

COUNCIL OF GOVERNORS MEETING
Unconfirmed Minutes of the public meeting held on 14th May 2019
5:30pm – 8:00pm, Lecture Theatre 2, Education Centre, King's Mill Hospital

Present:	John MacDonald	Chairman	JM
	Ann Mackie	Public Governor	AM
	Belinda Salt	Public Governor	BS
	Brian Bacon	Public Governor	BB
	Gerald Smith	Public Governor	GS
	Ian Holden	Public Governor	IH
	Jacqueline Lee	Staff Governor	JL
	Jane Stubbings	Public Governor	JS
	Jayne Revill	Staff Governor	JR
	John Wood	Public Governor	JW
	Kevin Stewart	Public Governor	KS
	Louise Knott	Appointed Governor	LK
	Martin Stott	Public Governor	MS
	Morgan Thanigasalam	Staff Governor	MT
	Philip Marsh	Public Governor	PM
	Richard Shillito	Public Governor	RS
	Roz Norman	Staff Governor	RN
	Sue Holmes	Public Governor	SuH
	Valerie Bacon	Public Governor	VB

In Attendance:	Richard Mitchell	Chief Executive	RM
	Shirley Higginbotham	Director of Corporate Affairs	SH
	Debbie King	Named Nurse Lead, Safeguarding Adults	DK
	Meg Haselden	Deputy Head of Nursing for Quality Governance	MH
	Graham Ward	Non-Executive Director	GW
	Tim Reddish	Non-Executive Director	TR
	Barbara Brady	Non-Executive Director	BB
	Neal Gossage	Non-Executive Director	NG
	Manjeet Gill	Non-Executive Director	MG
	Shannon Wilkie	Minutes	

Observer:

Apologies:	Lawrence Abrams	Public Governor
	Richard Boot	Staff Governor
	Tony Egginton	Public Governor

Absent:	Amanda Sullivan	Appointed Governor
	Councillor Helen Hollis	Appointed Governor
	Councillor John Doddy	Appointed Governor
	Claire Ward	Non-Executive Director

Item No.	Item	Action	Date
19/169	CHAIR'S WELCOME, APOLOGIES FOR ABSENCE AND QUORACY CHECK		
1 Minute	<p>The meeting being quorate JM declared the meeting open at 17:30.</p> <p>JM congratulated the Governors that had been elected or re-elected and welcomed Governors to the meeting.</p> <p>It was CONFIRMED that apologies for absence had been received from: Lawrence Abrams – Public Governor, Jacqueline Lee – Staff Governor and Richard Boot – Staff Governor.</p>		
19/170	DECLARATIONS OF INTEREST		
1 Minute	<p>MS declared that he had been appointed as a Councillor for Southwell Town Council.</p> <p>No further declarations were made.</p>		
19/171	MINUTES OF THE PUBLIC MEETING HELD ON 12TH FEBRUARY 2019		
1 Minute	<p>Following a review of the minutes of the full CoG meeting held on 12th February 2019 the Council APPROVED the minutes as a true and accurate record.</p>		
19/172	MATTERS ARISING FROM THE MINUTES/ACTION LOG		
1 Minute	<p>The Council AGREED that actions 19/159, 19/160 and 19/162 were COMPLETE and could be removed from the Action Tracker.</p>		
19/173	CHAIR'S REPORT		
2 Minutes	<p>JM presented the report to the Council. No questions were raised regarding the content of the report.</p> <p>The Council was ASSURED by the report.</p>		
19/174	CHIEF EXECUTIVE'S REPORT		
30 Minutes	<p>RM presented the report to the Council and highlighted the 3 key points to note in the report.</p> <p>RM advised that following a review of 2018/19 performance, undertaken in the Public Board meeting, 5 key areas of success had been identified. These are staff engagement progress, achieving a quality patient experience whilst providing safe care, improvement of performance against access standards, positive financial performance and work being undertaken to develop the Trust strategy and improve partner working in the ICP and ICS.</p> <p>Secondly, RM emphasised the need to change the ways of working despite the positive improvements made in the previous 3 years. This includes ensuring patients are treated in the way staff would like friends and family to be treated, and treating colleagues the way in which an</p>		

individual would like to be treated, whilst also taking steps to reduce increasing demand. RM felt that if the system continues to work in a way in which organisations focus improvements inwardly rather than system wide, challenges will become too intense to manage. RM also felt proud that SFHFT is taking a lead within the ICP.

Finally, RM highlighted the misconceptions surrounding pressures relating to the ICP, ICS and support being provided to King's Lynn NHS Trust and assured the Council that these are appropriate steps to take to ensure a positive future for SFHFT. JM assured the Council that frequent conversations are taking place with all Board members to ensure the correct balance of managing SFHFT and contributing to system working is being maintained.

VB enquired whether RM felt as though he was receiving enough support within his role as CEO and Lead Officer for the ICP which RM confirmed. RM emphasised the importance of team work amongst senior leaders to ensure colleagues feel supported.

MS acknowledged the recent reports received by the Board of Directors regarding increasing levels of staff with mental health issues and queried whether this is directly linked to organisational pressures. RM explained the work currently being undertaken via the Trust strategy to ensure a commitment is made to improving both physical and mental wellbeing of staff by implementing a number of support mechanisms. This is an area RM feels is important and work will continue to be undertaken to further improve this position.

MS enquired whether the current issues surrounding tax and pensions for senior staff within the NHS are contributing to staffing problems. RM advised that the changes made in recent years to public sector pensions have proven problematic to NHS staff above a certain pay grade and this has impacted the number of clinical duties medical staff are willing to undertake as they are essentially financially penalised for working more clinical hours. RM assured the Council that work is ongoing to identify a solution to the problem. RM felt that communications from health journals such as the BMJ, encouraging clinical staff to reduce their clinical commitments may pose a risk to staffing levels within the organisation. RM assured the Council that an update on the position would be provided in due course.

RS queried the process of agreeing and implementing the constitutional standards that health providers adhere to. RM advised that the constitutional standards are agreed by the Department of Health, led by the Secretary of State. RM felt that improved performance against access standards have strengthened the relationship between NHSI and SFHFT. RM stated that access standards are pertinent to achieving good patient care.

RS requested further detail on SFHFT's relationship with King's Lynn NHS Trust. RM explained that SFHFT was identified as an appropriate 'buddy' Trust, by the CQC, to support King's Lynn NHS Trust during their improvement journey.

The Council was ASSURED by the report.

19/175	PATIENT STORY THANK YOU FOR SEEING ME. DOMESTIC ABUSE - A PATIENT'S JOURNEY		
30 Minutes	<p>DK presented the patient story describing two separate stories of domestic abuse and the work and interventions undertaken by the Safeguarding Team.</p> <p>DK informed the Council that nationally, 1 in 3 women and 1 in 8 men, at some point in their life will experience domestic abuse. Nationally, 1 in 8 women will experience domestic abuse today. A call to police relating to domestic violence will be made roughly every 30 seconds of every day. Circa 1 in 9 people that experience domestic abuse will use drugs, 1 in 15 will use alcohol excessively and 1 in 4 will experience mental health issues. In Nottinghamshire alone, 20,000 women have been affected by domestic abuse in the last year. DK emphasised that these statistics are likely much higher, but a lot of domestic abuse goes unreported.</p> <p>LK advised the Council that preventative work is being undertaken within West Nottinghamshire College to educate young people on characteristics of an unhealthy relationship. DK advised that having a hospital based IDVA strengthens the prevention of, and intervention against, domestic abuse as well as integrating local authorities to work together, such as Police and Social Services.</p> <p>PM felt that the increase in successful prosecution of domestic abuse offenders is a positive indicator that more people are recognising that domestic abuse is unacceptable and are subsequently reporting it.</p> <p>JM advised that the ICP and ICS will be important channels for enabling team working between local authorities, in an attempt to tackle domestic abuse.</p> <p>The Council RECEIVED the patient story.</p>		
19/176	15 STEPS		
15 Minutes	<p>MH presented the quarterly report to the Council and advised that going forward, 15 Steps reports will be presented to the Council after being presented to the Quality Committee. MH invited the newly appointed Governors to join the 15 Steps work and advised that should anyone wish to participate, this can be arranged outside of the meeting.</p> <p>MH highlighted recent changes made to the 25 Step visit approach including an expansion to the areas visited, such as non-clinical areas. MH also informed the Council that actions arising from visits are now formally recorded on a log with an action lead identified to ensure appropriate follow up is undertaken. MH advised that there had been successful partial roll out of the Perfect Ward app, which teams use to capture findings of visits however not every team is using this platform at present.</p> <p>MH highlighted themes of positive findings from recent 15 Steps visits such as; organised yet busy departments, welcoming and professional staff that are positive about their work, delivery of good care, positive feedback from patients, team work and clean and tidy departments.</p>		

	<p>MH advised that areas requiring improvement had also been identified such as; practicing good Information Governance, specifically relating to unattended patient notes, information on ward boards not being appropriately updated and lack of appropriate signage in some areas. MH assured the Council that due to the support of the 15 Steps teams, some issues had been quickly resolved following visits.</p> <p>MS described issues witnessed at a recent 15 Steps visit and expressed concern that said issues had not been reflected within the report. This specifically related to the Early Pregnancy Unit and the Mortuary and the space allocated to these units. MS enquired whether capital had been allocated to resolve the issues identified in these areas.</p> <p>JM felt that governance arrangements in place regarding 15 Steps visits feedback must be strengthened to ensure actions are captured and followed up. JM enquired whether the Non – Executive Directors felt assured on the current process in place. BB felt that the process is appropriate and the issue raised relates to a reporting delay rather than a governance issue.</p> <p>VB expressed concern around the consistency of 15 Steps visit arrangements and a lack of communication from members of the 15 Steps team. VB had not successfully participated in a 15 Steps visit since December 2018 and was yet to receive a date and meeting point for the forthcoming May 2019 visit despite requesting further information. VB also felt as though the previous visits had not been accurately recorded, as VB had not been included in the report as 'attendance' at the visits.</p> <p>MH explained that the process of organising visits is the responsibility of each individual team and therefore can be inconsistent. MH assured VB that this would be resolved via email with further members of the team. JM felt that further work must be undertaken to improve the process.</p> <p>Action;</p> <ul style="list-style-type: none"> SH to discuss with SuH, BB and JM how to improve consistency of 15 steps, strengthen learning, governance and timing for 15 steps, Meet your Governor sessions and other activities to ensure that issues are dealt with, key themes identified and appropriate actions taken. <p>The Council was ASSURED by the report.</p>	SH	13/08/19
19/177	FIT AND PROPER PERSON ANNUAL REPORT		
5 Minutes	<p>SH presented the report to the Council and requested that 'Fit & Proper Persons Requirement' (FPPR) documentation be returned to SH once completed by each Governor.</p> <p>SH explained that FPPR is not mandatory for Governors however as an organisation SFHFT will require both a FPPR return and DBS check for each Governor, as best practice.</p>		

	The Council was ASSURED of the report.		
19/178	STRATEGIC RISKS – BOARD ASSURANCE FRAMEWORK (BAF)		
5 Minutes	<p>RM presented the report to the Council and advised that the BAF is a mechanism for identifying and managing principle risks within the organisation. The BAF is discussed at Executive Team Meetings, sub - committees and also the Board of Directors meeting held in Public.</p> <p>RM informed the Council that the 3 biggest concerns within the organisation currently are demand that overwhelms capacity, non-achievement of financial sustainability and experiencing a critical shortage of workforce capacity and capability. RM emphasised that these risks are not unique to SFHFT and are being experienced by NHS organisations throughout the country.</p> <p>RM informed the Council that an annual review of the BAF is scheduled to be undertaken at the Board Workshop to take place on 30th May 2019.</p> <p>MS enquired as to whether SFHFT can be assured that the financial position of Skanska is secure. GW assured the Council that work is being undertaken to generally improve the service quality and relationship between Skanska and SFHFT. GW advised the Council that Skanska, as a company, has a stable financial base. GW informed the Council that further assurance can be taken as the topic of PFI and Skanska performance is discussed at Joint Liaison Committee, Risk Committee, Finance Committee and Board of Directors meetings.</p> <p>GW felt that the Board of Directors now has more accountability for the BAF as it is presented at meetings requiring approval, when previously this has been for information.</p> <p>The Council was ASSURED by the report.</p>		
19/179	REPORT FROM BOARD SUB-COMMITTEES		
5 Minutes	<p>Audit and Assurance Committee (AAC)</p> <p>GW presented the report to the Council and advised that the recent focus of the Audit and Assurance Committee had been developing the Annual Accounts, Annual Report and Quality Account, which are scheduled to be fully signed off in the coming week.</p> <p>GW informed the Council that SFHFT had received a draft HOIAO with a Significant Assurance rating. The final HOIAO is scheduled to be received in the coming week.</p> <p>GW highlighted the improvements made to the implementation process of internal audit recommendations in recent months.</p> <p>IH, as a Governor Observer for the AAC, felt assured that the Committee is functioning successfully and meeting objectives. JM thanked the Governor Observers of each Board Sub Committee for their contributions over the year.</p>		

MS enquired whether the Trust has robust business continuity and emergency planning processes in place, including plans involving external agencies.

BB confirmed that SFHFT is an active participant in local resilience forums that involve organisations across the County.

PM queried what data quality assurance processes are currently functioning within the organisation. GW advised that this is within the remit of internal and external auditors.

The Council were ASSURED by the report.

Quality Committee

BB presented the report to the Council and advised that the Trust is making good progress against the Quality Strategy Campaign and 'should do' CQC action plan.

BB highlighted to the Council an extensive discussion that took place at the previous Quality Committee meeting surrounding the Trusts non-compliance with recent legislation regarding 'Falsified Medicines Directive'. BB assured the Council that a business case is being developed to ensure the required process is implemented to ensure compliance.

BB informed the Council that SFHFT has once again been rated the best organisation in the East Midlands for patient experience within Maternity Services.

JR assured the Council that as a clinical member of staff, experiences of 15 Steps have thus far been positive.

RM informed the Council that no indication had been received from the CQC as to when SFHFT can expect another quality visit. RM explained the reasoning as to why a CQC inspection would be beneficial to SFHFT is therefore welcomed.

The Council was ASSURED by the report.

Finance Committee

NG presented the report to the Council and advised that for 2018/19 SFHFT had delivered a financial position that was £110k better than control total. In addition £7.58m of Provider Sustainability Fund (PSF) monies had been received as a result of achieving both annual control total and 95% ED target at M12.

NG explained to the Council the contributing factors of the £46.3m deficit. As discussed in the Finance Committee meetings, 46% of the Trust deficit relates to structure and the PFI and is therefore not within the immediate control of the Trust. 28% of the deficit is contributed to by a strategic element, which is within the control of the wider system. The remaining 26% of the deficit is operational and within the control of the organisation.

	<p>NG advised the Council that in relation to the BAF risks within the remit of the Finance Committee, there had been a reduction in the level of risk. This is as a result of improved relationships with partners and achieving control total for 3 consecutive financial years.</p> <p>MS expressed concern that the Capital Programme had not been made readily available to the Council as a source of assurance. NG informed the Council that the organisation has a limited capital allocation which must be prioritised and is monitored closely. RM felt as though the capital available to the organisation is being allocated in the most effective way possible.</p> <p>Action;</p> <ul style="list-style-type: none"> • <i>The 2019/20 Capital Plan to be shared with the Council of Governors.</i> <p>The Council was ASSURED by the report.</p> <p>People, OD and Culture Committee</p> <p>MG presented the report to the Council and highlighted the roles and responsibilities of the Committee following the first meeting which took place in March 2019.</p> <p>MG informed the Council that the strategic risk relating to workforce will be monitored through the People, OD & Culture Committee going forward rather than the Quality Committee.</p> <p>MG advised the Council that work that will be undertaken to ensure an element of SFHFT influence within ICP and ICS work regarding culture.</p> <p>VB felt concern surrounding the negative nature of some of the free text comments arising from the annual staff survey, specifically relating to themes of nepotism, cliques, bullying and lack of support from management.</p> <p>MG advised the Council that statistically, the negative free text comments are a minority when the number of staff in the organisation is considered. Nevertheless, MG felt that any number of negative comments is unacceptable. RM assured the Council that work is being undertaken to address issues raised and to shift the culture within SFHFT in a positive direction. The Council felt it positive that staff are becoming more comfortable raising concerns regarding undesirable behaviour experienced in the workplace</p> <p>JM stated that a Freedom to Speak Up Guardian had recently been appointed to support staff and the profile of the work being undertaken by this member of staff needed to be raised.</p> <p>RN felt that from a staff side perspective, sufficient work is being undertaken to improve the culture, such as the divisional action plans being developed as a result of the staff survey results.</p> <p>The Council was ASSURED by the report.</p>	<p>RM</p>	<p>13/08/19</p>
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	<p>Charitable Funds Committee (CFC)</p> <p>TR presented the report to the Council and advised that the main remit of the CFC is to identify projects that require charitable funds and manage any funds raised.</p> <p>Also, it is the remit of the CFC to manage the volunteers and donations. TR felt proud of the number and quality of the SFHFT volunteers.</p> <p>TR advised the Council that CFC is managing 5 large campaigns at present, one of which is the Gamma Scanner appeal which had obtained circa £310k as at April 2019.</p> <p>TR informed the Council that an independent, objective individual, identified by SH had reviewed the CFC and identified a number of small actions to take to strengthen the mechanisms already in place.</p> <p>TR felt that a helpful process had been reviewing investments to ensure the outturn value is as that during the proposal stage and to take lessons learned in the event of an unsuccessful project.</p> <p>The Council was ASSURED by the report.</p> <p>Action;</p> <ul style="list-style-type: none"> <i>The Governor Observer process to be reviewed and new observers appointed for each Board Sub Committee.</i> 	SH	13/08/19
19/180	COUNCIL OF GOVERNORS MATTERS / STATUTORY DUTIES		
5 Minutes	<p>Lead Governor Report</p> <p>SuH presented the report and advised that the Council are concerned that there is no Governor to represent the Trust volunteers. SH advised that despite several attempts, no eligible volunteers have expressed an interest in becoming a Governor. SH advised that the Council will need to consider whether to change the Constitution to state that the Staff Governors also represent the Governors.</p> <p>JM suggested that the Governors meet with volunteers annually to ensure they are adequately represented.</p> <p>The Council CONSIDERED the report.</p>		
3 Minutes	<p>Membership and Engagement Group</p> <p>SuH presented the report and advised that presentations of the staff survey results had been received by the Group.</p> <p>The Council CONSIDERED the report.</p>		
19/181	OUTSTANDING SERVICE		
6 Minutes	A short video was played highlighting the work of the Switchboard Team.		

	RM emphasised that non clinical colleagues also experience organisational pressures and expressed thanks for staff's hard work during difficult periods.		
19/182	QUESTIONS FROM MEMBERS OF PUBLIC		
0 Minutes	No questions were raised by members of the public		
19/183	ESCALATIONS TO THE BOARD OF DIRECTORS		
2 Minutes	The Council AGREED the following escalations to the Board of Directors meeting: <ul style="list-style-type: none"> • Variability and feedback surrounding 15 Steps visits • Monitoring of Executive Team Capacity • Systems governance and how this related to the Trust's governance arrangements. • Gratitude of Council of Governors towards the hard work of the organisation throughout the previous year. 		
19/184	ANY OTHER BUSINESS		
0 Minutes	The Council did not raise any other business.		
19/185	DATE AND TIME OF NEXT MEETING		
0 Minutes	Date: Tuesday 13 th August 2019 Time: 5:30pm - 8:00pm Venue: Newark & Sherwood District Council Offices, Castle House, Great North Road, Newark, NG24 1BY – Room Civic 1 & 2 There being no further business the Chair declared the meeting closed at 19:45		
	Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted. John MacDonald Chair Date		

NAME	AREA COVERED	CONSTITUENCY	FULL COUNCIL OF GOVERNORS MEETING DATES				TERMS OF OFFICE	DATE ELECTED	TERM ENDS
			14/05/2019	13/08/2019	12/11/2019	Feb 2020			
Amanda Sullivan	M&A and N&S CCG	Appointed	X				1	01.06.17	31.05.18
Ann Mackie	Newark & Sherwood	Public	P				3	01/05/19	30/04/22
Belinda Salt	Mansfield	Public	P				3	01/05/19	30/04/22
Brian Bacon	Derbyshire	Public	P				3	01/05/19	30/04/22
Councillor Helen Hollis	Ashfield District Council	Appointed	X				1	14/05/18	24/05/19
Councillor John Doddy	Nottinghamshire County Council	Appointed	X				4	27/07/17	31/05/21
Gerald Smith	Mansfield	Public	P				3	01/05/19	30/04/22
Ian Holden	Newark & Sherwood	Public	P				3	01/05/19	30/04/22
Jacqueline Lee	Newark Hospital	Staff	A				3	01/05/19	30/04/22
Jane Stubbings	Ashfield	Public	P				3	01/11/17	31/10/20
Jayne Revill	King's Mill Hospital	Staff	P				3	01/05/19	30/04/22
John Wood	Mansfield	Public	P				3	01/05/19	30/04/22
Kevin Stewart	Ashfield	Public	P				3	01/05/19	30/04/22
Lawrence Abrams	Rest of East Midlands	Public	A				3	01/05/19	30/04/22
Louise Knott	Vision West Notts	Appointed	P				3	01.03.15	31.03.18
Martin Stott	Newark & Sherwood	Public	P				3	01/05/19	30/04/22
Morgan Thanigasalam	King's Mill Hospital	Staff	P				3	01/10/17	31/10/20
Philip Marsh	Ashfield	Public	P				3	01/05/19	30/04/22
Richard Boot	Newark Hospital	Public	A				3	01/05/19	30/04/22
Richard Shillito	Newark & Sherwood	Public	P				3	01/05/19	30/04/22
Roz Norman	King's Mill Hospital	Staff	P				3	01/05/19	30/04/22
Sue Holmes	Ashfield	Public	P				3	01/11/17	31/10/20
Tony Egginton	Mansfield	Public	X				3	01/05/19	30/04/22
Valerie Bacon	Derbyshire	Public	P				3	01/08/19	31/07/22