

<b>Report to:</b>	<b>Public Board of Directors</b>	<b>Agenda item:</b>	<b>13.0</b>
<b>Date of Meeting:</b>	<b>31 March 2021</b>		
<b>Title of Report:</b>	<b>Non Clinical Governance Committee (NCGC) Chair's Update Report</b>		
<b>Status:</b>	<b>For Discussion</b>		
<b>Board Sponsor:</b>	<b>Sumita Hutchison, Non-Executive Director and Chair of Non Clinical Governance Committee</b>		
<b>Author:</b>	<b>Stephanie Spottiswood, EA to Chief Operating Officer and Director of Estates &amp; Facilities</b>		
<b>Appendices</b>	<b>None</b>		

<b>1.</b>	<b>Purpose</b>
<p>This report summarises the discussions, recommendations and approvals made by Non Clinical Governance Committee on 11<sup>th</sup> March 2021, to provide the Board with an update of the Committee's activities.</p>	
<b>2.</b>	<b>Background</b>
<p>The Non Clinical Governance Committee holds delegated responsibility from the Board of Directors; this report provides evidence to satisfy the Board that the tasks required to meet those responsibilities are being carried out.</p>	
<b>3.</b>	<b>Business Undertaken</b>
<p>The Health and Safety Manager, presented the Non Clinical Incidents and Litigation report. The Chair noted, after discussion and review by the Committee, that a key learning is staff training. It was agreed that the Committee was assured that a process is in place to capture lessons learned from incidents and claims.</p> <p>The Health and Safety Manager, presented the Health and Safety report. The Health and Safety Manager informed the Committee that the Health and Safety Executive had confirmed that the Trust has now complied with the improvement notice that were imposed following the recent inspection.</p> <p>The Committee was informed that from May onwards, the Health and Safety team will work to ensure that its programme of visits around the site is fulfilled. The Committee agreed with the need to ensure that the pressure to keep the site safe for patients, staff and visitors remains a key priority.</p> <p>The Director of Estates and Facilities presented the Sustainability report and the Committee that the Trust is on track to achieve its 5% carbon reduction target for this financial year. The Committee commended the progress being made in this area, and noted the early work being done with ICS partners.</p> <p>The Director of Estates and Facilities, presented a broader report focussing on the range of activities within his portfolio. He informed the Committee that although his team are doing all the right things, potential risks in this area could be difficult to effectively manage or mitigate. The team are increasingly using the Improving Together methodology to focus on high risk areas.</p> <p>With regard to the maintenance backlog, the Director of Estates and Facilities</p>	

confirmed that the detail from the 6 Facet Survey had helped in the development of this year's capital plan, and the work being done is based on the expectation for normal levels of backlog investment throughout the course of the next financial year. The Board would be notified of any high risk issue that cannot be resolved.

The Director of Estates and Facilities, presented the Cleaning Improvement Plan and Dashboard reports, highlighting the 2 main areas of activity: the National Standards for Healthcare Cleanliness project, which is due to be published in the next couple of months, and the design of the Trust's new cleaning service. The main change is the move from a 5 day a week cleaning service to a 7 day a week service. A full business case will be presented to the Board later in the year.

The Chief Information Officer gave a presentation on the Trust's digital strategy. He noted that good progress had been made within the sphere of core infrastructure and that across BSW, there will be a host of solutions that would be more effective and efficient if rolled out at scale.

**4. Key Risks and their impact on the Organisation**

Estates & Facilities: Fire and Water.

**5. Key Decisions**

**6. Exceptions and Challenges**

Nothing impacted on the Committee's ability to undertake its business.

**7. Governance and Other Business**

The Non Clinical Governance Committee meets every 3 months, and the Committee's Terms of Reference are reviewed annually. The Committee's members and regular attenders undertake a self-assessment bi-annually to review the effectiveness of the Committee compared to best practice. The Committee's membership consists of the Non-Executive Directors, The Chair, The Chair of the Audit and Risk Committee, and the Head of Corporate Governance.

**8. Future Business**

**9. Recommendations**

The Board is asked to note this report.