

COUNCIL OF GOVERNORS MEETING

**Unconfirmed** Minutes of the public meeting held on 8<sup>th</sup> February 2022 at 17:30  
Via video conference

<b>Present:</b>	Claire Ward	Chair	CW
	Councillor David Walters	Appointed Governor	DW
	Ian Holden	Public Governor	IH
	John Wood	Public Governor	JW
	Kevin Stewart	Public Governor	KS
	Roz Norman	Staff Governor	RN
	Sue Holmes	Public Governor	SuH
	Councillor Craig Whitby	Appointed Governor	CrW
	Martin Stott	Public Governor	MS
Philip Marsh	Public Governor	PM	
<b>In Attendance:</b>	David Selwyn	Medical Director	DS
	Shirley Higginbotham	Director of Corporate Affairs	SH
	Graham Ward	Non-Executive Director	GW
	Neal Gossage	Non-Executive Director	NG
	Barbara Brady	Non-Executive Director	BB
	Manjeet Gill	Non-Executive Director	MG
	Steve Banks	Non-Executive Director	SB
	Aly Rashid	Non-Executive Director	AR
	Kathryn Nuttall	Matron for Gynaecology	KN
	Richard Mills	Chief Financial Officer	RM
	Richard Walton	KPMG	RW
Sue Bradshaw	Minutes		
<b>Apologies:</b>	Lawrence Abrams	Public Governor	LA
	Linda Dales	Appointed Governor	LD
	David Ainsworth	Appointed Governor	DA
	Jacqueline Lee	Staff Governor	JL
	Nadia Whitworth	Appointed Governor	NW
	Nikki Slack	Appointed Governor	NS
	Paul Robinson	Chief Executive	PR
<b>Absent:</b>	Ann Mackie	Public Governor	AM
	Gerald Smith	Public Governor	GS
	Jayne Revill	Staff Governor	JR
	Maxine Huskinson	Public Governor	MH
	Richard Boot	Staff Governor	RB

**The meeting was via video conference. All participants confirmed they were able to hear each other and were present throughout the meeting, except where indicated.**

Item No.	Item	Action	Date
<b>22/365</b>	<b>CHAIR'S WELCOME, APOLOGIES FOR ABSENCE AND QUORACY CHECK</b>		
1 min	<p>The meeting being quorate CW declared the meeting open at 17:30. The meeting was held by video conference. All participants confirmed they were able to hear each other.</p> <p>It was CONFIRMED that apologies for absence had been received from:</p> <p>Lawrence Abrams, Public Governor Linda Dales, Appointed Governor David Ainsworth, Appointed Governor Jacqueline Lee, Staff Governor Nadia Whitworth, Appointed Governor Nikki Slack, Appointed Governor Paul Robinson, Chief Executive</p>		
<b>22/366</b>	<b>DECLARATIONS OF INTEREST</b>		
1 min	There were no declarations of interest pertaining to any items on the agenda.		
<b>22/367</b>	<b>MINUTES OF THE PREVIOUS MEETING</b>		
1 min	<p>Following a review of the minutes of the meeting held on 9<sup>th</sup> November 2021, the following amendment was identified:</p> <ul style="list-style-type: none"> <li>Item number 21/359, Thornbury is spelt incorrectly in the Finance Committee section</li> </ul> <p>The Council APPROVED the minutes as a true and accurate record, subject to this amendment being made.</p>		
<b>22/368</b>	<b>MATTERS ARISING FROM THE MINUTES/ACTION LOG</b>		
1 mins	The Council AGREED that actions 21/359 and 21/360 were COMPLETE and could be removed from the Action Tracker.		
<b>22/369</b>	<b>PATIENT STORY – JACKIE'S STORY</b>		
17 mins	<p>KN presented the Patient Story which highlighted the work of the gynaecology team in dealing with a patient with mental health issues.</p> <p>CW felt the story is an excellent example of care being provided, which speaks to the Trust's care values in a way which patients can see and feel the difference.</p> <p>IH noted the number of patients attending hospital with mental health problems, in addition to physical health problems, is increasing and queried how significant this is as a percentage of what teams are dealing with.</p>		

	<p>KN advised she was unable to give specific numbers, but there has been a significant increase over the last few years. On a daily basis, colleagues in ED are faced with patients who are struggling with their mental health. This adds another level of challenge to ensure patients get access to the services they need and are discharged safely to the place they need to be. Increasingly on ward areas there are patients who come in for operations, cancer treatment, etc. who also have mental health issues. Teams have become adept at arranging multi-disciplinary team meetings and sharing knowledge between teams to ensure the correct conversations are taking place and patients and families are kept central to those. KN advised it was a privilege and honour to work with Jackie, get to know her and be trusted by her. KN advised she has learnt a lot from Jackie.</p> <p>DS felt this is a powerful story and highlights some of the difficult interactions which take place, noting it is easy to underestimate the amount of time and dedication it takes to turn cases like this around. The impact of the pandemic and years of reduced mental health funding are well recognised. It has recently been announced that mental health services in the Midlands have been allocated some ringfenced funding, which will particularly target children and young people.</p> <p>PM felt the story was inspiring. PM advised some time ago there were community mental health teams. Hopefully the investment will enable community mental health teams to be embedded in communities again.</p> <p>KN left the meeting</p>		
<b>22/370</b>	<b>CHAIR'S REPORT</b>		
1 min	<p>CW presented the report, which provided an update regarding some of the most noteworthy events and items over the past quarter from the Chair's perspective.</p> <p>The Council was ASSURED by the report.</p>		
<b>22/371</b>	<b>CHIEF EXECUTIVE'S REPORT</b>		
6 mins	<p>DS presented the report, highlighting support for the Trust from the military, Covid vaccinations, staff wellbeing, the appointment of Julie Hogg, Chief Nurse, as Chief Nurse for University Hospitals, Leicester and the actions taken in relation to infection prevention and control measures. DS advised the visiting restrictions are to be reviewed by the Incident Control Team (ICT) on 9<sup>th</sup> February 2022 and it is hoped the Trust will be able to reintroduce visiting for one designated visitor.</p> <p>However, there has been a recent increase in Covid positive patients being admitted. As of 8<sup>th</sup> February 2022, there are 28 Covid positive inpatients and 37 patients who were admitted with Covid, making a total of 65 patients. This number has, however, reduced from the peak which was seen in early January 2022.</p>		

<p>17 mins</p>	<p>KS advised he has been working as a volunteer in a family liaison role and has identified an issue with relatives being able to make contact with the wards for an update on the patient's condition as phones are not being answered. While acknowledging the reason for suspending visiting, KS felt no robust system has been put in place to ensure phones are answered and relatives kept informed. DS acknowledged it is frustrating for relatives to get updates on patients and this is something the Trust has not dealt with very well. It is important the Trust learns from this.</p> <p>The Council was ASSURED by the report</p> <p><b>Trust's Response to Omicron Wave</b></p> <p>DS presented the report, highlighting vaccination programme, Covid treatments, development of Covid Medications Delivery Unit, wellbeing offer for staff, surge capacity and super surge activity.</p> <p>CrW noted the 35% increase of capacity at the Hospital Hub for vaccinations, but not all appointments were filled. CrW queried if staff were, therefore, not fully utilised at a time when backlogs were building and sought clarification what the impact on the backlog was. DS advised there was no impact on backlogs as staff working in the Hospital Hub are not staff involved in treating patients in the backlog. At the times when there were no appointments booked, the Hub closed early and staff were redeployed.</p> <p>IH noted the Trust's ambulance turnaround times have been good compared to others and queried if this is due to a change in the transfer system. DS advised the team in ED are eager to turn ambulances around as quickly as possible and the Trust has performed well in this area for a significant period of time. This transfers the risk from the ambulance into ED and has led to some crowding in ED. However, there is less risk if patients are visible in ED as opposed to waiting in an ambulance. It is important to release ambulances back into the community as quickly as possible.</p> <p>MS noted the pessimism in the national news regarding waiting times and waiting lists and queried how the Trust is performing. DS advised there is a significant number of patients waiting for treatment. Pre-Covid there were no 52 week waiters and currently there are over 1,000. In terms of patients waiting over two years, this fluctuates but is only one or two and these are cleared in a short space of time. Cancer pathways have been maintained. The Trust has been able to undertake day case procedures and has utilised Newark Hospital. While SFHFT is in a relatively good position, DS acknowledged the impact on patients waiting for planned surgery. In terms of patients waiting over 52 weeks, a process has been established to contact these patients regularly to enquire if their symptoms are improving or deteriorating. Treatment for some patients has been brought forward if a clinical risk is identified. There is a mechanism in place to minimise the impact on patients.</p>		
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<p>15 mins</p>	<p>CW advised the Single Oversight Framework (SOF) report formed part of the reports which were presented to the Board of Directors on 3<sup>rd</sup> February 2022. The Board of Directors discussed the exceptions, particularly in relation to waiting list issues. The SOF report will be circulated to the governors and is also available on the Trust's website.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Q3 SOF report to be circulated to governors</b></li> </ul> <p>SuH queried how staff are coping with the continued demands placed on them. DS advised staff are 'fed up' with the situation, with part of the frustration being there is no clear route ahead and, therefore, no-one knows what the future holds. Staff are fed up with having to do their jobs differently and wish to return to how their jobs were. However, it is not clear if that will be possible.</p> <p>The Council was ASSURED by the report</p> <p><b>Virtual Ward</b></p> <p>RM joined the meeting</p> <p>DS gave a presentation outlining the purpose and use of Virtual Ward within the Trust.</p> <p>IH noted from an article in the Health Service Journal (HSJ) there are some concerns being raised in relation to the process by which patients are assessed as being suitable to go on virtual wards. There is the need to maintain quality assurance processes to ensure the safety and quality of experience for patients on virtual wards. IH noted in some areas the people appointed to run the service are not of a high enough grade to maintain quality.</p> <p>DS advised the virtual wards within SFHFT are consultant led. If there are any concerns about a patient, they are brought back into the organisation. The patients on virtual wards are not 'hospital' patients but are at a level between patients normally on wards and those who would be managed solely by primary care. DS advised the question he challenges himself with is if a patient is put into a virtual ward and they subsequently come into the hospital, does that deleteriously affect their outcome. The full answer to that question is not yet known. However, regional data shows there is no impact on outcome. DS acknowledged it will take time to be sure of this. In the meantime it is important to keep asking the question to maintain focus.</p> <p>The Council was ASSURED by the report</p>	<p>SH</p>	<p>28/02/22</p>
<p>22/372</p>	<p><b>LEAD GOVERNOR REPORT</b></p>		
<p>5 mins</p>	<p>RW joined the meeting</p> <p>SuH presented the report to the Council, highlighting the work on the Bellamy Road estate and governor elections. Thanks were expressed to Martin Stott and Roz Norman who have both served as a governor for 9 years and are, therefore, not eligible to stand for re-election.</p>		

	<p>CW advised as a result of a meeting with Liz Barrett, Adult Education and Sutton Academy, SFHFT is now on the Discover Ashfield Board. CW advised she has introduced Liz to others in the community in relation to supporting the health digital champions.</p> <p>SH advised any feedback in relation to this should be fed back to the Membership and Engagement Group.</p> <p><b>Action</b></p> <ul style="list-style-type: none"> <li>• <b>Feedback on the work being undertaken on the Bellamy Road Estate to be presented to the Membership and Engagement Group</b></li> </ul> <p>The Council was ASSURED by the report</p>	SH	05/04/22
<b>22/373</b>	<b>OPERATIONAL PLAN 2022/2023</b>		
8 mins	<p>RM gave a presentation outlining the planning process for 2022/2023, highlighting the national priorities for 2022/2023, key elements of the financial plan and timescales.</p> <p>The Council was ASSURED by the report</p>		
<b>22/374</b>	<b>EXTERNAL AUDIT PLAN</b>		
7 mins	<p>RW gave a presentation outlining the external audit process for 2021/2022, highlighting audit risks and value for money arrangements.</p> <p>The Council was ASSURED by the report</p>		
<b>22/375</b>	<b>REPORT FROM BOARD SUB-COMMITTEES</b>		
31 mins	<p><b>Audit and Assurance Committee (AAC)</b></p> <p>GW presented the report to the Council, highlighting implementation of internal audit recommendations and the National Audit Office Cyber and Information Security Good Practice Guide.</p> <p>IH advised the Committee is very rigorous. Discussions are ongoing regarding the relationship between the Trust's audit process and the Integrated Care System (ICS) audit process. It is important to identify any potential gaps, reporting lines, etc. and ensure a focus is kept on the impact on patients. GW advised once the Integrated Care Board (ICB) is established, this will provide an opportunity for audit committees across the ICS to work closer together.</p> <p><b>Quality Committee</b></p> <p>RN left the meeting</p> <p>BB presented the report to the Council, highlighting an update on the 62-day cancer backlog, virtual clinics, obstetric haemorrhage deep dive, challenged services, ophthalmology, Clostridium difficile (C.diff) and Board Assurance Framework (BAF) risks.</p>		

	<p>MS left the meeting</p> <p>PM noted the vast amount of work undertaken by the Committee and advised he felt assured critical matters were being carefully considered. However, from reports presented to the Committee, violence and aggression towards staff continues to be an issue. PM queried if the Trust is doing enough to support staff in ED and monitoring the use of physical restraint.</p> <p>IH noted, in terms of the cancer pathway, a number of people did not come forward for treatment during Covid and queried if there is any indication how many people who should be in the system have not yet presented and will present in the future with more developed disease and what impact this will have on the Trust.</p> <p>BB advised the cancer registry will be the source of such intelligence. There will be people who will appear in the system, sadly with a later stage of disease or possibly only at death. The impact will only be understood with hindsight.</p> <p>DS advised it is likely to be years in the future before the full information is known, if at all. In terms of patient numbers not presenting to the Trust, compared to expected numbers, the only service which has been impacted is lung cancer screening. A new lung cancer screening pathway is being established to help mitigate the gap. In some services, for example breast services, there has been an increase in referrals. While there is no data, soft intelligence suggests some clinics are seeing people presenting at a later stage. However, data from cancer networks suggests there is not a huge variant in the anticipated position.</p> <p>AR advised it is likely the number of people who have adverse outcomes from heart disease, cancer and other areas will outnumber the patients who have had harm from Covid. Data is still emerging but it is likely the area served by SFHFT may be harder hit due to deprivation.</p> <p>MG advised, in terms of violence towards staff, the People, Culture and Improvement Committee have received analysis and comprehensive action plans. The Committee has seen the headlines from the staff survey and it looks positive in some areas. It is important to maintain focus but good actions are being taken.</p> <p><b>Finance Committee</b></p> <p>NG presented the report to the Council, highlighting deterioration in the forecast for 2021/2022, BAF risks and approval of capital projects.</p> <p>CW noted this will be Neal's last Council of Governors meeting before he steps down at the end of April 2022 and expressed thanks for his work as Chair of the Finance Committee.</p> <p>KS advised the appropriate assurance was received by the Committee and issues in relation to the PFI contract are being well managed.</p>		
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	<p><b>People, Culture and Improvement Committee</b></p> <p>RM left the meeting</p> <p>MG presented the report to the Council, highlighting BAF, staff survey, Quarter 3 update in relation to the People, Culture and Improvement programme, 2022-2025 People, Culture and Improvement Strategy and service areas shortlisted for national awards.</p> <p>SH advised JL was unable to attend the Council of Governors meeting but had sent the following feedback in relation to observing the Committee: “Manjeet continues to question the execs and probing until she receives an answer. Manjeet moves items on the agenda so they are not missed (if someone needs to leave earlier). Manjeet has a vast knowledge and her experience comes through. It was nice to see colleagues and NEDs also probed and questioned well. Confident everything is well sighted.”</p> <p><b>Charitable Funds Committee</b></p> <p>SB presented the report to the Council, highlighting approval of the use of charitable funds to support the staff wellbeing post and approval to continue the non-consolidation of charitable funds in the Trust’s accounts.</p> <p>The Council was ASSURED by all Board Sub-Committees reports.</p>		
<b>22/376</b>	<b>COUNCIL OF GOVERNORS MATTERS / STATUTORY DUTIES</b>		
3 mins	<p><b>Report of the Remuneration Committee</b></p> <p>SH presented the report, which outlines the proposed arrangements for the recruitment of a Non-Executive Director due to the resignation of Neal Gossage.</p> <p>The Council APPROVED the process, and timescales, for the recruitment of a Non-Executive Director as recommended.</p>		
<b>22/377</b>	<b>QUESTIONS FROM MEMBERS OF PUBLIC</b>		
	No members of the public were present		
<b>22/378</b>	<b>ESCALATIONS TO THE BOARD OF DIRECTORS</b>		
1 min	<p>The Council AGREED the following escalations to the Board of Directors meeting:</p> <ul style="list-style-type: none"> <li>Recruitment of Non-Executive Director</li> </ul>		
<b>22/379</b>	<b>ANY OTHER BUSINESS</b>		
min	No other business was raised.		



22/380	<b>DATE AND TIME OF NEXT MEETING</b>		
	<p>Date: Tuesday 10<sup>th</sup> May 2022                  Time: 17:30                  Venue: MS Teams (TBC)</p> <p>There being no further business the Chair declared the meeting closed at 19:25</p>		
	<p>Signed by the Chair as a true record of the meeting, subject to any amendments duly minuted.</p> <p><b>Claire Ward</b> Chair</p> <p style="text-align: right;"><b>Date</b></p>		

NAME	AREA COVERED	CONSTITUENCY	FULL COG MEETING DATES				EO COG	TERMS OF OFFICE	DATE ELECTED	TERM ENDS
			11/05/2021	10/08/2021	09/11/2021	08/02/2022				
Ann Mackie	Newark & Sherwood	Public	P	P	X	X	P	3	01/05/19	30/04/22
Ben Clarke	King's Mill Hospital	Staff	X					3	01/09/19	31/08/22
Councillor Craig Whitby	Mansfield District Council	Appointed	P	A	P	P	X	4	21/05/19	31/05/23
Councillor David Walters	Ashfield District Council	Appointed	P	P	P	P	P	1	23/04/20	31/05/21
Councillor Kevin Rostance	Nottinghamshire County Council	Appointed	X						15/10/20	31/05/21
Councillor Linda Dales	Newark & Sherwood District Council	Appointed				A		1	15/07/21	31/05/22
Councillor Michael Brown	Newark & Sherwood District Council	Appointed	X					1	18/05/20	31/05/21
David Ainsworth	Mansfield & Ashfield CCG	Appointed	P	A	X	A	P	N/A	20/02/20	N/A
Dean Whelan	Mansfield	Public	X					3	01/09/22	31/08/22
Gerald Smith	Mansfield	Public	P	A	X	X	X	3	01/05/19	30/04/22
Ian Holden	Newark & Sherwood	Public	P	P	P	P	P	3	01/05/19	30/04/22
Jacqueline Lee	Newark Hospital	Staff	P	P	X	A	P	3	01/05/19	30/04/22
Jayne Revill	King's Mill Hospital	Staff	X	A	X	X	X	3	01/05/19	30/04/22
John Wood	Mansfield	Public	P	P	P	P	P	3	01/05/19	30/04/22
Kevin Stewart	Ashfield	Public	P	P	P	P	P	3	01/05/19	30/04/22
Lawrence Abrams	Rest of East Midlands	Public	P	A	A	A	P	3	01/05/19	30/04/22
Martin Stott	Newark & Sherwood	Public	P	A	P	P	P	3	01/05/19	30/04/22
Maxine Huskinson	Ashfield	Public	X	P	P	X	A	3	01/11/20	31/10/23
Nadia Whitworth	Volunteers	Appointed		P	A	A	P	3	10/05/21	10/05/24
Nikki Slack	Vision West Notts	Appointed	A	A	A	A	X	N/A	17/07/19	N/A
Paul Baggaley	Newark & Sherwood	Public	P					3	01/11/20	31/10/23
Philip Marsh	Ashfield	Public	P	P	A	P	P	3	01/05/19	30/04/22
Richard Boot	Newark Hospital	Public	P	X	X	X	X	3	01/05/19	30/04/22
Roz Norman	King's Mill Hospital	Staff	P	P	P	P	A	3	01/05/19	30/04/22
Sue Holmes	Ashfield	Public	P	P	P	P	P	3	01/11/20	31/10/23

P = Present  
A = Apologies  
X = Absent