

Council of Governors - Cover Sheet

Subject:	Membership and Engagement		Date:	12 th Nov 2024	
Prepared By:	Liz Barrett, Lead Governor				
Approved By:					
Presented By:	Liz Barrett, Lead Governor				
Purpose					
To share an overview of the activity being discussed and debated in the Membership and Engagement committee				Approval	
				Assurance	X
				Update	X
				Consider	
Strategic Objectives					
Provide outstanding care in the best place at the right time	Empower and support our people to be the best they can be	Improve health and wellbeing within our communities	Continuously learn and improve	Sustainable use of resources and estates	Work collaboratively with partners in the community
	X	X	X		
Principal Risk					
PR1	Significant deterioration in standards of safety and care				
PR2	Demand that overwhelms capacity				
PR3	Critical shortage of workforce capacity and capability				
PR4	Insufficient financial resources available to support the delivery of services				
PR5	Inability to initiate and implement evidence-based Improvement and innovation				
PR6	Working more closely with local health and care partners does not fully deliver the required benefits				
PR7	Major disruptive incident				
PR8	Failure to deliver sustainable reductions in the Trust's impact on climate change				
Committees/groups where this item has been presented before					
Membership and Engagement Committee					
Acronyms					
SFHFT (Sherwood Forest Hospital Foundation Trust) MYG (Meet Your Governor)					
Executive Summary					
<p>An overview as to how Governors are currently engaging in Meet Your Governor and the impact / next steps of this.</p> <p>An overview as to postcode mapping linked to governors and patients to ensure the strongest representation possible is in place.</p>					

Membership and Engagement

As a team of governors, we continue to have a focus upon membership and engagement for Sherwood Forest Hospital Foundation Trust. Thank you to Rich Brown for supporting both of these initiatives and providing key feedback information in relation to them.

The revised Meet Your Governor [MYG] approach continues to be embedded.

Agreed principles for new process;

- Refresh of format to promote greater exploration of both concerns and strengths to enable qualitative information to be collected and shared
- Move to quarterly focus on agreed 'hot topics', starting with patient discharge (July to September 2024)
- Key benefit: Targeted focus on 'hot topics' that generate meaningful and actionable feedback for the Trust and specific services.
- One governor to act as the 'hot topic lead' each quarter, as per newly-drafted role profile.

Key Findings

- Four sessions ran in August and September, with six governors taking part.
- 22 conversations recorded with patients in the Discharge Lounge at King's Mill Hospital.
- Majority (84%) of feedback was from patients, with just 8% from carers and 8% from family members.
- 95% (all responses bar one) relate to King's Mill Hospital
- All of those spoken to spent time in the Discharge Lounge
- **Overall experience** - The majority of patients (81%) reported a good or very good experience of Sherwood Forest Hospitals' services.
- Further data was received and reported on.

Lessons Learned From governors

- Build-in provision for Newark and Mansfield Community Hospitals.
- Forward plan more dates, ideally two full months in advance.
- Relatively lower volume of feedback.
- Continued encouragement of more governors taking part would be beneficial.
- Four governors sent apologies for confirmed sessions, with one session being cancelled due to no governors being able to attend.

Lessons Learned From Trust Colleagues

- Stronger engagement with Trust Patient Experience team will ensure complements and supports are appropriately managed and follow Trust processes.
- Consideration to be given as how to best support governors to report specific concerns in-line with Trust Patient Experience policies.
- New format does provide richer feedback but is more time-consuming to facilitate – both from within Communications and in requiring support from Discharge Lounge colleagues.
- Not every question on the questionnaire was answered, so only limited insight available in some areas.

This approach has been slower than is desirable due in part to administrative challenges. These challenges have almost been navigated through and it is hoped that as a team we can rapidly get back on track with monthly MYG visits.

The initial impact of the pilot work of MYG to date though has proven useful and positive. We reviewed the new collation method at our last Membership and Engagement meeting and it was helpful to be able to see the responses to set questions. We discussed how further work / time is required to really start to see the impact of this work and how it can be used to support driving quality improvements moving forward. To this end, we have taken a collective decision to keep the theme focus on 'discharge' for a longer period of time.

It was discussed how valuable it is to also be able to listen to patients / staff / carers / public etc when doing MYG and represent their thoughts / views. As such, it was agreed that we would still do this on the last question on the form so that nothing is lost.

As a Membership and Engagement group we also explored maps as to where patients are engaging from to help us assess if our governing body representation is aligned to patients' communities and representing them well. We explored maps which presented Urgent Emergency Care attendance postcode and outpatient postcode information. We also looked at membership and engagement which was UK wide and representative of East Midlands. A healthy discussion and debate took place and it was deemed that as a group of governors our own individual postcodes do align well with representing the communities accessing and using SFHFT.