

Council of Governors Meeting

Thursday 4th July 2019

14.15 – 17.00

Ground Floor, Ridgeworth House, 5-9 Liverpool Gardens, Worthing,

AGENDA

Please note that Any Other Business items should be advised to the Chairman before the Meeting

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|---|-------|---|-----------|-------------------------|
| 1 | 14.15 | Welcome, Introductions and Apologies for Absence | | Alan McCarthy |
| 2 | 14.25 | Declarations of Interests | Verbal | Alan McCarthy |
| 3 | 14.25 | Minutes of Meeting of the Council of Governors held on 7th March 2019
To approve | Enclosure | Alan McCarthy |
| 4 | 14.25 | Matters Arising from the Minutes
To note | Enclosure | Alan McCarthy |
| 5 | 14.35 | Board Report to Council
To receive and agree any actions | Verbal | Dame Marianne Griffiths |

LISTENING AND REPRESENTING

- | | | | | |
|---|-------|---|-----------|-----------------|
| 6 | 14.45 | Lead Governor's Report
To receive and agree any necessary actions | Enclosure | John Thompson |
| 7 | 14.55 | Membership Committee Report
To receive and agree any necessary actions | Enclosure | John Thompson |
| 8 | 14.05 | Staff Governors Report
To receive and agree any necessary actions | Verbal | Staff Governors |
| 9 | 15.15 | Appointed Governors Report (District Cllrs) Worthing Borough Council
To receive and agree any necessary actions | Verbal | Val Turner |

ACCOUNTABILITY

- | | | | | |
|----|-------|---|--|--|
| 10 | 15.25 | Governors Feedback from Working Groups | | |
| | | <ul style="list-style-type: none"> • Dementia Strategy Group • Noise @ Night • Patient Catering • Outpatients' Appointments | <ul style="list-style-type: none"> Verbal Verbal Verbal Verbal | <ul style="list-style-type: none"> Patricia Peal Patricia Peal John Thompson John Thompson |
| | | To receive and agree any actions | | |

11	15.35	Committee Feedback – Finance and Performance To receive information on the role of the Committee	Presentation/ Discussion	Lizzie Peers
12	15.45	Report from the Nomination and Remuneration Committee meeting To receive and agree any actions	Enclosure	Glen Palethorpe
<u>GOVERNANCE</u>				
13	15.55	Governor Strategy Group – Update To receive and agree any actions	Verbal	John Thompson
14	16.05	Council of Governors’ Annual Programme of Work To agree	Enclosure	Alan McCarthy / John Thompson
<u>OTHER ITEMS</u>				
15	16.15	Governor Election Report To note and approve recommendation	Enclosure	Glen Palethorpe
16	16.25	Any Other Business		Alan McCarthy
17	16.45	Date of next meetings: AGM: Thursday 25 th July 18.00 – 20.00, Mickerson Hall, CMEC, St Richard’s Hospital Council of Governors: Thursday 3 October 2019 15.00 – 18.00 John Bull Room WHEC, Worthing Hospital, BN11 2DH		Alan McCarthy
18	16.45	Questions from the Members of the Public		Alan McCarthy

Glen Palethorpe
Group Company Secretary
Glen.palethorpe@wsht.nhs.uk

Quoracy of Council of Governors Meetings

A meeting of the Council shall be quorate and shall not commence until it is quorate. Quoracy is defined as meaning that the following requirements are all satisfied:

- there shall be present at the meeting at least one third of all Governors (9)
- of those present, at least 51% shall be Elected Governors
- of whom at least two shall be Elected Public Governors

Minutes of the Council of Governors Meeting held in Public from 09.30am on Thursday 7th March 2019 in the Dome Worthing, 21-22 Marine Parade, Worthing, West Sussex, BN11 3PT.

Present:	Alan McCarthy	Chairman
	John Todd	Public Governor - Adur
	Jill Long	Public Governor - Arun
	Anita Mackenzie	Public Governor - Arun
	John Thompson	Public Governor - Arun
	Roger Hammond	Public Governor - Worthing (Lead Governor)
	Patricia Peal	Public Governor – Worthing
	Les Willcox	Public Governor - Chichester
	Alan Sutton	Public Governor - Chichester
	Andrew Ratcliffe	Associate Governor
	Lyn Fowler	Associate Governor
	John Bull	Public Governor - Worthing
	Penny Richardson	Public Governor - Horsham
	Richard Venn	Staff Governor - Medical & Dental
	Natalie Matthews	Staff Governor - Estates and Facilities
	Miranda Jose	Staff Governor - Additional Clinical Services
	Ryan De-Vall	Staff Governor - Scientific, Technical and Professional
	Val Turner	Appointed Governor, Worthing Borough Council
	Somnath Mukhopadhyay	Appointed Governor, Brighton & Sussex Medical School
	Jane Ramage	Appointed Governor, Friends of Chichester Hospital

In

Attendance:

Patrick Boyle	Non-Executive Director
Mike Rymer	Non-Executive Director
Joanna Crane	Non-Executive Director
Lizzie Peers	Non-Executive Director
George Findlay	Chief Medical Officer
Nicola Ranger	Chief Nurse
Alison Ingoe	Director of Finance
Jennie Shore	HR Director
Glen Palethorpe	Group Company Secretary
Tim Taylor	Medical Director (for Items 4.1 and 4.2)
Jan Simmons	Corporate Governance Officer (Minutes)

Item No	Item Title	Action
COG/03/19/1	Welcome and Apologies for Absence	
1.1	Alan McCarthy welcomed everyone to the meeting.	
1.2	Apologies for absence were noted from : Directors – Marianne Griffiths, Denise Farmer, Karen Geoghegan, Pete Landstrom and Maggie Davies Non-Executive Directors – Jon Furnston Governors – Stuart Fleming, Eileen Lintill, Jacqui Campbell, Moira Whitlock and Linda Tomsett	

COG/03/19/2 **Declarations of Interest**

- 2.1 There were no declarations of interest.

COG/03/19/3 **Minutes of the Council of Governors Meeting held in Public on the 10th December 2018**

- 3.1 The minutes of the meeting of the Council of Governors held on the 10th December 2018 were agreed as correct and **APPROVED** to be signed by the Chairman.

COG/03/19/4 **Matters Arising from the Minutes**

- 4.1 The Matters Arising from the meeting held on the 10th December were received and noted.

4.2 **COG/06/18/9.4 – Student Nurse Applications**

With regard to the number of student nurse applications lost as a result of the impact of student loans replacing bursaries, Nicola Ranger reported that applications were down nationally by 56%. This was an issue across both WSHT and BSUH with far less student applications being received. The Trust was actively working with other Universities to increase the intake and the issue would also be raised at the Chief Nurse Forum.

4.3 **COG/12/18/9.5 – Christmas Gift Distribution**

Jane Ramage commented that the League of Friends were still awaiting a meeting with the Trust to discuss the duplication of Christmas gift distribution within the Trust. **ACTION Patrick Boyle to schedule this meeting**

PB

4.4 **COG/09/18/8.1**

Medical Staff Morale, Resilience – local actions and initiatives

Tim Taylor gave a presentation on a number of actions being taken to measure the morale and resilience of medical staff. The Staff Survey results had shown that, with the exception of appraisals, medical and dental staff compared closely to others, with morale the same as elsewhere in the Trust.

- 4.5 When looking at the survey's themes, some had improved but two areas around culture and well-being were the results showed a reduction . This was also seen nationally with a decreased score in Health and Wellbeing from 6.3 to 6.1.

- 4.6 A number of national and local initiatives were being implemented as well as local actions and initiatives for Trainees but there were still challenges with evidence of a national deterioration in NHS staff wellbeing, workforce pressures, demand and financial constraints and the culture for mental health.

- 4.7 Some of the steps being taken to improve Doctor's Morale included better rota planning, induction, rest facilities, out of hours support and debriefs. In addition the Trust has implemented Wellbeing workshops, a speedy access to counselling and mental health services when needed.

- 4.8 Alan Sutton commented that that these issues also applied to nursing staff and it was important to meet people face to face. Nicola Ranger agreed with this observation and she acknowledged that delays sometimes occurred during busy and challenging times. Nicola added that more creative roles were being established but emphasized that the most important thing was to listen.

- 4.9 Tim Taylor responded to a number of questions advising that one initiative

looking to be implemented during the coming year was for Medical Registrars to provide more leadership to trainees; it was hoped to receive support from the Deanery for this. It was also recognised that students transitioning to F1 doctors would require much greater support than previously.

4.10 **7-Day Services**

Tim Taylor gave a presentation on the progress with 7-day services within the Trust that had been a priority in the NHS for 2-3 years. Patricia Peal hoped that similar support might be given to nurses.

4.11

There were four priority standards to implement:

S2: Assessed by a consultant within 14 hours of admission

S5: Access to key diagnostics

S6: Access to key interventions

S8: Once or twice daily consultant review

4.12

The 7-Day service was adopted by the Trust as a Corporate Project for 2019/20 along with the introduction of a Trust self-assessment through a Board Assurance Framework (BAF) with a local rather than national audit.

4.13

The latest survey results for the Trust's performance for standard 2 (to be assessed by a consultant within 14 hours of admissions) had shown a 76% compliance for Worthing Hospital and 58% for St Richard's Hospital. However, a 3-day live audit trial in St Richard's Hospital achieved 73% compliance. In addition winter resilience short term interventions including additional weekend staffing at St Richard's Hospital had brought a significant benefit to flow.

4.14

A weekly dashboard showing the Trust's performance was circulated to all clinical leads. Live Whiteboard reporting indicated that the percentage of patients reviewed by consultants within the 14 hour timeframe was better on weekdays than at the weekend.

4.15

Tim Taylor reported that the Trust was compliant in Standard 5 but currently relies on neighbouring providers out of hours for MRI scans. However, work was taking place with the Core Division to provide a delivery plan for local provision by 2019 and changes had also been made to increase the presence of consultants at weekends.

4.16

The Trust was meeting Standard 6 and performed well above the national and regional average for Standard 8.

4.17

Richard Venn asked how live audits were carried out. Tim Taylor replied that samples were taken over a 3-day period with an expectation of the daily sample being two thirds medical and one third clinical. This would be part of the Trust's BAF and shared with the Board.

4.18

Following a question, Tim Taylor explained that the Trust were able to provide both CT and MRI scans for patients with spinal cord compression but currently worked with both Southampton and Brighton hospitals to provide the service out of hours. George Findlay added that the direction from NHSI was that patients with spinal cord compression should not have long journeys. Clinical and resourcing work was being undertaken to improve the MRI service locally.

4.19

Responding to a question about the impact of resources on the Emergency Floors, Nicola Ranger replied that both Emergency Floors were well resourced with nursing staff on a 1:6 ratio. Most nurses in these areas had high clinical skills and morale was good.

COG/03/19/5 Lead Governor's Report

- 5.1 Roger Hammond presented the report which had previously been circulated and highlighted the following:
- 5.2 Greater membership engagement was continuing to make good progress and members of the Council were reminded of the importance of events, such as the innovative evening in partnership with the Organ Donation Charity, which were open to all stakeholders.
- 5.3 During the recent peer review of the maternity wards the most striking thing had been the cleanliness of the wards along with comments from patients on fantastic quality of the food.
- 5.4 With the Patient Catering project nearing completion, Roger thanked those Governors who had supported the project and Natalie Matthews for keeping everyone up to date.
- 5.5 Following some issues with communications relating to Outpatient appointments, it was noted that with the help of Jayne Black and Tony Boness, progress had been made and planned improvement work was ongoing. However, where Governors were aware of issues, these would be flagged to the Trust to enable them to be addressed.
- 5.6 John Thompson commended the Governor engagement at the recent Peer Review and was looking forward to seeing the collective outcomes of the various Reviews.
- 5.7 In relation to Outpatient appointments John Thompson had suggested including a project on telephoning patients back as part of the Yellow Belt Training programme, but it was understood that this was already being dealt with as part of the Outpatient Improvement project.
- 5.8 With regard to extended visiting times John added that although he had questioned if 10am – 10pm would bring an improvement, he now saw huge advantages to staff, patients, families and visitors that were not appreciated at the time. Nicola Ranger indicated there had been strong feelings about visiting time and this was due to be reviewed in March 2019.

COG/03/19/6 Membership Committee Report

- 6.1 John Thompson presented the Membership Committee report which had previously been circulated and highlighted the following key areas:
- 6.2 The Council was advised that the Membership Strategy had been formally adopted by the Membership Committee in January and a number of actions to underpin the Strategy were already in progress:
- 6.3
 - GP Surgeries were being encouraged to publicise events and help recruit new members for the Trust.
 - A poster competition was being run in a school to attract younger members; if successful this may be rolled out to other schools.
 - Linking with the Trust's Love Your Hospital Charity and Organ Donation and Volunteers to share merchandise and notice board space.
 - Adding Trust Membership information to the reverse of ward business

cards.

- Medicine for Members has been changed to Medicine for All to reflect that all meetings are open to the public and advertised as such.

6.4 Steps had also been taken to make the 'At Western' newsletter look more interesting with better articles, pictures and an improved layout.

6.5 Responding to a question from Alan McCarthy on how proactive recruitment of members could be focused on minority groups, John Thompson explained that contact had already been made with the local Philippino group with a view to promoting membership and also through the Chaplains of local Deaneries who were keen to engage more with the ethnic minorities.

6.6 **The Council of Governors supported the approach set out in the Membership Strategy and the action plan.**

COG/03/19/7 Staff Governors Report

7.1 It was agreed that the action previously raised by Richard Venn regarding assurance around the best use of resource being employed by the Trust with regard to meeting room accommodation, video conferencing, mileage costs etc, would be addressed in the next staff Governor's meeting with the Chairman.

7.2

Penny Richardson asked if there were plans to have a 7-day Therapist available on the wards. George Findlay replied that currently there were provisional therapies at the weekend but not as much as on weekdays. A lot of therapies were provided at the front door with a view to avoiding admission for frailty patients but providing therapy at home to make drinks and help getting up was more important. Ryan de Vall added that with regard to speech therapy it was sometimes better to give people time to improve.

7.3

Penny suggested that a presentation on nursing resilience would be welcomed by the Governors. It was agreed that this will be incorporated into an information seminar.

COG/03/19/8 Appointed Governor Report

8.1 Val Turner reported that the ongoing local joint project that had been established by the Trust and the Coastal West Sussex Clinical Commissioning Group (CCG) in the Adur and Worthing areas had been very successful and had received funding to extend it for a further two years. This had enabled extra staffing to be taken on, reducing the pressure on GPs for patients with non-medical conditions. The project was being extended to other areas too.

8.2 Jane Ramage reported that a number of items had been funded by the League of Friends including physio equipment at Southlands Hospital, a 2-way radio system at Worthing Hospital that would help the Emergency Floor and A&E to communicate, plus a bladder scanner and £50k operating stand for Gynae surgery at St Richard's Hospital. Since January the League of Friends had committed over £100k to the Trust. A fundraising Ball had also been planned for May 2019. Alan thanked the league of friends for all their work.

COG/03/19/9 Board Report to Council

9.1 George Findlay provided a brief update on the activity and performance of the Trust for the month of January 2019, the highlights of which were as follows:

- 9.2 Attendances and admissions in January had been demanding and relentless but the teams had worked amazingly well with an extra 1300 patients attending A&E (a 13% increase over the previous year).
- 9.3 The 62-day cancer targets had not been met by the Trust in January with only reaching 71%. There was a planned trajectory to reach the target by May 2019. There had been an increase in referrals especially in Colorectal where referrals had seen an increase of 50%.
- 9.4 Referral to Treatment Time (RTT) - the Trust was currently under-achieving on the national measure but action was being taken to improve although the Trust was achieving its commissioned levels of activity. The Trust was one of the few that had improved RTT over the winter period as a result of the Winter resilience plan, which George commended. More patients had been admitted but the length of stay (LOS) had not increased despite the increase in activity.
- 9.5 Finance – Month 10 had been a challenge for the Trust resulting in a £0.5m deficit. The Trust was still expected to achieve the year end control total although budgets would continue to need to be managed effectively to reach this.
- 9.6 Staff survey – the results were very good with the Trust having achieved year on year increases that were maintained again this year. Most metrics were higher than average and the Trust recommended as place to work and to get care. **ACTON The results of the Staff Survey would be circulated to the Council of Governors.**
- 9.7 Improving the Family & Friends Test was one of the Trust's Tue North objectives. A great deal of work had been undertaken on securing improved return rates and with the increased volume of data captured there was increased confidence over the resulting in 97.5% of patients who would recommend the Trust. 96% of A&E patients were satisfied with the service and treatment they received which placed the Trust in the top 15 Trusts nationally The organisation still remained a very successful Trust.
- 9.8 Lyn Fowler asked what impact the National programmes had had on the Trust and if these were putting pressure on the Trust resulting in it missing its 62-day cancer target. George Findlay replied saying that they had a huge impact and that sometimes it was not just the national campaigns but also when celebrities were involved in promoting cancer awareness. Diagnostic MRI scans required a lot of resource but recognizing that cancer is often diagnosed too late resources needed to be realigned accordingly. George confirmed that the Trust had visibility over the central programmes being planned but were unable to gauge what the impact was likely to be.
- 9.9 Jill Long referred to a cancer patient friend who wished to praise the A&E Department for the excellent care they had received.
- 9.10 Patrick Boyle commended the exceptional winter planning that had taken place in the Trust this year. Patrick also praised the organisation for doing so much for the health and wellbeing of staff and felt it was important for the Governors to be aware of this.
- 9.11 Responding to a question from Anita MacKenzie, George Findlay confirmed that the Trust continued to maintain a strong focus on sepsis and more information on this would be given later in the meeting.

JSh/JS

- 9.12 Alan Sutton queried whether the huge increase in patients was weather related given there had been a mild winter. George Findlay replied saying that the weather and lots of other things that were difficult to predict had an impact. The natural pattern was for January and February to be tougher months and with an aging population who were living longer with poor health this drives an increase in admissions and attendances. The Winter plans that had been put in place meant things were done differently at the front door resulting in less beds being used than last year. Having built more resilience in the 2018/19 Winter then the Trust was well placed to deal with any increase next year.

COG/03/19/10 Governors Feedback from Working Groups

- 10.1 The Governors engaged widely with the Trust taking an active role within a number of working groups covering such areas as encouraging nursing students, security issues, patient catering, and cost saving ideas.
- 10.2 Natalie Matthews reported that patient catering was currently on an interim services and building works had commenced. All was progressing well and good feedback had been received. Natalie thanked other teams including nursing, HR and Speech and Language Therapies for all the support they had provided to the project to bring identified improvements to the service.

COG/03/19/11 Committee Feedback – Quality and Risk

- 11.1 Joanna Crane gave a presentation on the role of the Quality and Risk Committee, explaining that the Committee supports the Trust Board in ensuring that the Trust's management and clinical and non-clinical processes and controls are effective in setting and monitoring standards and continuously improving the quality of services provided by the Trust.
- 11.2 Joanna went on to describe the key duties and linked agenda items of the Quality and Risk Committee, how it fulfilled its remit and the links between other Committees such as the Trust Board and the Audit Committee.
- 11.3 The Governors were also informed that the name of the Committee would be changing to Quality Assurance Committee which reflected the role of the Committee better.
- 11.4 Alan McCarthy thanked Joanna for all that she had done during her time as the Chair of the Quality and Risk Committee.
- 11.5 Replying to a question from Jane Ramage, Joanna explained that the Patient Experience report went to the Patient Experience and Feedback Committee with sources of assurance coming from cross Divisional input as well as the Audit Committee.
- 11.6 John Thompson expressed the Governors' interest in the Trust's Board Assurance Framework and asked if appropriate escalations were received or if it was felt anything was missed. Joanna replied saying that she was not aware of anything and that the Trust encouraged a culture of speaking up and was very assured when things were escalated and quickly brought to the attention of the Executive team.
- 11.7 George Findlay went on to add that summary reports were received from all Divisions, including Estates and Facilities and the Divisional Governance Quarterly Review meetings provided a really good insight to any worries or risks.

COG/03/19/12 Report from the Nomination and Remuneration Committee Meeting

- 12.1 Alan McCarthy presented the report that had previously been circulated.
- 12.2 The Nomination and Remuneration Committee had received the outcomes from the 2017/18 Non Executive Appraisal process and had been assured through the process applied and their observations and interactions with the Non Executives that the reported appraisal outcomes of "strong performer" for each NED were justified.
- 12.3 It was noted that the appraisal process would be brought forward to enable them to be undertaken during April and May to allow them to be reported by the end of the first quarter of the year and that the Lead Governor would continue to input into the setting of one of the objectives for the Chair and for each of the Non Executives.
- 12.4 The Council was updated on the intended actions to seek extensions to the terms of office for two of the Non Executives for Brighton and Sussex University Hospitals NHS Trust, Martin Sinclair and Kirstin Baker, who were Non Executive Advisors (non-voting) to Western Sussex Hospitals NHS Trust.
- 12.5 The Council was also informed of the intention to support the move of Joanna Crane, a Brighton and Sussex University Hospitals NHS Trust Non-Executive, to become a Non-Executive advisor and replace, with the movement of Lizzie Peers a Non-Executive Advisor, to become a voting Non Executive. These changes did not affect their role as voting Non-Executives for Western Sussex Hospitals NHS Foundation Trust.
- 12.6 **The Council of Governors NOTED the report.**

COG/03/19/13 Quality Account Update

- 13.1 George Findlay presented the Quality Priorities for 2019-20.
- 13.2 In 2015 the Trust had set out their Quality Strategy and identified quality goals that would help to focus improvement work. The goals were to reduce preventable mortality, avoid harm and improve patient experience. Each year the successes against the goals were reviewed and priority areas agreed to help achieve them.
- 13.3 Over the last few years mortality rates at the Trust had generally fallen year on year. The Trust's Hospital Standardised Mortality Ratio (HSMR) score for the twelve months to September 2018 was 91.2 (1805 deaths against expected 1980). Performance for the previous four 12-month periods to August 2018 had placed the Trust outside of the top 20% of NHS organisations for the first time since 2015; however, data to September 2018 returned the Trust to just within the top 20%.
- 13.4 George went on to report that the preventable mortality quality priorities for 2019-20 included a Sepsis target of 95% of patients receiving antibiotic therapy within one hour, in which the Trust was performing well. Also in respect of reducing harm then the Trust was focusing on work to enhance the frailty provision within the A&E departments and Emergency Floors and delivering Getting it Right First Time (GIRFT) identified improvements focusing priority on orthopaedics, urology and ophthalmology.
- 13.5 Using the Patient Safety Thermometer tool, the target was to achieve 99% harm free care in the key areas of falls, pressure ulcers, urinary tract

infections, deep vein thrombosis (DVT) and pulmonary embolism (PE). The percentage of patients who suffered no new harm during their inpatient stay at the Trust was currently 98.6%. This rate had remained fairly static throughout the year to December 2018. The Trust had seen a 40% reduction in falls over recent years.

13.6 With regard to Patient Experience the Trust's Friends and Family patient feedback consistently ranked higher than the national average but the aim was to build on past achievements and enter the top 20% of NHS Trusts for Friends and Family recommendation score. To enable this a 'True North' long term goal had been set to achieve 97%.

13.7 Les Willcox asked why Sepsis appeared to be diagnosed more quickly in A&E than on the wards. George Findlay explained that the Trust used an early warning system both in A&E and for inpatients, however there has been an awareness campaign within the Trust and a lot of ongoing education about the condition especially targeted at ED staff where unplanned patients attend with the greatest possibility of undiagnosed SEPSIS.

COG/03/19/14 Governor Strategy Group – Update

14.1 John Thompson provided an update from the Governor Strategy Group advising that the Governors had received a presentation from Oliver Phillips, Director of Strategy and Planning outlining the plans for the Trust going forward. A presentation had also been received on the Trust's Clinical Governance.

14.2 A request was noted asking for papers to be received in advance of meetings.

COG/03/19/15 Annual Governor Declarations of Interest

15.1 Glen Palethorpe presented the report on the Governor Declarations of Interest.

15.2 The table that formed part of the report presented reflected the information provided by each Trust Governor in their Declarations of Interest and would be made available publicly.

15.3 Governors were requested to declare any changes during the year not reflected in the register, or any information that had been misinterpreted, to the Group Company Secretary immediately and formally at the next meeting of the Council.

15.4 **The Council received and NOTED the information contained in the report.**

COG/03/19/16 Any Other Business

16.1 Glen Palethorpe reminded the Council of Governors that as with previous years the Trust had been allocated two places at the Governor Focus Annual Conference 2019 that was to be held on 9th May 2019 at the Congress Centre in London. Any Governors interested in attending should confirm to the Lead Governor.

16.2 There was no further business to discuss.

COG/03/19/17 Date of Next Meeting

17.1 It was confirmed that the next meeting of the Council of Governors would take place at **15.00 – 17.30 on Thursday 4th July 2019 in the Mickerson Hall, Chichester Medical Education Centre, CMEC, St Richard's Hospital,**

Spitalfield Lane, Chichester, PO19 6SE.

COG/03/19/18 Questions from Members of the Public

18.1 There being no questions received from the Public, the meeting was closed.

Jan Simmons
Corporate Governance Officer
March 2019

Signed as a correct record of the meeting

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Chair

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Date

DRAFT

MATTERS ARISING FROM PUBLIC MEETING OF THE COUNCIL OF GOVERNORS

MATTERS ARISING FROM THE MEETING HELD ON 7th MARCH 2019

Minute Ref	Description of Action	Responsible Person	Deadline	Report
COG 03/18/6.5	Lead Governors' Survey to be considered in detail at a future meeting of the CoG	JT	October 2019	Defer until new Co Sec fully up to speed and after the CQC inspection of WSHT.
COG/12/18/9.5	Patrick Boyle to schedule a meeting for the Christmas gift distribution.	PB	July 2019	Such matters to be addressed by the Charity Stakeholder Group meeting scheduled for 18 July 2019. Completed
COG/03/19/9.6	The results of the Staff Survey would be circulated to the Council of Governors.	JS	July 2019	Completed
COGP/03/19/5	CoG agreed that private meetings would only be called if matters could not be taken in public and not routinely.	AMc	July 2019	Completed



Western Sussex Hospitals
NHS Foundation Trust

LEAD GOVERNOR'S REPORT TO THE COUNCIL OF GOVERNORS

JULY 2019

Just under a year ago I made what I thought would be my last Lead Governor's Report to Council. I am back in the saddest of circumstances as Roger Hammond has stepped down for family reasons. Roger had very clear views about how he wanted to take forward the Lead Governor role. He quietly made progress on many fronts, some not seen by other Governors let alone Members. He has done much to make the Medicine 4 All events more diverse; taken great interest in HSMR and Medical Revalidation and to develop relations with GP surgeries which is an important part of programme to increase public engagement. Thank you Roger on behalf of the Governors

Looking back on my previous reports and to what is happening and is current in the Trust much remains the same. So many good things and so much good news. Why is this? I think there are several answers – but I am sure they are come back to culture. Openness and honesty and a realisation that we don't always get it right. Leadership and encouragement of all parts of the organisation to escalate concerns and feed in ideas – be heard and continually do better!

Mike Viggers MBE

Just before Dame Marianne Griffiths had been invested with her DBE, we had the wonderful news that Mike Viggers, our recently retired Chairman had been awarded an MBE. Besides being the Trust Chairman, Mike was Chair of the Council of Governors. As the Lead Governor for the last two years before Mike retired I had the pleasure of regular meetings – always open and honest, there was always much laughter. So well deserved.

Thank you to all the staff

STARS Awards are here again – 805 nominations, including nearly 100 from the public. It says a terrific amount about our wonderful staff. I have been an "occasional" volunteer on a ward at St Richards. It has been a great privilege to help in a small way – making tea, washing up, cleaning bedside tables and fetching and carrying. Seeing the staff working with patients is an amazing experience – their care, dedication and compassion. Not least as we came through winter with plans that really worked well – only to be hit by a spring "bugfest"!

End of Year Financial Out-turn

Congratulations to the Finance team and all the staff particularly in A&E who pulled out all the stops and delivered all our financial targets. A wonderful result that rewards the Trust with "one-off" money which gave us a £28m surplus, some of which can be spent on schemes to do what we do best - providing great care for our patients.

Preparation for Quality Care Commission (CQC)

As part of the preparation for the forthcoming CQC inspection nearly half the Governors took part in monthly Peer Reviews. Working in groups alongside hospital clinical staff and some guests from outside the Trust, we looked at various aspects of service – provision for patients with learning difficulties; maternity and theatre services and end of life care. For

Governors this has been a great way to really get to the heart of what the Trust is about and make a real contribution in the feedback sessions.

The NHS 10 Year Plan

The plan was rolled out in the spring with Coastal West Sussex Clinical Commissioning Group (CCG) holding a number of public events – the Chichester one was attended by about 35 people, quite few from the Trust – a governor, staff, carers and patients. The clear message is that everyone has to take greater responsibility for their well-being: diet, social habits (especially smoking) and lifestyles (not least exercise). The key message is stay well!

Sustainability and Transformation Programme

The 10 Year Plan will be delivered through Integrated Care Systems. Primary Care will be delivered through Primary Care Networks – effective groups of GP surgeries working together and providing a great range of services. Integrated Care Providers – including hospitals – will work more collaborative especially with local authorities. The CCGs will still be commissioners of services and paymasters.

Executive Management of BSUH

It hard to believe that it is nearly three years ago that Governors were asked to support Western Sussex Hospitals Trust taking over the executive management of Brighton and Sussex University Hospital Trust. That BSUH are out of financial measures and achieved a Good CQC rating is a tribute all involved. Besides the Executive Board, staff at from all levels and disciplines have had the experience of working with another Trust and have brought back many ideas and innovations. Negotiations continue around what will happen after 1st April 2020 when the current agreements come to an end.

Patient Engagement and Experience Committee

Governors received the Annual Patient Experience Report at the Public Board meeting. The progress made on the continuous journey of improving the patients' experience both as inpatients and outpatients. Many initiatives – reducing noise at night and the development of Always events – have contributed to a reduction in complaints: also the speed at which complaints are resolved has increased dramatically in recent years. On the clinical side feedback was almost entirely positive – some patients do not feel safe, but the noise at night project will address some of the issues around that. On the non-clinical crowded and hot/cold areas and parking remain the areas of complaint. One pleasing improvement is that as the hospitals get busier the numbers of complaints do not increase at anything like the same rate. The Committee also looks at the outcomes from the Patient Led Assessments of the Care Environment; the work done by the Customer Care and Freedom to Speak Up team. Great engagement by Healthwatch Sussex and Coastal West Sussex Clinical Commissioning Group would be welcome.

Membership Experience Committee

This will be reported to the Council of Governors separately.

Holding Non-Executive Directors to Account

Holding the NEDs to account is a key responsibility of Trust Governors. What we see at Public Board and even at Council of Governor meetings is not always the real impact of the

NEDs. Twice a year Governors met the NEDs on their own and their grasp of detail, willingness to challenge and to share with Governors is outstanding. Some Governors sit on working groups with NEDs whose contribution is always Trust focused and supportive to the group. We are most fortunate in our NEDs – their passions, skills and experience are invaluable.

Noise & Night Project

A Patient First Breakthrough Project – this is an important project in delivering improvements in patient experience. Patricia Peal represents the Governors on the working group. Patricia is ideally placed as a “Knowing Me” volunteer in both St Richards and Worthing hospitals

Patient Catering Project

This is an excellent project that is well on the way to improving the suitability and quality of the meals served to inpatients. The menu is based on cook chilled process providing greater flexibility. The dieticians have gone over the menu with a fine tooth. It is more varied and suitable for young people and our older patients who may want smaller portions as well as including snacks and packs for those who prefer to eat a little and often. The project has been delayed by the need to meet a number of Building Regulation requirements; replace more kitchen equipment than was previously planned and review the costs of fitting out the new kitchen at St Richards which will serve both hospitals. Full go live is now expected in October. Having been to a taster I think patients will be reluctant to go home.

Outpatient Improvements Project

Governors probably get more negative comments about outpatient appointments than anything else – even car parking. As part of another project I was invited to be on the steering group of this project. The group includes staff from both the Project Management Office – responsible for delivering the cost savings target set by NHS Improvement – and the Kaisen Team – who lead on delivering Patient First projects – and others. The two most interesting aspects are seeing how and why what might appear simple systems are quite complex and the other is the great determination of everyone to work together to effect real improvements as soon as possible. The aim of the project being for patients to have one booking and one attendance: reducing cancellations by both the hospitals and patients.

Organ Donation

At least once every year there is an update from the Organ Donation Team to a public Board meeting. I had a very good meeting with Angela Fisher the Chair of the Organ Donation Committee. I am very keen that Governors work and share public facing opportunities with all groups in the Trust who engage with patients and other visitors to our hospitals: not least to help us recruit more Trust Members!

Information Seminars

About a year ago the Trust invited the British Orthopaedic Association to look at the provision in St Richards and Worthing Hospitals. They made a number of recommendations. This seminar looked at progress since then. Several care pathways had been revised with excellent results and some procedures (eg. arthroscopy) have been found to not always as effective as was previously thought.

Cancer Care and the Macmillan Nurses – this seminar covered the care the Trust gives to cancer patients and the essential relationship with the Macmillan Nurses. The main points were about the services and target delivery times all of which the Trust meets, except the 62 day treatment target – this has been the subject of a Kaizen project and performance is improving.

As already mentioned – The CQC are coming – This seminar provided excellent background briefing around what the main approaches to the inspection would be; what the format of the inspection could be and how Governors might be involved especially in the Well-Led part of the inspection.

Clinically Led IT – Governors had a presentation on three new IT projects – The Patient Portal and Self Check-In which allow patients to access their appointments and other information through an app on either their tablet or laptop. Patients will be better informed and the Trust will be able to communicate more quickly with patients, especially around appointments. They will be able to book themselves into appointments – similar to the way in many of us do when we go to the GP. The third Project is Affinity which will pull together all the information relating to a patient so that clinicians will have all the latest information about a patient in one place. This is a formidable project as it relies not only on accurate and up-to-date IT based patient records, but completing the transfer of patient records to the Evolve system – currently 65% complete with over million records transferred. Amazing!

Staff Conference

The subject of this year's conference was Inclusion and Diversity. In recent years there has been an increase in racist and homophobic behaviour in our hospitals this was reflected in the 2018 Staff Survey – much of it is patient and visitor based but some is from staff. The conference through a series of "Inclusion Cafes" provided really powerful opportunities for participants to reflect on how we all might be more aware and supportive of colleagues. And less tolerant of unacceptable behaviour – as Dame Marianne pointed out in her opening remarks – "what we permit, we promote"

Lead Governors' Forums

I met with the Chair of the National Lead Governors Association, who happens to be the Lead Governor of the Sussex Partnership Trust in June. On the National front there are some issues around Governor/Trust relationships in some other Trusts – otherwise little else to report.

The Sussex Foundation Trust Lead Governors have set up another network day in July devoted to learning more about governance works each of the four Trusts and how Governors can contribute to the CQC inspection process. We are keen that we should promote each other's Trust especially through increased membership.

John Thompson
June 2019

MEMBERSHIP ENGAGEMENT REPORT

JULY 2019

Since the last report in March there has been good progress on several fronts. The most important is that we have narrowed our recruitment focus so that we can make a bigger more productive impact!

“Having your say” in our hospitals and how they develop in the rapidly changing world which is the NHS is a key message in engaging with prospective and existing Members.

I believe the effective delivery of the Membership Strategy is best achieved through partnerships. To that end the Action Plan that underpins the Strategy has elements that are dependent on building relationships: we are already working on:

- Making greater use of the Trust’s well developed social media.
- GPs Surgeries – recruiting new members and publicising events – most surgeries have been contacted with slightly mixed results – we had excellent support from Coastal West Sussex Clinical Commissioning Group taking this forward – the next step is after the Governor election to reinforce the relationship.
- We ran the logo and poster competition in one local school – the daughters of some of our staff entered – and had 68 amazing entries – we hope to display these at the AGM later this month.
- Linking up with outward facing parts of the Trust – Love Your Hospital (LYH), Organ Donation and Volunteers – already LYH have agreed to some shared merchandise and to give us space in their notice boards.

The revised Recruitment Action Plan is also attached: it shows progress on many fronts since the last Council of Governors meeting.

As part of my Chairmanship of the Membership Engagement Committee I have tried to encourage Governors to take a more active lead in delivering the strategy and they have really risen to the challenge. We are also very dependent on the Trust’s Communications Team – particularly Jonathan Keeble and Sue Hughes - both of whom are very supportive. However, they have heavy workloads

To keep things moving I would like the Committee to do more for ourselves, especially by way of helping deliver activities.

My final request – we are all often in a position where we are talking to people about our wonderful Trust and what we do – Executive, NED, staff and Governors – a great opportunity to tell people about Membership of the Trust – and even sign them up!! I have to say in that respect I am absolutely shameless as I know some others are.

John Thompson
Chair – Membership Engagement Committee
June 2019

Membership Strategy – Delivery Progress Report at 20 June 2019
(Priority 1 – Top Targets. 2 – One offs and as & when. 3. Later/lower priority)

Theme and Objective	Priority	Progress	Action	Who	By	Internal Links
RECRUITING						
In-hospital recruitment in high interest areas Identify OPD clinics attended predominantly by <60 yrs	1	Agreed with Fiona Keeling – we have clinic times for each hospital. We just need to let her know when we are coming	Produce a script/guidance for Governors doing these sessions One in each Hospital / one each with JT Order leaflet holders – deferred pending CQC Governors to be invited to do session	SH/JK Done SH Done	5/19 10/19	
Increase membership, especially in Worthing and Horsham Create ‘Roving Ready to Recruit’ packs and store in Communications/Co Sec Seek opportunities/events/locations	3 3	Roving Packs now in Reception at each Hospital Connections	Banners - See above Agree handouts with LYH Take opportunities as	Done Done ALL		LYH, ODC, Vols

Theme and Objective	Priority	Progress	Action	Who	By	Internal Links
where we might recruit directly or through a membership form drop		made with LYH, Volunteers and Organ Donation	they arise Also, see below Advise them of our activities and take any opportunities that they can offer	SH/JT	going On-going	
Develop relationship with main GP surgeries Make contact with CCG and then contact Practice Managers	1	Very good engagement by Governors with GP Surgeries established.	Guidance script to take relationship to the next level and link into Developing links with PPGs Update Governor Poster after this round of elections	SH/JK SH	7/19 7/19	
Develop links with PPG leads Task Governors to make links with PPGs in their constituency	1		See above			
Trust-led events: Trust Board, Council of Governors Public events (M4A, etc), Trust AGM Ensure we have adequate stocks of up to date	2	2019 AGM Planned for 25/7 6.00pm start	Attend with Roving Packs* Banners and freebies	All	7/19	

Theme and Objective	Priority	Progress	Action	Who	By	Internal Links
membership forms etc Regular reminders on Trust Social Media	1	Offered by JK at Working Party meeting	*Add latest @western newsletter JK to organise with in Comms Team	JK	5/19	
Passive actions: Notice Boards in key areas of each Hospital Make Membership forms more widely available Publicise membership on reverse of Ward Business Cards	2 3	LYH have agreed to share their 20+ notice boards with us - 3 or 2 A4 spaces in each Maggie Davies has agreed. Pilot on Ashling ward shows that leaving leaflets does not really work Format agreed	Complete heading Draft information notice – Almost done! A natural follow-on OPD recruitment on selected wards (eg. Day Surgery and Surgical) Liaise with Print rooms	SH JT ALL SH	6/19 As & when As cards become due for re-print	LYH
Develop sharing info relationships with: <ul style="list-style-type: none"> • LYH • Volunteers • Organ Donation • Research Department 	2	Contacts established and sharing agreed	Obtain and share details of events	SH/JT		LYH Volunteers Organ Donation Research Department

Theme and Objective	Priority	Progress	Action	Who	By	Internal Links
Focus in minority groups (faith, cultural) Re-approach Chaplain re links with faith groups and Link with Filipino community	2	RB has started on the round of Deanery visits	Supply with leaflets	SH/JT	5/19	
	2	Gerthy Albano has agreed to promote in the Filipino community	JT invited to Filipino Annual Picnic	JT	7/19	
Re-design membership forms	2	Lyn & JT have met. Lyn doing first roughs. Meeting again shortly	JT/SH/LF to redesign membership form.	JT/LF/SH then ALL	9/19	
			OR reprint existing leaflet	SH	6/19	
		School Competition results in	Decide how to use results (we be displayed at AGM)	JK	7/19	
Build on links with FE colleges & Chi Uni Re-establish links with Chi and N'brook Colls	3	Focus on FE Colleges and Chi Uni agreed	Make contact with a view to presentation in Autumn term	JT	7/19	
			Chi Uni – excellent contact made	SH	6/19	

Theme and Objective	Priority	Progress	Action	Who	By	Internal Links
Develop relationship with 6th forms & Worthing 6th Form college Offer for Governors to attend assemblies / careers days	3	Preparations made	Set up with 2 or 3 Schools, then others take one each	JT/PR	7/19	

Agenda Item:	12	Meeting:	Council of Governors	Meeting Date:	4 July 2019
Report Title:	Report from the Nomination and Remuneration Committee meeting				
Sponsoring Executive Director:	Glen Palethorpe – Company Secretary				
Author(s):	Glen Palethorpe – Company Secretary				
Report previously considered by and date:					
Purpose of the report:					
Information	<input checked="" type="checkbox"/>	Assurance	<input checked="" type="checkbox"/>		
Review and Discussion	<input type="checkbox"/>	Approval / Agreement	<input type="checkbox"/>		
Reason for submission to Trust Board in Private only (where relevant):					
Commercial confidentiality	<input type="checkbox"/>	Staff confidentiality	<input checked="" type="checkbox"/>		
Patient confidentiality	<input type="checkbox"/>	Other exceptional circumstances	<input type="checkbox"/>		
Link to Trust Strategic Themes:					
Patient Care	<input type="checkbox"/>	Sustainability	<input type="checkbox"/>		
Our People	<input checked="" type="checkbox"/>	Quality	<input type="checkbox"/>		
Systems and Partnerships	<input type="checkbox"/>				
Any implications for:					
Quality					
Financial					
Workforce					
Link to CQC Domains:					
Safe	<input type="checkbox"/>	Effective	<input type="checkbox"/>		
Caring	<input type="checkbox"/>	Responsive	<input type="checkbox"/>		
Well-led	<input checked="" type="checkbox"/>	Use of Resources	<input type="checkbox"/>		
Communication and Consultation:					
Executive Summary:					
<p>The Nomination and Remuneration Committee met on the 17 June 2019.</p> <p><u>Chair and Non Executive Director Appraisals</u></p> <p>In respect of the Chair the Committee received a report from the Trust’s Senior Independent Director (SID) who undertook the appraisal of the Chair. The Committee received information on the Chair’s 360 degree feedback and the Chair’s own self-reflection. The Committee received confirmation that the appraisal had confirmed the Chair remained a fit and proper person in accordance with the CQC regulations. The Committee agreed there was nothing that they needed to refer to the Council in respect of the Chair’s performance.</p> <p>The SID informed the Committee of the objectives set for the Chair including a proposed objective set by the lead governor on behalf of the governors. The Committee agreed the lead governor set objective for the Chair, that being “<i>Strengthen relationships with Governors to ensure diversity of feedback and insight from the CoG alongside greater understanding of their work</i>”.</p> <p>In respect to the Non Executives Directors the Committee received a report from the Chair who had undertaken each of the NEDs appraisals. The Chair presented information from each of the NEDs 360 degree feedback process and their self-reflections in respect of their performance. The Committee received confirmation that the appraisals had confirmed each NED remained a fit and proper person in accordance with the CQC regulations The Committee agreed there was nothing that they needed to refer to the Council in respect of any of the NEDs performance</p> <p>The Committee was informed of the suite of objectives set for each NED with a request that there be</p>					

a governor set objective added to those set by the Chair. The Committee on behalf of the Governors set an Objective for each NED this being *“Provide feedback to Council of Governors through both the half yearly governor and ned meetings and through presentations on their role as Committee Chairs to the Council meetings during the year.”*

Terms of Office

The Committee received information in respect of the terms of office for the NEDs and recognised that the Chair of the Audit Committee will be retiring in the Autumn and that a formal recruitment process will be followed to secure a replacement NED. For two other NEDs their current term of office ends in March 2020 and May 2020 respectively but both have the ability to serve a further term. The Committee asked the Chair to pursue with the NEDs their retention as stability within the Board and NEDs was seen as important during the period of the recruitment and settling in of a new Audit Committee Chair. The Chair agreed to provide feedback on these discussions to Committee later in the year.

Governor feedback

The Committee also received feedback from the Senior Independent Director on the outcome of governor exit interviews. Whilst the number of Governors taking part in the process was small this time the interviews again confirmed that these retiring governors felt engaged with and that there were opportunities to provide feedback which was always listened to and acted on. The retiring governors recognised that demands on their time had to be carefully managed as there were numerous opportunities for Governors to be involved with meetings at the Trust.

Key Recommendation(s):

The Council **NOTE** that the appraisals did not identify any matters that need referring to the Council for consideration in respect of the Chair or the NEDs failing to remain fit and proper persons.

The Council **ENDORSE** the governor set objectives for the Chair and each NED.

The Council **NOTE** that governors will be invited to take part in the recruitment process for the replacement of the Chair of the Audit Committee.

Agenda Item:	14	Meeting:	Council of Governors	Meeting Date:	4 July 2019
Report Title:	2019/20 Council Work Programme				
Report Presenter:	Alan McCarthy Chair / John Thompson Interim Lead Governor				
Author(s):	Glen Palethorpe – Group Company Secretary				
Report previously considered by and date:					
Purpose of the report:					
Information	<input type="checkbox"/>	Assurance	<input type="checkbox"/>		
Review and Discussion	<input type="checkbox"/>	Approval / Agreement	<input checked="" type="checkbox"/>		
Reason for submission to Trust Board in Private only (where relevant):					
Commercial confidentiality	<input type="checkbox"/>	Staff confidentiality	<input type="checkbox"/>		
Patient confidentiality	<input type="checkbox"/>	Other exceptional circumstances	<input type="checkbox"/>		
Link to Trust Strategic Themes:					
Patient Care	<input checked="" type="checkbox"/>	Sustainability	<input checked="" type="checkbox"/>		
Our People	<input checked="" type="checkbox"/>	Quality	<input checked="" type="checkbox"/>		
Systems and Partnerships	<input checked="" type="checkbox"/>				
Any implications for:					
Quality					
Financial					
Workforce					
Link to CQC Domains:					
Safe	<input type="checkbox"/>	Effective	<input type="checkbox"/>		
Caring	<input type="checkbox"/>	Responsive	<input type="checkbox"/>		
Well-led	<input checked="" type="checkbox"/>	Use of Resources	<input type="checkbox"/>		
Communication and Consultation:					
Executive Summary:					
Attached is a work programme for the Council for 2019/20. A draft of this programme was discussed at a meeting between the Chair and Lead Governor in April 2019.					
Key Recommendation(s):					
The Council of Governors is asked to approve the draft work programme for the Council and to agree to receive periodic updates on progress during the year.					

WESTERN SUSSEX NHS HOSPITALS FOUNDATION TRUST COUNCIL OF GOVERNORS ANNUAL PROGRAMME

OBJECTIVES FOR GOVERNORS ANNUAL PROGRAMME

1. To approve and then implement the Council of Governors Annual Programme for 2019-2020;

Delivery - The programme will be approved at the CoG meeting in July 2019, after consideration at pre-CoG in June 2019. Update will be provided by the lead governor to the CoG meetings in October 2019 and January 2020

2. To implement the membership strategy as developed by the Membership Committee, with a view to improving the levels of membership particularly from under represented and hard to reach groups and to seek improved engagement with members;

Delivery – Progress on the delivery of the Membership Strategy will be provided by the Chair of the Membership Committee at each CoG meeting (July, October and January). Membership numbers across the various member groups are reported to the Membership Committee to achieve our stated objective to increase our membership by 1% (equating to about 120 new members a year which covers natural reduction in membership each year).

3. To engage with the FT Board to feed in the views of the membership and wider public into the FT's formulation of its strategic priorities;

Delivery– Two joint workshops have been established in June 2019 and December 2019 whereby the views of the Governors will shape the FTs strategy. .

4. To receive and consider the FT Board's plan for the management contract with Brighton and Sussex University Hospitals NHS Trust to ensure that a sound process has been applied in determining the plan post 31/3/2020;

Delivery – The Governors will be engaged in the review of and agree the Board recommendation

5. To continue to “hold to account” the Non Executives in their delivery of their roles as Non Executives of the Trust in respect of the performance of the FT;

Delivery – The Governors will be continue to hold meetings with the Chair and Non Executives across 2019/20 (May, September and January). The Governors will provide feedback on the NEDs performance through the lead governor / deputy lead governor for their respective appraisals during May 2019.

6. To receive the outcome of the annual performance appraisals for the Chair and NEDs and consider the appropriate remuneration levels of the WSHFT Chair and the Non Executive Directors and consider as appropriate any terms of office extension;

Delivery – The Governors through the Nomination and Remuneration Committee will receive a report from the Chair in respect of the NEDs and the SID in respect of the Chair on the 2018/19 annual appraisals, any changes to levels of remuneration and any extensions to the periods of NED office. The CoG in July will consider and approve any recommendations from the Nomination and Remuneration Committee.

7. To appoint new NEDs where their terms of office expire;

Delivery – The Governors will take an active role in the recruitment of new NEDs who's terms of office expire and cannot be extended as they have served the maximum time allowed.

8. To participate in activities within the FT that offer the opportunity to contribute to improvements in patient experience

Delivery – The Governors will continue to take a full and active part in service development working groups (and peer reviews of Trust Services).

Mapping of 2019/20 Governor activities to the core expectations of the Council

Month	LISTENING & REPRESENTING	HOLDING TO ACCOUNT	GOVERNANCE
April	<ul style="list-style-type: none"> • Membership Committee meeting (29th April) • Information Seminar (4th April) • Patient Experience and Engagement Committee (5th April) • Peer reviews 		
May	<ul style="list-style-type: none"> • Meeting of Staff Governors with Chair (16th May) • Attendance at Board (30th May) • Peers reviews 	<ul style="list-style-type: none"> • Meeting with Chair and CEO (2nd May) • Attendance at Board (30th May) 	
June	<ul style="list-style-type: none"> • Joint Board and Council workshop (27th June) • Patient Experience and Engagement Committee (17th June) • Peer reviews 	<ul style="list-style-type: none"> • Nomination and Remuneration Committee (17th June) 	<ul style="list-style-type: none"> • Pre CoG meeting (6th June) • Joint Board and Council workshop (27th June) • Nomination and Remuneration Committee (17th June)
July	<ul style="list-style-type: none"> • CoG meeting (4th July) • Membership Committee meeting (16th July) • Information Seminar (4th July) • Attendance at Board (27th July) • Peer reviews 	<ul style="list-style-type: none"> • CoG meeting (4th July) • Attendance at Board (27th July) 	<ul style="list-style-type: none"> • CoG meeting (4th July)

Month	LISTENING & REPRESENTING	HOLDING TO ACCOUNT	GOVERNANCE
Aug	<ul style="list-style-type: none"> • Meeting of Staff Governors with Chair (15th Aug) • Peers reviews 		
Sept	<ul style="list-style-type: none"> • Patient Experience and Engagement Committee (10th Sept) • Attendance at Board (28th Sept) • Peer reviews 	<ul style="list-style-type: none"> • Meeting with NEDs (19th Sept) • Meeting with Chair and CEO (19th Sept) • Attendance at Board (28th Sept) 	<ul style="list-style-type: none"> • Pre CoG meeting (2nd Sept)
Oct	<ul style="list-style-type: none"> • CoG meeting (3rd Oct) • Membership Committee meeting (17th Oct) • Information Seminar (3th Oct) • Peer reviews 		<ul style="list-style-type: none"> • CoG meeting (3rd Oct)
Nov	<ul style="list-style-type: none"> • Meeting of Staff Governors with Chair (14th Nov) • Attendance at Board (28th Nov) • Peer reviews 	<ul style="list-style-type: none"> • Meeting with Chair and CEO (14th Nov) • Attendance at Board (28th Nov) 	
Dec	<ul style="list-style-type: none"> • Joint Board and Council workshop (19th Dec) • Patient Experience and Engagement Committee (16th Dec) • Peer reviews 		<ul style="list-style-type: none"> • Pre CoG meeting (17th Dec) • Joint Board and Council workshop (19th Dec)
Jan	<ul style="list-style-type: none"> • Membership Committee meeting (13th Jan) • Information Seminar (13th Jan) • Attendance at Board (30th Jan) • Peer reviews 	<ul style="list-style-type: none"> • CoG meeting (10th Jan) • Attendance at Board (30th Jan) 	<ul style="list-style-type: none"> • CoG meeting (16th Jan)

Month	LISTENING & REPRESENTING	HOLDING TO ACCOUNT	GOVERNANCE
Feb	<ul style="list-style-type: none"> • Meeting of Staff Governors with Chair (13th Feb) • Peer reviews 	<ul style="list-style-type: none"> • Meeting with Chair and CEO (20th Feb) 	
Mar	<ul style="list-style-type: none"> • Attendance at Board (28th Mar) • Patient Experience and Engagement Committee (30th Mar) • Peer reviews 	<ul style="list-style-type: none"> • Attendance at Board (28th Mar) 	<ul style="list-style-type: none"> • Pre CoG meeting (4th Mar)

Please note the above does not include governor attendance at service improvement working groups, PLACE assessment or medicine for members meetings which all form part of listening and representing.

Agenda Item:	15	Meeting:	Council of Governors	Meeting Date:	4 July 2019
Report Title:	Governor Elections				
Report Presenter:	Alan McCarthy Chair				
Author(s):	Glen Palethorpe – Group Company Secretary				
Report previously considered by and date:					
Purpose of the report:					
Information	<input type="checkbox"/>	Assurance	<input type="checkbox"/>		
Review and Discussion	<input type="checkbox"/>	Approval / Agreement	<input checked="" type="checkbox"/>		
Reason for submission to Trust Board in Private only (where relevant):					
Commercial confidentiality	<input type="checkbox"/>	Staff confidentiality	<input type="checkbox"/>		
Patient confidentiality	<input type="checkbox"/>	Other exceptional circumstances	<input type="checkbox"/>		
Link to Trust Strategic Themes:					
Patient Care	<input checked="" type="checkbox"/>	Sustainability	<input checked="" type="checkbox"/>		
Our People	<input checked="" type="checkbox"/>	Quality	<input checked="" type="checkbox"/>		
Systems and Partnerships	<input checked="" type="checkbox"/>				
Any implications for:					
Quality					
Financial					
Workforce					
Link to CQC Domains:					
Safe	<input type="checkbox"/>	Effective	<input type="checkbox"/>		
Caring	<input type="checkbox"/>	Responsive	<input type="checkbox"/>		
Well-led	<input checked="" type="checkbox"/>	Use of Resources	<input type="checkbox"/>		
Communication and Consultation:					
Executive Summary:					
<p>The Trust ran an election programme across May (seeking nominations) and June (voting taking place for contested positions).</p> <p>The elections were for 7 publically elected positions, 1 elected patient / carer position and 2 staff elected positions.</p> <p>The outcome of the election process is</p>					
Position	Outcome		Comments		
Adur – 2 vacancies	John Todd		John returns as governor having had a short period where he was not an elected governor. Only one candidate stood and therefore there remains one vacant position		
Arun – 3 vacanices	Lyn Camps		This is Lyn's first term having been an associate ned previously		
	Andrew Ratcliffe		This is Andrew's first term		

	Anita Ratcliffe was re-elected	having been an associate ned previously This is Anita's second term which would be her final term under the current constitution
Horsham – 1 vacancy	Penny Richardson was re-elected	This is Penny's second term which would be her final term under the current constitution
Worthing – 1 Vacancy	Pauline Constable	This is Pauline's first term
Patient / carer	No one stood for election	The Council is asked to approve the co-opting of Stuart Fleming to fill the vacancy, this person previously was elected to this position. (This would be a none voting position)
Staff – Estates and Facilities	Warwick George	This is Warwick's first term
Medical and Dental	No one stood for election	The Council is asked to support the Trust in seeking a co-opted member of staff who could be recommended to the next Council meeting for approval. (This would be a none voting position).

The next round of elections is scheduled for June 2020 at which time 2 positions will become vacant through the end of those governors terms of office. This would offer an opportunity to seek to fill the vacant position in Adur and to replace the two co-opted governors (Patient / Carer and Medical and Dental positions).

Lead Governor Arrangements

As a result of the retirement of Roger Hammond the lead governor position became vacant. The deputy lead governor John Thompson therefore has filled this role. With John taking on this role this leaves the Council with no formal deputy lead governor. The Deputy Lead Governor role was previously held by Jill Long who remains a serving governor. The Council is to hold elections for the lead and deputy lead governor positions in October 2019.

Appointed governors

The Trust has been informed of the following changes to a number of appointed governors these being

- Chichester District Council their appointed governor is now Donna Johnson
- Arun District Council have appointed Gill Yeates to their vacant appointed governor position

- Western Sussex County Council, due to change in member portfolios their position is now vacant. The Trust has asked that they make an appointment to this vacant position as soon as is possible.

Key Recommendation(s):

The Council of Governors is asked to note the outcome of the elections and welcome the newly elected / returning governors to the Council.

The Council of Governors is asked to approve the co-opting of Stuart Fleming to the Patient / carer vacancy until the next round of scheduled elections

The Council of Governors is asked to approve the Trust seek a co-opted member of staff for the Medical and Dental vacancy to recommend this person to the next Council meeting on October.

The Council of Governors ratify the John Thompson as lead governor until October.

The Council of Governors approve that the vacant deputy lead governor role be filled on an interim bases by Jill Long who previous held this positon.