

**Minutes of the Council of Governors Public Meeting
held on 9 December 2020, 14:30 – 16:30 hrs**

via MS TEAMS LIVE

Members:	Mr Junaid Bhatti	Public Governor
	Mr Kevin Burdett	Lead Governor
	Mr John Ellington	Deputy Lead Governor
	Mr David Evans	Public Governor
	Mr Zbys Fedorowicz	Public Governor
	Mr Rob Gardiner	Public Governor
	Mr Richard Greensmith	Public Governor
	Dr Nik Johnson	Staff Governor
	Mr Kenneth Leafe	Public Governor
	Mr Asif Mahmoud	Public Governor
	Mr Bob Mason	Public Governor
	Mr Joe Wey	Public Governor
	Mrs Sue Prior	Public Governor
	Mrs Roberta Roulstone	Public Governor
	Mr Wayne Fitzgerald	Partner Governor
	Mrs Amanda Buckenham	Public Governor
	Mrs Rebecca Neno	Partner Governor
	Mr Bernard Weiss	Public Governor
	Mrs Rebecca Wade	Public Governor
In Attendance:	Mr Rob Hughes	Chairman
	Mr Ray Harding	Non-Executive Director
	Mrs Sara Dunnett	Non-Executive Director
	Mr Mike Ellwood	Non-Executive Director
	Mrs Bev Shears	Non-Executive Director
	Ms Mary Dowglass	Non-Executive Director
	Mr Mark Sanderson	Non-Executive Director
	Mr Gareth Tipton	Non-Executive Director
	Mr Taff Gidi	Company Secretary
	Mr Paul Denton	Deputy Company Secretary
	Miss Janice Thompson	EA to Company Secretary - Notetaker
	Ms Eleanor Anderson	Communications
	Apologies:	Mr Steve Reiss

1.0 **Welcome, Apologies for absence and any Declarations of Interest**

The Chairman opened the LIVE MS Teams meeting at 14:30 hours.

Apologies were received from Mr Steve Reiss.

No Declarations of Interest were declared.

2.0 **Minutes from the last Public Meeting held on 8 September 2020**

The Minutes from the last Public Meeting held on 8 September 2020 were approved.

Action: Miss Thompson to ensure these are uploaded to the Trust website.

3.0 **Action Tracker**

The Action Tracker was updated.

4.0 **Chairman Update**

Mr Hughes noted the main message in his report was consistent with what the Board had stressed was an incredibly challenging time for staff, with both Covid and non-Covid patients. He added the administration of the flu vaccination was in progress with vaccines now being received for Covid-19. Mr Hughes emphasised that the Board were very keen to support staff.

Mr Hughes explained the changes in structure and committees, with changes to meetings throughout 2021 to accommodate the Board meeting dates.

The departure of Mrs Dunnett due to the maximum term being reached was tinged with sadness Mr Hughes said, however as a Non-Executive Director at the Trust Mrs Dunnett had achieved an enormous amount and earned great respect.

Mr Hughes gave thanks to Mrs Dunnett.

Mr Burdett echoed this and thanked Mrs Dunnett for the huge amount she had done for the Trust and advised she would be sorely missed. He acknowledged the admiration from the Governors who had witnessed the work carried out by Mrs Dunnett, and wished her every success for the future.

Mrs Dunnett thanked everyone and declared it had been an absolute privilege to work at the Trust and being part of such a wonderful Board which had remained patient-focussed throughout her term. She added that she had been in awe of the staff, especially during the recent challenging times.

5.0 **CEO Update**

Mrs Walker explained the proposed redevelopment at Stamford Hospital with the completion of the land sale involving working with the CCG to achieve the future medical model for that site.

The flu jab was currently being administered Mrs Walker confirmed however the Trust was not yet at 75% but was slowly progressing upwards. She confirmed there was no interaction between the flu and Covid-19 vaccines, which were deemed to be safe to receive together. She added the ideal would be for staff to have both the flu jab and the Covid-19 vaccine however stressed that this was not mandatory.

Mrs Roulstone asked if the vaccine was only licenced to the over 80's age group or if a patient who was receiving chemo would be deemed to be in the most vulnerable category.

Mr Hughes advised this was a live debate which needed to be looked at patient by patient.

Mr Mason asked Mrs Walker if vaccinations were being suspended from 19th to 27th December. Mrs Walker replied this was not her belief and the Trust was gearing up to take the responsibility for the vulnerable category. She added that once licencing and accreditations had been agreed for the vaccine to travel the roll out would expand and carry on throughout the Christmas period.

Mr Hughes agreed to report back on whether this was planned, however noted the large amount of vaccinations to administer and thought this was unlikely.

Mrs Prior noted the update on Lincolnshire CCG was not on the Action Tracker.

Mrs Walker reported on her meeting the previous week with the Accountable Officer. She confirmed the meetings were once again taking place. Mrs Prior thanked Mrs Walker for the update. Mrs Prior reiterated that she was looking for assurance that the performance issues would continue to be reviewed during the pandemic, and that an ongoing dialogue would continue between the Trust and Lincs CCG.

Mrs Walker confirmed this would be the case and noted the outcome of the visits were regularly shared via performance and quality reports.

Mr Gardiner acknowledged the two staff deaths from Covid-19 and offered sympathy. He asked Mrs Walker about the advice and guidance over which groups are being prioritised for the vaccine, especially if Care Home staff are being invited to the Trust to have the vaccine. Mrs Walker confirmed this was the case, with the previous day having seen the administering of vaccinations to those over 80 years of age and clinically vulnerable staff with Care Home staff being given vaccinations during Saturday and Sunday. She explained that once the vaccine had defrosted it needed to be used within five days.

Mr Gardiner asked if there was precise guidance on NHS staff receiving the vaccine. Mrs Walker advised this was being done in a hierarchy of clinically assessed staff and those in high risk areas.

Mr Hughes offered his condolences from the Council of Governors to the families of those who had passed away.

Mr Hughes thanked Mrs Walker.

6.0 Assurance

QAC

Dr Sanderson introduced himself to the Council of Governors and thanked both Mrs Dunnett and Mrs Bennis.

He advised there was nothing to escalate to the Board this month but noted he would like to highlight key issues, with the report of a higher than average mortality trend in the Trust. He advised he was waiting for confirmation that this could be a data issue and that this had now fallen.

Dr Sanderson noted the excellent appointment of Mrs Snowden as a Director of Midwifery.

The Quality Assurance Committee had a continuity of care plan which was focussing on having midwives who are able to support a mother through the whole journey, Dr Sanders explained, requiring a complete reorganisation of teams within the Trust and of the organisations that work with mothers at home. He emphasised the intense planning that would go into achieving this service but noted the benefits in improving continuity for mothers to be.

Dr Sanderson reported on the clinical audit carried out on infection prevention and control through the Trust with 100% compliance achieved. He noted the use of fans on wards being restricted and the basic hygiene which had been tightened up.

Dr Sanderson highlighted the rise in the numbers of falls and pressure ulcers in the Trust. He thanked the ED department for the hard work done to increase sepsis screening and treatment to above 90% compliance.

The Friends and Family test results were now available, Dr Sanderson confirmed, with the positive news of the very high numbers of women seen in triage included in the audit.

Mrs Prior advised she was the Governor who had observed the Quality Assurance Committee and she found the format very good in highlighting the risks for the Non-Executive Directors and the Governors. She added she was keen to see how the new Terms of Reference impact the Committee and with reporting to Board.

Finance

Mr Harding went through the latest Finance Committee report to the Board.

Mr Harding noted the second Covid-19 wave had not suspended the rules but had allowed the Trust to act quickly. He advised the key issues discussed at the meeting were around financial performance and noted the Trust was still awaiting capital funds and the fact that Cost Improvement Plans (CIPs) were in place for the remainder of the year. He noted national cost collection had been reported on and explained this is where costs are compared with other hospitals to form future CIPs.

Agency costs were down for the second month, Mr Harding reported. In terms of outstanding practice and innovation Mr Harding had reported to the Board that the A&E project had been completed on time. He noted the PFI issue had finally been resolved in the Trust's favour though sadly had not been retrospective.

Mr Hughes noted the good news from the Finance Committee reported by Mr Harding.

Mr Lawson had been the committee observer and was asked for his feedback. He advised he found it very good meeting and was assured that controls are in place financially, and finally that Mr Harding had given a very fair briefing of the Finance Committee meeting.

Mr Hughes concluded with the news of the appointment of a new Chief of Finance, Mr Joel Harrison who had been appointed after a very rigorous interview process.

People & Performance

Mr Tipton reported on the People & Performance Committee meeting that was held on 27 November 2020. He advised Mrs Roberta Roulstone had been the Governor Observer.

Mr Tipton highlighted the specific actions in the report which align to the Trust's plan regarding the people plan, which had unfortunately been delayed due to capacity issues and competing priorities. He noted this would be taken to the next Council of Governors meeting.

Mr Tipton advised the My Performance Appraisals (MPA's) were being escalated as the 95% target had not been achieved and was currently standing around 81%, with improvements not being seen as quickly as desired. He noted a deep dive due to be carried out in December on improving the numbers.

The Staff Covid-19 risk assessments had declined slightly, Mr Tipton reported. He stressed the need to focus on not only completing these but also improving the quality. He confirmed the risk assessments would be added to the Divisional Accountability Framework with the Communications Team also looking at how progress can be made in this area to improve the targets.

Mr Tipton discussed the impact of Covid-19 in wave 2 on multiple services and on some routine operations. He confirmed this would remain a key focus area of the committee.

The relocation of the Urgent Treatment Centre had been ongoing, Mr Tipton confirmed, with Public consultation. He noted this was unlikely to take place before April 2021. Mr Tipton reported on sickness at 4.38% which was slightly higher than average. He noted 50% of this was Covid-19 related including Carer's Leave, fatigue and anxiety. He noted the importance of the Committee's resolve to look at supporting staff through this.

Bank staff and agency fill rates were a challenge, Mr Tipton confirmed.

The good news, Mr Tipton established, was the administering of vaccination which was rising in numbers. He noted the new cultural risk which had been documented and was being investigated by the Committee.

Mr Tipton spoke of the positive inclusion of different Governors observing the Committee meeting, who are able to offer new views with their experience.

Mrs Buckenham reported on her time spent at a different Trust during the last week and the comparisons of her experience, highlighting that North West Anglia NHS Foundation Trust greatly support both staff and patients which had been amazing, especially for children. She gave special credit to those at Holly Ward.

Dr Johnson thanked Mrs Buckenham for this feedback.

Mr Ellington left the meeting.

Audit Committee Update

Mr Tipton updated on the Audit Committee in place of Mr Ellwood.

Mr Tipton noted the main point of the risk appetite statement with a considerable amount of work being carried out on risk framework and methodology. He noted the importance to the Trust that this was documented. He advised this had been an exceptional piece of work which had been to the full Board for review and ratification.

The committee had also reviewed Gifts & Hospitality to ensure people are operating within the policies with appropriate tracking, Mr Tipton advised. He also noted the deep dive being carried out on policies and procedures, with out-of-date non-clinical policies being updated in December.

Mrs Prior asked about risks with patient liaison and requested Mr Tipton expand on this as in the past this had been much improved. Mr Tipton advised there were no major issues that had surprised the Committee. Mrs Dunnett confirmed assurance had been received in this area, with the auditors changing their opinions on the reports. She added the areas of weakness would be going before the Quality Assurance Committee for more detailed consideration and added to the action plan.

Mrs Prior requested an update on this at a later date, Mr Hughes confirmed this would be provided.

Mr Mahmood, the Governor Observer, noted that the Committee meeting had been well run and efficient with interesting and enlightening content.

Mr Hughes confirmed that Charitable Funds would be on the next Agenda.

7.0 Lead Governor Update

Mr Burdett noted his sympathies to the families of the members of staff who had died from Covid-19.

Mr Burdett confirmed a number of meetings regularly take place on agenda planning and with the added liaison with Mr Hughes this ensured any relevant items were included.

Mr Burdett described his observation of the Strategy and Transformation meeting the previous day with updates being provided on the integrated care system and Northern Alliance. He advised this had been a very positive meeting with the Trust demonstrating diligence.

Different Trusts have differing processes, Mr Burdett explained, observing that some Trusts do not have Governor Observers and hold only four Council of Governors meeting per year, noting the Trust's advantageous position with meetings every month and Governor Observers in place for each committee meeting. Mr Burdett confirmed Mr Fedorowicz would be taking over his position at the CCG Policy Forum.

Mr Burdett confirmed the approval of the appointment of Dr Christine Hill as Non-Executive Director, with a start date of 1 January 2021.

Ms Shears would be taking over the role of Deputy Chair when Mrs Dunnett reached the end of her term on 31 December 2020, Mr Burdett confirmed.

Mr Hughes said he was looking forward to Dr Christine Hill joining the Trust and offered his congratulations to Ms Shears.

Ms Shears thanked Mr Hughes.

Mr Hughes advised the direction of travel on the Newgate Care System where national guidance is in place, Cambridgeshire and Peterborough. He noted the systems were previously called alliances and this was an exciting new venture.

Mrs Prior asked if any information was available on the numbers of patients using hospitals in South Lincs and how they will be tied into the ICS also what links and communications would be provided.

Mr Hughes explained in terms of how the Trust engages this is an area where ways to engage and collaborate in conjunction with Healthwatch needed to be explored. He added the role of Governance in the system was still being fine-tuned with the aim to get increased NED involvement and to see where the Governors fit into this system. Mr Hughes stressed this needed to be done at a reasonable pace.

8.0 Update on Governwell Course for information

Two days of Governwell Courses had been attended by both Mrs Prior and Mr Burdett. The slides from these had been shared with the Governors, Mrs Prior reported.

Mrs Prior advised the conference had been very interesting over the two-hour duration and had covered digital services and diverse communities in the Peterborough area, basing the digital services on Milton Keynes University Hospital who were at the forefront in this area.

Mrs Prior reported on the advances of patients accepting video conferences with medical professionals and accessing their own notes. She added the areas covered had been wide-ranging and beneficial.

Mr Hughes thanked Mrs Prior on the new perspectives to familiar topics. He added there was the potential for patient groups to appoint Governors.

Mr Hughes highlighted the difference between Governors and membership and stressed the importance of engaging with members. He advised the Membership Engagement Committee would need to be resurrected.

The Trust was however engaging with communities, Mr Hughes confirmed, to develop the provision of care.

Mrs Roulstone asked how successful the Suffolk strategies had been. Mrs Prior confirmed they had increased diversity from ethnic groups, staff and public, but not as much as anticipated.

Mr Gardiner reported on a Governwell course he had recently attended which had been very good quality and stimulating, demonstrating how Governors can develop a collective voice and develop a relationship with Staff Governors.

Mr Hughes asked Mr Denton for an update on the current status on Governwell courses for the Governors. Mr Denton confirmed the Trust are reviewing a course of effective questioning for Governors and he had recently received feedback on a virtual course relating to this topic. Mr Denton advised he would share the dates available with the Governors with a view to looking at which Governors could attend.

9.0 AOB

Mr Gidi congratulated Mr Denton on his recent Governance Professional of the Year award.

Mr Hughes addressed the failure of MS Teams Live during the meeting.

Mr Hughes wished all a safe and healthy Christmas and thanked everyone for their contributions during what had been busy and challenging times.

10.0 Questions received from the Public

No questions were received from the Public.

Next Public Meeting of the Governors

16 March 2021

14:00 – 16:30 hours

Via MS Teams LIVE