

GOVERNORS' FORUM MEETING
16 October 2012 held in the TEG Meeting Room, Central Campus

NOTES OF MEETING

Present: John Laxton (JL) Convenor in the Chair

Richard Barrass (RB)	Andrew Manasse (AM)	Shirley Smith (SM)
Jo Bishop (JB)	Kaye Meegan (KM)	Craig Stevenson (CS)
George Clark (GC)	David Owens (DO)	Graham Thompson (GT)
Anne Eckford (AE)	Kath Parker (KP)	Paul Wainwright (PW)
Frank Edenborough (FE)	Hetta Phipps (HP)	Claudia Westby (CW)
Christina Herbert (CH)	Nicola Smith (NS)	Susan Wilson (SW)
Joyce Justice (JJ)		

Apologies Caroline Irving Chris Monk Jeremy Wight
Heather MacDonald John Warner

In attendance: Jane Pellegrina (JP)

1. Welcome and Apologies

JL welcomed everyone to the meeting. The above apologies were noted.

2. Notes of last Forum Meeting and Matters arising

The Notes were accepted as a correct record of the Meeting.

8.2 Radiology - FE has discussed this with the Department's Clinical Director and is expecting an update.

11.2 Hospital Mortality - National Figures - FE said Mike Richmond reported that STH has no increase in mortality rates at weekends. Regarding August intake of junior doctors, **FE** commented that in addition to a regular induction fifth year medical students now work alongside consultants for two weeks prior to joining the Trust in August. Governors **AGREED** to request an annual update on Trust mortality rates.

3. Time Out 3 August 2012

GC reported that the Task and Finish Group had analysed all the Time Out feedback and developed the attached feedback actions. Following lengthy discussion the actions were **AGREED**. The following points were particularly highlighted:

- Governors must receive Council Papers one week prior to the Meeting
- Draft Council Minutes should be issued to Governors promptly after the Meeting
- Council Minutes should record challenge from Governors and provide a clear record of discussion.
- Meetings should continue to start at 5:00 pm
- Meetings should not be held at Rivermead during the winter months
- Governors should have more input to Council Agenda – via Forum meeting

It was agreed that JL would arrange to discuss feedback actions with Tony Pedder and Neil Riley

ACTION: JL and JP to agree a suitable date for JL to discuss

4. Draft Agenda for next Governors' Council Meeting – 20 November 2012

In addition to regular items suggested topics for the draft Agenda were **AGREED** as follows:

- **Matters Arising** – Major Trauma Centre
- **Governors' Matters** – Content of Governors' Council Minutes
 - Staffing Levels
- **Trust Operations** – Current Position on Right First Time
 - Progress Report on Out Patients Programme
- **To Receive & Note** – Complaints Annual Report

ACTION: JP to include the above on draft Agenda for discussion with NR

5. Governors' Council Nominations Committee

JP reported that there had been two candidates in the ballot. John Warner had been successful and would be joining the Nominations Committee.

6. Constitution Review Steering Group

JL and **NS** had attended the first meeting of this group, two Non-executive Directors, Vic Powell and John Donnelley were also on the Steering Group, **SW** had sent apologies. Some issues being discussed:

- Governors' Council will become Council of Governors
- In line with the national view it is planned to reduce the size of the Council – some Partner Governor seats will go, but VAS, Sheffield College, the two Universities, Sheffield City Council and the PCT/CCG seats will remain and there will be a Public Constituency 'Outside Sheffield',
- NR is meeting with Staff Governors to discuss arrangements for Staff Constituencies, consideration will be given to adding a Community Services staff category for a 3 year transition period
- Terms of office of Governors and NEDs
- Terms of reference for Governors' Forum
- Job descriptions for Forum Convenor, Lead Governor and Vice Chair of Nominations Committee
- JL has also requested a job description for the Senior Independent Director

JL invited Governors to share any thoughts via email.

ACTION: Governors to email JL

7. Annual Members Meeting 25 September 2012

KP reported that better promotion of the Annual Meeting had resulted in a good attendance by both staff and members of the public. It was an interesting meeting but it had been difficult to hear the speakers. **SW** said she has attended previous Trust AGMs and confirmed this year's attendance had been very good. There had also been a brief staff award ceremony and an interesting tour of the new clinical skills centre for those who were interested.

8. Governors' Board Briefing Session

GC said that this session enables Governors to question the Chair, Chief Exec and Trust Secretary on current topics being discussed by the Board. Issues discussed in September included:

- Additional medical staff for the Major Trauma Centre
- STH to take over estate belonging to those parts of Community Services that are now part of the Trust. Some of the estate is in a poor state of repair.
- A contract has been awarded to Boots the Chemist to operate a pharmacy service in RHH outpatients.
- Interviews for a Medical Director are being held on 19 and 20 November.

9. Membership Recruitment and Communications

JB tabled information showing total Trust membership and movement in 2012 (information attached). She reports that so far this year 1017 new members have been recruited and 440 members have been recorded as gone away or deceased. Governors involved in recruitment and engagement have been really pleased to see some of our new Governors coming to events. She asked for suggestions of new areas to visit where Governors can meet either patients or the public.

ACTION: Governors to recommend engagement and recruitment areas and events

SW reported that a Members' Health Lecture about alcohol run jointly with the Health and Social Care Trust had been well attended. **AE** reminded Governors that the next event for members is a talk all about nutrition and hydration on 23 October.

10. Staff Governors

FE said that staff governors have had one meeting and are planning further meetings also a meeting has been arranged with Neil Riley for 19 November.

11. Visits Presentations and Issues of Concern/Interest

11.1 Report on visit to Beech Hill Intermediate Care Facility - 10 September

NS said that continuity of mental health support is very important. **GC** thought the TEG comments on the report were quite anodyne. **FE** commented that there are still challenges for the Trust in ensuring that elderly patients are discharged in a timely fashion.

11.2 Feedback on presentation on A&E development plans - 26 September

AM said Stuart Hindmarch and Sally Weir had given a good presentation. The A&E department was originally designed for 200 patients daily but now they need to plan for 300-400 per day. The current space is too small and patient flow needs improving. £4m is being spent. The plans are available to view in the Foundation Trust Office.

GT considers that Governors are not invited to be involved in capital projects at an early enough stage. **KP** agrees.

11.3 Feedback on presentation from Patient Partnership Team 28 September

RB said this had been an excellent presentation. The Patient Partnership team had thanked Governors for their contribution to collecting patient feedback and Sue Butler said the Department's data collection would benefit from the involvement of more Governors. Governors expressed concern about the extra work involved in the new national 'friends and family' initiative beginning April 2013 and it was confirmed that there will be no additional support for staff to carry out this work.

11.4 FTGA Development Day 2 October

CS and **JJ** represented STH at the session. **CS** said the private patient income cap and mergers and acquisitions were discussed – Governors' approval will be required for both. The importance of Health and Wellbeing Boards was discussed. Material from the session will be circulated to Governors as soon as it is available. **CS** and **JJ** both recommend attending these meetings, there is a great deal for Governors to learn.

11.5 Sustainability

SW reported that the Sustainability Group had not met since Katarina, the Sustainability Manager went on Maternity leave. The Group has been informed that Katarina will not be returning to work. The Director of Estates, Phil Brennan, had given assurance that although meetings of the Group had been suspended sustainability work has continued. **DO** asked whether there is senior Board level representation on the Group? **PW** asked if the Sustainability Action Plan was being implemented or if it has been shelved? **CW** does not believe there is sufficient action being taken. It was **AGREED** that **SW** would request a report on the Action Plan from Phil Brennan at a Governors' Council early in 2013.

ACTION: SW to contact Phil Brennan

11.6 Minor Injuries Unit

AM said the possible closure of the MIU has been raised in a number of meetings. It was reported in 2010 that NHS Sheffield were considering closing the MIU but it was noted that STH and Sheffield Children's Hospital were in favour of keeping the Unit open. STH is commissioned by NHS Sheffield to run the Unit. A key finding in a report from the Sheffield LINK was the need for this type of service in its current location. **AM** agreed to make further enquiries.

ACTION: AM to progress with relevant officers
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12. Any Other Business

JL said he would like to discuss the position of Forum Convenor at the next meeting. This was **AGREED**.

13. Date of Next Meeting – To be advised.

Governors' Time Out – Feedback and Actions

1. “DEVELOPING A VISION FOR GOVERNORS’ INVOLVEMENT” – TONY PEDDER’S PRESENTATION:

- Annually, in an open and interactive session, Governors’ Council should consider the Trust’s targets:
 - Governors need more clarity of which targets are important
 - Context of performance against targets
 - Emphasis on exception-based reporting of targets
 - Governors should receive a breakdown of all Trust targets followed by an annual update on how the Trust is performing against the targets
 - There should be an opportunity for Governors to suggest additional targets
- Governors’ Board Briefing Sessions should continue
- Governors’ Council Nominations Committee Members should regularly attend each of the main Board Committee meetings
- Governors should be involved in strategy
 - The Board should bring key strategic issues for discussion
- Governor expertise should be developed through training

2. “AGENDA SETTING/COUNCIL BUSINESS/PRACTICALITIES”:

- Governors should be actively involved in setting Governors’ Council Agenda through:
 - Attending Public Board Meetings
 - Attending Governors’ Board Briefing Sessions
 - Comments from Governors’ Forum Meeting
 - Issues raised independently by Governors
- A Governors’ Forum Meeting should be held one month prior to each Governors’ Council Meeting
- Reports submitted to Governors’ Council should be concise, comprehensive and easy to read and should contain a summary of key points followed by the detailed report
- NEDs should occasionally present relevant reports at Governors’ Council
- Governors’ Council agenda papers must be received by Governors at least one week before the meeting
- Governors’ Council Minutes should be circulated as soon as possible after the Meeting

- Individual Governors can continue their enquiries with the appropriate person outside the Council Meeting
- Governors' pre-meeting immediately prior to Governors' Council is useful to prepare or clarify points for discussion and issues to raise and should continue
- Author's comments on previously circulated agenda papers should be kept to a minimum to allow more time for appropriate discussion of the report
- If questions are raised at Governors' Council that cannot be answered at the Meeting they may require:
 - Future presentation to Governors
 - Agreement to feedback to whoever raised the question prior to the next Council Meeting
 - Reports on 'specific' topics – probably best outside Council
- Different venues should be considered
- Frequency of Governors' Council Meetings:
 - Continue with four formal meetings
 - Add two semi-structured meetings
 - one to discuss targets
 - one to discuss strategy
 - Ability to call extraordinary meetings as and when required

For further discussion by Governors' Forum

- Timings of Governors' Council Meetings - 5:00 pm start time generally supported but need to consider further:
 - Possible 4:00 pm start time
 - Different start time in winter months

Membership Movement 01 Jan 2012 to 15 Oct 2012

1017 new members recruited
440 members deceased/gone away

Total membership

Constituency	Total	of % Total
Patient	4047	15
Public	7293	27
Staff	15246	58
Total	26586	

Membership Overview by Constituency for Sheffield Teaching Hospitals as of 15/10/2012

