

**GOVERNORS' FORUM
NOTES OF A MEETING HELD ON
16 May 2016 at 4:00 pm, Boardroom RHH**

Present:

Kath Parker (KP) Chair	Joyce Justice (JJ)	Craig Stevenson (CS)
George Clark (GC)	Caroline Irving (CI)	Graham Thompson (GT)
Sally Craig (SC)	Jacquie Kirk (JK)	John West (JWe)
Anne Eckford (AE)	Irene Mabbott (IM)	John Warner (JWa)
Dorothy Hallatt (DH)	Lewis Noble (LN)	Michael Warner (MW)
Cath Hemingway (CH)	Nicola Smith (NS)	Dick Williams (DW)

Apologies:

Jo Bishop	Kaye Meegan	Spencer Pitfield
Amanda Forrest	Ian Merriman	Sue Taylor

In attendance:

- Jane Pellegrina (Minutes)
- Sandi Carman (item 2)
- Neil Riley (item 12)

1. Welcome and Apologies

KP welcomed everyone to the meeting and the above apologies were noted. It was also noted that Anne Eckford, Caroline Irving, Kaye Meegan and Hetta Phipps would be retiring as governors on 30 June. **KP** thanked them all for their contributions. **AE** said that the Council of Governors had made considerable progress during her nine years as a Governor and the relationship between CoG and the Board was better now than it had ever been she thanked everyone for their help during her time on CoG.

2. Care Quality Commission Inspection – How did we do?

KP welcomed Sandi Carman. Sandi explained that the CQC inspection update details she would be presenting were provisional and at this stage were provided to governors in confidence. She said that the Trust had reviewed and fed back on points of factual accuracy to the CQC on the 10 reports. The CQC will now review each point and provide feedback to the Trust, following which all the reports will be re-submitted to the National Quality Assurance Group. It is anticipated that the final reports will be published by the end of this month. Once the reports are published a Quality Summit will be held with the Trust Executive, Sheffield CCG, NHS Improvement and Sheffield City Council. Sandi then went on to explain how the overall Trust-wide outcome had been arrived at and set out in more detail the provisional outcome for NGH, RHH WPH and other services. She said that the Trust had already created action plans where necessary and ongoing monitoring will be put in place.

KP thanked Sandi for the update.

3. Notes of Forum Meeting held on 15 February 2016 and Matters Arising

The Notes were agreed and there were no matters arising.

4. Council of Governors Meetings

4.1 Review of draft Minutes of meeting held on 9 March 2016

There were no comments.

4.2 Possible Agenda Items and Topic for Governors' Open Forum Time for CoG Meeting on 1 June 2016

Following discussion the following Agenda items were agreed:

- Matters Arising:
 - Delayed Discharges
 - Lorenzo
 - AMM – clash of dates with CCG
- Operational Plan to Monitor
- 2015 National Staff Survey Results
- 2015/16 Financial position
- To be covered under Trust Operations:
 - Integrated performance Report
 - Junior Doctors Contract
 - Nurse Staffing Levels

The following topics were agreed for the Open Forum Time:

- Emergency Department
- 7-day Working

ACTION: Jane Pellegrina to inform Neil Riley

5. Report from CoG Nominations and Remuneration Committee

5.1 **GC** reported that the appraisal of the Chairman was underway and all governors on the Nominations and Remuneration Committee had been involved in the process. As part of the process **GC** has a meeting arranged shortly with the Senior Independent Director (SID). The outcome of the appraisal will be reported to the Council of Governors.

Some discussion followed regarding the level of the Chairman's ongoing commitments outside STH. **JWe** said that as appraisals should look forward as well as reviewing past performance this is an important issue for the future. **GC** said he would raise this in his forthcoming discussion with the SID.

5.2 **GC** reported that Professor Tony Weetman had retired as the University of Sheffield Non-Executive Director and the Nominations and Remuneration Committee had been involved in approving the appointment of Dame Professor Pamela Shaw as the new UoS Non-Executive Director. **NS** said that Prof Shaw had a very impressive CV.

6. Governor Links to Directorates

Feedback from Governors

Joyce Justice: MSK – has met with MSK Nurse Director Cath Bailey to discuss future plans for involvement.

Caroline Irving: MSK – CI is retiring and recommends governors consider this Directorate as a link opportunity. It is an interesting area and the managers/staff are keen to work on the link.

Sally Craig: Head & Neck – continues involvement in plans for the new Cataract

Centre, admin hitches around meeting dates etc have held up SC's involvement.

Graham Thompson: Surgical Services – implementing LiA project improvements continue in orthopaedic outpatients.

Anne Eckford: Combined Community & Acute – has continued to attend the Big Room meetings and has undertaken 15 Steps Challenge audits.

Lewis Noble: not currently linked – has started to attend the Big Room meetings.

Kath Parker: OSCCA - continues to work with the Safer Surgery Group and is sitting on an interview panel for a Deputy Nurse Director post.

Dick Williams & Kath Parker: Weston Park Hospital – still working to establish this link.

Jacque Kirk: Emergency Services – the Gastro project continues. Also looking at discharge and length of stay and the patient experience.

7. **Governors' Visits/Presentations**

7.1 Visit to Clinical Engineering 28-1-16 – it was agreed that this had been an excellent visit and it was hoped that a follow up visit to look round the workshops etc could be arranged. TEG had now commented on the visit report which had now been circulated to all governors.

7.2 **KP** reminded everyone about the session with Kevin O'Regan on 19 May to discuss car parking and transport. **JWe** said that he would like to know how the Trust spends the revenue it raises from car parking charges.

7.3 **JP** confirmed that a second meeting to the Trust Relics/History Project has been arranged for 14 June at NGH at 10:30 am. Sue Coulson is co-ordinating this on behalf of the volunteers who work on the project. The volunteers have also written an article for governors to consider including in the next edition of GoodHealth

7.4 **SC** confirmed that Frank Edenborough is looking forward to welcoming governors to the Cystic Fibrosis Unit on 28 June at 2pm. Any governors who wished to attend but had not yet booked a place were asked to contact **JP**.

7.5 **JP** confirmed that a follow up meeting with the Sheffield CCG was being arranged for September. The date will be circulated to everyone as soon as possible.
(since the meeting the date for the meeting has been confirmed as 12 September)

7.6 **KP** said that she will contact the Director of Estates regarding a possible visit.

8. **Feedback from Governors' activities/involvement**

8.1 Report on Governors' Activities - **KP** thanked governors who had provided information on their involvement which had been written up in the report that had been circulated with the agenda (attached to these Notes). The report was noted.

8.2 **JP** reminded governors of the opportunity to observe at the three Board Committees. The schedule of attendance had been recirculated with the agenda and **JP** asked everyone to let her know which meeting they would be able to attend. **JWa** said that he has found the experience of attending these meeting valuable and encouraged

those who have not yet attended to do so. **CH** said that she has attended and also found it extremely interesting.

8.3 Governors to join Trust Committees

JP again asked governors to consider joining the following committees and to let her know if they are interested:

- Clinical Effectiveness Committee (1 more Governor)
- Quality Report Steering Group (3 – 4 more Governors)
- Equality and Inclusion Group (1 – 2 Governors)

AE said she had previously been a member of the Quality Report Steering Group. She said it is an interesting group and it is important that governors take part because the Quality Report includes priorities for improvement suggested by governors. **KP** is currently the only governor on the Group. **JWa** and **CH** expressed interest in the Quality Report Steering Group. **JP** said she would forward further details and future meeting dates.

ACTION: JP and All governors

9. Elections to Council of Governors

JP reported that the ballot had now closed and once all the candidates had been notified the results of the ballot would be circulated to governors and posted on the Trust website.

10. Governor Training

JP said that she is working with Sheffield Health and Social Care Trust and the GovernWell Training Team to develop a second training session for governors of both Trusts. A definite date has not yet been fixed but it is likely to be in September, the date will be circulated as soon as possible. Governors were invited to suggest any topics to be considered for inclusion in the training session.

ACTION: JP and All Governors

11. Update from Staff Governors

CH said that she is finding the Governors' monthly Board Briefing sessions with Tony Pedder and Neil Riley very useful and recommended that other governors consider attending too.

DC has observed at the Board of Directors meeting.

JWe said that there is unprecedented turbulence in terms of medical staffing. He attends Clinical Management Board two or three times a year and he is also a member of the Local Negotiating Committee.

CS continues his involvement with the Domestic Services Let's Talk sessions.

Both **DC** and **JWe** said they had expressed interest in the Freedom to Speak Up Guardian Role but neither had received a response.

ACTION: JP to follow up with HR Department

12. Council of Governors: your role in a crisis

KP welcomed Neil Riley to the meeting. Neil referred governors to the NHS Providers paper, circulated with the Agenda, which provided a starting point for the conversation. He said responsibility for the Trust's performance lies with the Board of Directors and although no one wants to envisage things going badly wrong it is appropriate to consider if the situation were to arise what CoG might expect. It is clear that CoG cannot attempt to do the Board's job but in holding the Board to account CoG should determine whether the Board's actions in handling the situation are reasonable and whether, following investigation, the Board has reached reasonable conclusions and obtained assurances that the actions it has taken to deal with the incident will be effective and adequate. Outside advice is available to CoG from the panel for advising Governors hosted by NHS Improvement (Monitor). He said that the Trust would communicate with the Lead Governor and the Convenor of the Forum and would aim to ensure that all governors were kept informed before matters reached the public domain. Neil said that following such an incident CoG would be integral in discussions to look at how any further occurrence could be prevented, and in actions taken to ensure the Trust learned from the incident. He said that the relationship between CoG and the Board is important, he believed the current open and transparent relationship was very good and Governors agreed.

The following points were raised:

Q. What situation would be classed as a crisis?

A. Something entirely unexpected involving finances, patient care or staff.

Q. What should governors do if approached directly by the press?

A. Refer any media contact to the Trust's Communications Department.

Q. Do Monitor have up-to-date contact details for the Lead Governors?

A. Neil would confirm that the appropriate details had been provided to Monitor.

ACTION: Neil Riley

Q. Where does responsibility lie for failure?

A. With the Board of Directors.

Q. Does CoG have any responsibility?

A. To hold the Board to account.

Q. If governors believe there is a crisis what should they do?

A. In the first instance they should speak to the Chairman.

Q. And if they are still concerned?

A. The Lead governor should talk to the NHS Improvement Panel.

12. Any other Business

There was nothing to discuss.

13. Date of next meeting

Wednesday 15 August 2016 in the Board Room at the Northern General Hospital