

North Staffordshire Combined Healthcare NHS Trust Board Briefing – May 2025 Board

This briefing aims to keep you informed of the discussions at our Trust Board. To watch the recording and read the papers, please visit the [Board Meeting page](#) on the Combined Healthcare website. Please note this briefing does not replace the official Board minutes, which will be published in due course and be available on the website.

Patient Story

This month's Patient Story featured Amy - discussing her experience with the Parent and Baby Service at Combined Healthcare during her third pregnancy, after experiences with post-partum psychosis following previous pregnancies. You can watch the recording of the story and Board discussion [at this link](#).

REACH Recognition Individual Award

This month's REACH Recognition Individual Award was presented to - Jenny Reynolds – Discharge Pathway Lead. You can watch the recording of the REACH Award [at this link](#).

Chief Executive's Report

Dr Buki Adeyemo, Chief Executive, presented the report, which is available [at this link](#). You can watch the recording of the CEO Report [at this link](#).

ICB Briefing 20 March 2025

Dr Buki Adeyemo referred the Board to the availability of the monthly briefing from the ICB, which is available [at this link](#).

Chair's Report

The Chair's written report to the Board is available [at this link](#). Janet wanted to emphasis in particular the importance of everyone treating each other with kindness and respect. This was important across all we do in the current challenging environment. There was a particular discussion around the recent Supreme Court ruling on transgender and a welcome for the Trust's supportive response. Janet had also particularly enjoyed her visit to the Salt Box charity and wanted to highlight the work they do. You can watch the recording of the Chair's report [at this link](#).

Questions from Members of the Public

There were no questions from members of the public. N.B. Anyone can submit a question for consideration and discussion at the Board via the [Ask The Board facility](#) on the Trust website.



Intensive Outreach Update & Independent Mental Health Homicide Review into the Tragedies in Nottingham

Kenny Laing, Chief Nursing Officer, presented the report. The report draws on findings from the independent homicide review into the tragedies in Nottingham and the Midlands Mental Health Maturity Index Tool (MMHMIT) self-assessment. It highlights current service gaps and provides both short- and long-term recommendations aimed at strengthening care for this complex and vulnerable group. The Board were assured that the Trust was approaching this issue correctly, taking into account the need to balance safety with people's individual rights. A Task and Finish Group had been established to take necessary work forward. The full report is available in the [Trust Board bundle](#).

Community Mental Health Transformation Programme: Evaluation and Review

Ben Richards, Chief Operating Officer, presented the report. The Adult Community Mental Health Transformation Programme (2021– 2024) aimed to enhance service accessibility, integration, and care quality. Governed across the ICS footprint, the programme engaged multi-agency teams and aligned with national frameworks. This report evaluates key findings, lessons learned, and future priorities determined following a formal evaluation process and is available in the [Trust Board bundle](#).

Quality Committee Assurance Report

Prof. Pauline Walsh, Committee Chair, presented the report from the meeting of the Quality Committee held on 8 May 2025. The Trust was provided with updates in relation to the number of Out of Area patients we currently have, which is because of several factors including high demand, temporally reduced bed numbers due to Project Chrysalis and patients who are Clinically Ready for Discharge with no community placements to move to. A report providing more detailed assurance regarding the management of Out of Area Patients will be presented to the next Committee.

The committee received an update regarding the CQC Inspection at Holmcroft GP surgery. We have received the draft report from the CQC, which indicates an overall 'Good' CQC Rating. The final report will be issued and published once the factual accuracy process is completed and this is currently underway.

The committee received an update regarding the progress with the Draft Quality Account. This year the Quality Account has a much stronger focus on Patient and Partner feedback. The final draft will be presented to the Quality Committee in June 2025.

Improving Quality and Performance Report (IQPR) Month 12

Eric Gardiner, Chief Finance Officer, presented the report. There are 4 special cause variations (orange variation flags) – signifying concern:

- Referral to Treatment within 18 weeks
- CYP: Eating Disorders-Referral to Assessment (Urgent) 1 week
- Appraisal
- Sickness Absence

There are 9 special cause variations (blue variation flags) – signifying improvement:

- CYP: Eating Disorders – Referral to Assessment (Routine) 4 weeks
- Early Intervention - A Maximum of 2 Week Waits for Referral to Treatment
- Clinically Ready for Discharge
- Risk Assessment
- Complaints Open Beyond Agreed Timescale
- Vacancy Rate
- Staff Turnover
- Agency Spend
- Statutory and Mandatory Training

Being Open Annual Report

Kenny Laing presented the report. The Trust provides staff with multiple options to raise concerns including raising matters either with their line manager or senior managers or with the Patient Safety Team. If staff feel unable to raise matters via this means, other options are available for raising concerns both internally and externally. In certain areas, the Trust had responded to clusters of concerns by commissioning independent reviews and were implementing recommendations.

During 2024/25 the Trust received a total of:

- 81 Dear Buki submissions (+ 22 compared to 2023/24)
- 86 FTSU concerns (+ 15 compared to 2023/24)
- 18 grievance cases with 3 cases carried forward from the previous tax year.

New grievance cases were received from the following directorates:

- Corporate Directorate 1 grievance
- Acute & Urgent Care Directorate 6 grievances
- Specialist Directorate 5 grievances
- Community Directorate 4 grievances
- Primary Care Directorate 2 grievances

People, Culture and Development Committee Assurance Report

Martin Evans, Committee Chair, presented the report from the meeting of the Committee held on 8 May 2025. The Committee had considered the Being Open Annual Report. The emerging patterns of concerns relate to cultural and behavioural issues. This is alongside the findings of a recent learning reviewing and awaited findings of an Invited Review, from which a consolidated plan will be developed as part of the Trust's People Plan (great place to work workstream – Civility and Just & Restorative Cultural approach).

The Committee looked in detail at the following performance areas:

- Sickness
- Clinical supervision
- Employee Relations activity
- Casework remains higher and more complex than average, in terms of Oliver McGowan training
- Workforce Plan
- Financial Control Recovery Group (FCRG)
- EDI dashboard

Positive performance was acknowledged as follows:

- Vacancy Rate: 8.1% in M11 and has achieved the required standard for the sixth consecutive month
- Appraisal: continue to be above the 85% target.
- Staff Turnover: Staff turnover has improved to 9.2% and achieved the required standard for the second consecutive month
- Agency spend: Agency spend has improved the fifth consecutive month to 2.7%.
- Time to hire: remains within the KPI of 60 days currently at 55.8, a decrease of 4.2 days from Q3.

Finance position month 12

Eric Gardiner presented the report.

The Adjusted Financial Performance in month is a £495k surplus against a planned surplus of £111k giving an underspend of £384k. The year end position is a surplus of £3,521k against a breakeven plan.

The Trust has a recurrent CIP target of £4.3m, a non-recurrent target of £0.7m and an element of the System stretch target of £1.4m. The Trust's financial outturn shows full achievement of the Trust CIP of £6.4m, with £3.5m recurrently and £2.9m non-recurrently.

In month agency expenditure was £203k or 1.38% of the total pay bill. Agency expenditure for the year is £2.7m year to date which equates to 2.49% of the total pay bill.

The Trust's capital expenditure was on plan at £5.3m.

In month, 97% based on the number of invoices and 99% based on the value of invoices received by the Trust were paid within 30 days against the Better Payment Practice Code target of 95%.

Finance and Resource Committee Assurance Report

Russell Andrews, Committee Chair, presented the report from the meeting of the Committee held on 8 May 2025.

The Committee were advised of high levels of out of area patients. The Trust is continuing to escalate the clinically ready for discharge. Committee want to understand the trajectory for this. Weekly CIP reporting to NHS England is in place until end of May.

The financial performance, including CIP and capital, was welcomed as a very strong performance. The committee has agreed to review CIP performance on a monthly basis.

Updates were received relating to: M12 Trust Performance, Risk Register, Board Assurance Framework, M12 Finance Position, M12 ICS Finance, Cost Improvement Programme, Q3 SLR, Estates and Capital, Business Opportunities, Sustainability Q4 Report, Transformation Management Q4 Update and Digital Project updates.

Board Assurance Framework Quarter 4 Report

Nicky Griffiths, Deputy Director of Governance and Trust Board Secretary, presented the report, which was approved by the Board. The full BAF is available in the [Board papers bundle](#).

Gifts Hospitality and Sponsorship Register

Nicky Griffiths presented the report, which was approved by the Board. The full declaration of Gifts, Hospitality and Sponsorship 2024/25 is available in the [Board papers bundle](#).

NHS Provider Licence Self Certification 2024/25

Nicky Griffiths presented the report. The annual NHS Provider Licence self-certification process provides assurance that NHS providers are compliant with the conditions of their NHS provider licence which includes assurance against the management of risks to service delivery and/or delivery of the Trust Strategy.

Consent items

The following items were presented as consent items and can be read in the [Board papers bundle](#)

- Safer Staffing Monthly Report March 2025
- Quality Committee Assurance Report from the meeting held on 3rd April 2025
- Finance and Resource Committee Assurance Report from the meeting held on 3rd April 2025
- Committee Effectiveness Annual Report 2024/25

Any Other Business

The Board meeting closed at 12.05pm following a two minute's silence for VE Day. Date and time of next meeting in public is 10.00am, 10 July 2025. To access papers and meeting link, please visit <https://www.combined.nhs.uk/about-us/our-board/board-meetings/>