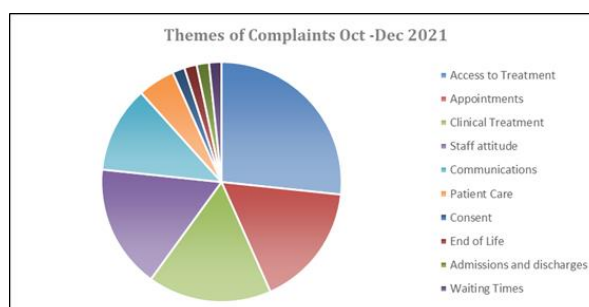
We continue to review our own process to improve the response times and work with services to ensure drafts and responses are sent in a timely manner and escalate issues using our standard operating procedure when this does not occur.

Outcomes for the 72 closed cases:

- 38 (53%) cases were not upheld and needed no service improvements
- 18 (25%) cases provided apologies to the complainant for their experience and how they felt about staff or the service, or for individual errors
- 16 (22%) case investigations found that service changes, improvements or reminders of processes were needed.

Themes

- Staff attitude and communication with patients and families by individual staff continues to be a theme
- Access to treatment and being unhappy with the waiting times for appointments, therapy or assessments
- Querying clinical treatment received, not received or care provided.



10 actions have been created to make service improvements as a result of the complaint, examples are included below:

- Dental Service to review leaflet for children having Sedation or General Anaesthetic re wording on injections and gel
- ART INR dosage incident used as clinical reflection for staff member as part of re-validation and incident discussed at ART Performance meeting
- Community Nurses Deal will ensure any access issues are added to equipment requests to ensure delivery made.

Patient Advice Liaison Service (PALS)

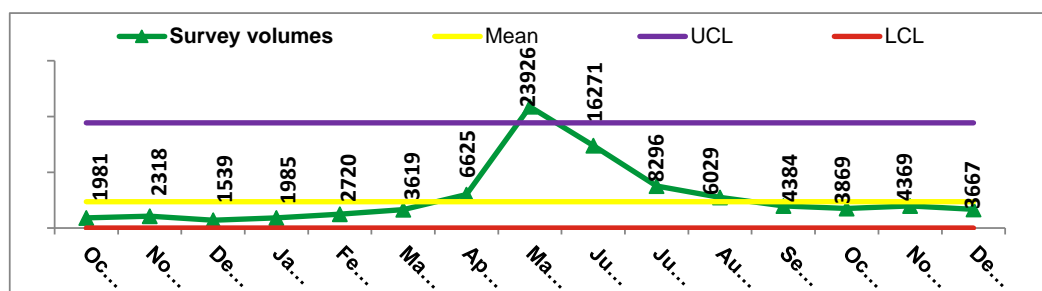
Performance against the target of 90% of all PALS queries will be resolved within 48 hours is being exceeded as demonstrated in the table below.

	PALS contacts received	Closed within 48hrs	% closed within 48 hrs
Oct	290	272	94%
Nov	285	282	99%
Dec	154	149	96%

There were PALS enquiries for 30 different services, most of which were for Community Paediatrics with 26 contacts. The main themes for these contacts were; 16 waiting times for referral, appointment or assessment; 3 with difficulty getting hold of the service; 3 with lack of support from the service; 3 with text query on appointment and 1 with being unhappy with virtual appointment held. These have been highlighted to the service, who are aware of the issues and have put measures in place to reduce the waiting lists and make improvements. The service is monitoring this.

Patient experience survey volumes

Monthly trust wide survey volumes – October 2020 to December 2021

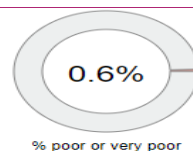
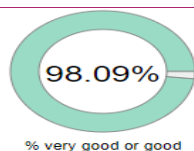


A reduction is seen in **survey volumes** during quarter three, with **11,964** completions, due to the drop of returns from the COVID-19 vaccination centres (644). Following a steady increase in volumes of service bespoke surveys throughout 2021, a drop is seen in December, in line with the usual trend over the Christmas period.

Just over 0.5% decrease is seen in the overall satisfaction score for quarter three (**96.5%**), when compared with data for the previous quarter (97.1%).

NHS Friends and Family Test (FFT)

A total of **11,437** people answered the FFT question during quarter three, giving a high overall score of **98.1%**. This is 0.5% decrease when compared with the previous quarter (98.6%).



Response	Percentage	Number of times response selected
Very good	89.08%	10188
Good	9.01%	1031
Neither good nor poor	1.14%	130
Poor	0.26%	30
Very poor	0.34%	39
Don't know	0.17%	19

The main themes seen from people who rated their overall experience as poor or very poor related to accessing services, communication and service provision, for a variety of services.

Services were able to contact 14 people who had given consent to do so, to discuss and resolve their concerns. Services attempted to contact a further 2 people, without success. Four negative responses were given for the COVID-19 vaccination site, relating to the booking system and not the service provided by KCHFT. It is possible that an error was made when answering the FFT question on two surveys, as these contained positive question responses and comments.

Actions taken and improvements made

Sexual Health service

You said: Patient was unhappy with their weight check being undertaken in the main waiting room.

We did: The lifestyle machine was moved to a different position to enable more privacy.

Sevenoaks community hospital

You said: Patient was unhappy with communication amongst staff and felt there was insufficient facilities available within the hospital.

We did: Information was added to the welcome letter shared with patients before transfer from an acute hospital, to include there are no shops within the hospital or smoking allowed on the premises. A disclaimer form was produced to be given to patients that chose to leave the site during their stay.

MSK Physiotherapy

You said: Patient felt the quality of the exercise materials was poor.

We did: The Administration team reviewed the materials and will ensure all future photo-copied resources will be an acceptable quality before sending out to patients.

Podiatry service, Gravesham hospital

You said: Patient raised a concern about having to wait outside the hospital in the cold weather when they attended an appointment for a non-KCHFT service.

We did: A paragraph was added to the appointment letter template advising patients of the COVID-19 safety precautions in place to control health premises' entrance and waiting rooms. Patients are advised not to arrive early for their appointment.

Community nursing, Thanet

You said: Patient was concerned that nursing staff were not changing gloves after going outside to their vehicles during visits.

We did: Staff were reminded of the correct use of PPE along with guidance information.

Online survey completions

With the introduction of the 'Have your say' poster and flyers as an additional method of making surveys available, the number of online completions has continued to increase.

Many services have chosen to display posters in suitable areas (clinic and waiting rooms) or offer a flyer to patients to take home with them, including: Acute Dietetics, Children's Therapies, Children's Specialist Nursing services, Community hospitals, Dental, Health Checks, Health Visiting, Learning Disability Team, Lymphoedema, Minor Injury Units, Newborn Hearing, One You Shop, Outpatient Departments, Podiatry, Pulmonary Rehabilitation, Sexual Health, Wound Medicine Centres, TB Nursing and Urgent Treatment Centres.

The Podiatry service is displaying a poster with a unique QR code for their bespoke survey and work has begun to produce materials for the Health Visiting service and Carers surveys.

Shout about it! – Dental service

The dental service gained feedback from 5,270 survey completions (363 bespoke and 4,907 easy read), with a high overall satisfaction score of just over 99%.

The service has adopted the use of the easy read survey, to make it more accessible for people with learning difficulties and also for those whose first language is not English, to give feedback on their experience of the service they received.

Comments made by patients or their relatives/family members show people found staff caring, friendly, kind and patient. Patients felt comfortable and at ease and thought staff gave clear explanations to the treatment/care being provided.

Sue Mitchell
AD Participation & Involvement
7 January 2021

Title of Meeting	Council of Governors
Date of Meeting:	27 April 2022
Agenda Item:	2.5
Subject:	Freedom to Speak Up
Presenting Officer:	Joy Fuller, Freedom to Speak Up Guardian

1. Purpose

The purpose of this paper is to inform the Council of Governors of the Freedom to Speak Up arrangements in place across the trust and to provide an update on the number of cases received during 2021/22.

2. Background and Context

Every NHS trust and NHS Foundation Trust is mandated to have a Freedom to Speak Up Guardian. The Guardians are part of a network supported by the National Guardian's Office (NGO) which was created to support positive cultural change across the NHS. The NGO is an independent, non-statutory body which provides support and training for Guardians, as well as disseminating good practice, undertaking case reviews and providing challenge across the system.

The NGO and the role of the FTSU Guardian was created in response to recommendations made in Sir Robert Francis QC's report "The Freedom to Speak Up" (2015). The recommendations were made as Sir Robert found that NHS culture did not always encourage or support workers to speak up, and that patients and workers suffered as result.

Kent Community Health NHS Foundation Trust has a Freedom to Speak Up policy which is in line with the national policy. The policy says that staff should initially try to raise concerns with their line manager or a more senior manager, but if this does not lead to satisfactory action, or if the staff member feels unable to do so for whatever reason, they can contact the FTSU Guardian for advice and support. It is all in support of creating a more open culture that puts patient and staff safety at the heart of what we do.

3. The Role of the Freedom to Speak Up Guardian

The Guardian helps to raise the profile of raising concerns across the trust, and provides confidential advice and support to staff, agency workers or volunteers about concerns they have and/or the way their concern has been handled. The Guardian ensures that people who speak up are thanked for doing so.

The Guardian remains impartial and ensures that a fair and timely investigation into concerns takes place and that outcomes, actions and learning are shared. They don't get

involved in investigations or complaints, but help the process. They have a key role in making sure staff do not experience discrimination or are victimised because they raise a concern.

The Guardian can be contacted via a dedicated email address or phone number. There is also a dedicated page on FLO, the trust's staff intranet site, which provides guidance on speaking up for staff and managers.

4. Summary of cases raised in 2021/22

Quarter	Number of cases raised	Types of cases raised
Quarter 1 (Apr 2021 - Jun 2021)	5	Bullying and Harassment* Attitudes and Behaviours
Quarter 2 (Jul 2021 - Sept 2021)	5	Bullying and Harassment Attitudes and Behaviours
Quarter 3 (Oct 2021 - Dec 2021)	4	Bullying and Harassment Detriment**
Quarter 4 (Jan 2022 - Mar 2022)	TBC*	

*Bullying and Harassment: *"Bullying is behaviour from a person or group that's unwanted and makes someone feel uncomfortable, including feeling: frightened, less respected or put down, made fun of, upset". "Harassment is when bullying or unwanted behaviour is related to any protected characteristics under the Equality Act 2010."*

**Detriment: *"Disadvantageous and/or demeaning treatment as a result of speaking up, may include being ostracised, given unfavourable shifts, being overlooked for promotion, or moved from a team."*

There were 14 new cases raised during between April 2021 and December 2021. *The number of cases received between January to March is to be verified and added to total number of cases.

5. Summary of activities undertaken

- Throughout 2021/22, the Guardian continued to raise awareness of Freedom to Speak up via the staff intranet site and in staff newsletters.
- The staff survey results show that our speaking up culture continues to improve year on year, with the 2020 results being no exception. The Index Report published by the National Guardian's Office in 2021 (based on the results of the 2020 staff survey) identified the view of staff on the speaking up culture, and KCHFT were positioned 2nd out of all NHS Trusts and NHS Foundation Trusts across the country.
- Speak Up Month took place in October 2021, an annual promotional campaign led by the National Guardian's Office. The Guardian sought to raise awareness of speaking up via a series of blogs and a video message which was shared widely via the staff intranet and in Flomail newsletters. Information was also shared through the staff networks.
- Two Freedom to Speak Up training modules, developed by the National Guardian's Office and eLearning for Healthcare, were widely publicised to all staff via the staff

intranet site and highlighted in blogs. The core training module is currently listed as 'featured training' on our training, appraisal and performance system (TAPs).

- Contact details for the Guardian continues to be communicated regularly to all staff via Flomail and Hello from Joe newsletters.
- The Guardian continues to meet monthly with Guardians at other NHS organisations via the South East Regional Network. The network provides invaluable peer support for all Guardians, and offers a chance to share latest guidance, best practice and case studies.

6. Recommendation

The Council of Governors is asked to receive this report.

Joy Fuller
Freedom to Speak Up Guardian
April 2022



Kent Community Health

NHS Foundation Trust

Meeting Title:	Council of Governors
Date of Meeting:	27 April 2022
Agenda Item:	2.7
Subject:	Outcome of Governor Elections
Presenting Officer:	Natalie Davies – Director of Corporate Services

1. Purpose

The purpose of this paper is to update the Council of Governors on the outcome of the governor elections that took place throughout February and March 2022.

2. Introduction

Governor elections took place in the following constituencies:

- Public – Dover/Deal
- Public - Maidstone
- Public – Rest of England
- Public – Swale
- Public - Thanet
- Public – Tonbridge and Malling

We are required to use an independent election company to conduct the elections, and Electoral Reform Services (ERS) were selected.

3. Election Results

The notice of election was published on Monday 21 January 2022, and the deadline for nominations was 8 February 2022. Following close of nominations, the following candidates were elected uncontested:

Constituency	Candidate	Term of Office
Dover/Deal	Carol Coleman	Elected for 3 rd Term
Rest of England	John Woolgrove	Elected for 2 nd Term

All other constituencies were contested, and we received the following number of candidates for each constituency:

Maidstone	2 candidates
Swale	4 candidates
Thanet	3 candidates
Tonbridge and Malling	3 candidates

The notice of poll was published on our website and all members were sent the ballot papers and election materials on 25 February 2022 (via post or electronically).

Voting closed on 18 March 2022, with results declared on 21 March 2022. The successful candidates were elected for a three year term, and are shown in the table below.

Constituency	Candidate	Term of Office
Maidstone	Alison Fisher	Elected for 1 st Term
Swale	Brian Grove	Elected for 1 st Term
Thanet	Tilly Harris	Elected for 1 st Term
Tonbridge and Malling	Ruth Davies	Elected for 2 nd Term

The turnout for voting was between 4.7% and 11.2%. The report of voting is attached for your information (Appendix 1).

Throughout the election process, save the dates and reminder emails were circulated to members, well as advertisements in local community newsletters and networks. Information was also shared on social media platforms.

We are pleased to report that all vacant posts were filled, and all but two of the posts were well contested.

4. Recommendation

Governors are asked to note the outcome of the elections.

Joy Fuller
Governor Lead
April 2022

KENT COMMUNITY HEALTH NHS FOUNDATION TRUST

ELECTION TO THE COUNCIL OF GOVERNORS

CLOSE OF VOTING: 5PM ON 18 MARCH 2022

CONTEST: Public: Maidstone

RESULT		1 to elect
Alison FISHER	40	ELECTED
David PRICE	32	

Number of eligible voters		853
Votes cast by post:	48	
Votes cast online:	25	
Total number of votes cast:		73
Turnout:		8.6%
Number of votes found to be invalid:		1
Total number of valid votes to be counted:		72

CONTEST: Public: Swale

RESULT		1 to elect
Brian GROVE	23*	ELECTED
Peter FATHERS	23	
Margaret HIBBS	16	
Raymond STOKES	8	

*result confirmed by recount

*result determined by drawing lots

Number of eligible voters		774
Votes cast by post:	41	
Votes cast online:	29	
Total number of votes cast:		70
Turnout:		9.0%
Number of votes found to be invalid:		0
Total number of valid votes to be counted:		70

CONTEST: Public: Thanet

RESULT		1 to elect
Tilly HARRIS	14	ELECTED
Steve CLEMENT MBE	12	
Iris WATSON, NEE WHITE	7	

Number of eligible voters		701
Votes cast by post:	15	
Votes cast online:	18	
Total number of votes cast:		33
Turnout:		4.7%
Number of votes found to be invalid:		0
Total number of valid votes to be counted:		33

CONTEST: Public: Tonbridge and Malling

RESULT		1 to elect
Ruth DAVIES	34	ELECTED
Harriet FOLEY	15	
Kelly LA CHUNG	6	

Number of eligible voters		491
Votes cast by post:	35	
Votes cast online:	20	
Total number of votes cast:		55
Turnout:		11.2%
Number of votes found to be invalid:		0
Total number of valid votes to be counted:		55

Civica Election Services can confirm that, as far as reasonably practicable, every person whose name appeared on the electoral roll supplied to us for the purpose of the election:-

- was sent the details of the election and
- if they chose to participate in the election, had their vote fairly and accurately recorded

The elections were conducted in accordance with the rules and constitutional arrangements as set out previously by the Trust, and CES is satisfied that these were in accordance with accepted good electoral practice.

All voting material will be stored for 12 months.

Abi Walcott-Daniel
Returning Officer
On behalf of Kent Community Health NHS Foundation Trust