

COUNCIL OF GOVERNORS

MEETING

22 FEBRUARY 2023

Making a difference every day.

Meeting of the Council of Governors

Wednesday, 22 February 2023

Held at 3pm in Lecture Theatres, Pinewood Education Centre, Stepping Hill Hospital

AGENDA

Time			Enc	Presenting
3.00	1.	Welcome & Opening Remarks		Chair, T Warne
	2.	Apologies for Absence		Chair, T Warne
	3.	Declarations of Interests		All
	4.	Minutes of Previous Meeting – 14 December 2022	✓	Chair, T Warne
	5.	Action Log	✓	Chair, T Warne
3.10	6.	Chair's Report	✓	Chair, T Warne
3.25	7.	Non-Executive Directors Report - Including highlights from Board Committees	✓	Non-Executive Directors - Board Committee Chairs
Engagement				
3.50	8.	Membership Development Group Report	✓	Public Governor, H Austin
Strategy				
4.00	9.	Trust Planning 2023-24	✓	Director of Strategy & Partnerships, J O'Brien
Governance				
4.20	10.	Confirmation of Nominations Committee Membership	✓	Chair, T Warne
4.25	11.	Appraisal Process for Chair and Non-Executive Directors	✓	Chair, T Warne / Senior Independent Director, L Sell
4.35	12.	Nominations Committee Report: Annual Review of Non-Executive Directors & Chair Remuneration	✓	Director of People & Organisational Development
DATE, TIME & VENUE OF NEXT MEETING				

4.45	13.	26 April 2023, 3.00pm Pinewood Education Centre, Stepping Hill Hospital		
Papers for Information				
	14.	NHS Providers Governor Workshops - Feedback	✓	

STOCKPORT NHS FOUNDATION TRUST
Minutes of a Council of Governors Meeting
Held on Wednesday 14th December 2022
Held at 12.30pm in Pinewood Education Centre

Present:

Prof. T Warne	Chair
Mrs S Alting	Appointed Governor, Age UK Stockport
Mr H Austin	Public Governor
Mrs V Cottam	Public Governor
Mr M Cunningham	Public Governor
Mrs L Higginbottom	Public Governor
Cllr. Keith Holloway	Appointed Governor, Stockport Local Authority
Dr T Kondratowicz	Public Governor
Mr J Pantall	Public Governor
Mr A Pinder	Staff Governor
Mrs G Roberts	Public Governor
Mrs M Slater	Public Governor
Mrs K Southwick	Staff Governor
Prof. C Summerton	Public Governor
Mrs S Thompson	Public Governor

In attendance:

Dr S Anane	Non-Executive Director
Mrs C Anderson	Non-Executive Director
Mr A Bell	Non-Executive Director
Mrs A Bromley	Director of People and Organisational Development
Mrs N Firth	Chief Nurse
Mr J Graham	Chief Finance Officer
Mrs H Howard	Deputy Chief Nurse
Mrs K James	Chief Executive
Mrs K Leadbeater	Charity Manager
Dr M Logan-Ward	Non-Executive Director/Deputy Chair
Dr A Loughney	Medical Director
Mrs R McCarthy	Trust Secretary
Mrs M Moore	Non-Executive Director
Mrs C Parnell	Director of Communications and Corporate Affairs
Dr L Sell	Non-Executive Director/Senior Independent Director
Mrs J Wild	Minute Taking

Ref	Item	Action
120/22	Welcome & Apologies for Absence Apologies for absence were received from: Paula Hancock, Staff Governor David McAllister, Staff Governor Adrian Nottingham, Public Governor David Kirk, Appointed Governor HealthWatch Julie Wragg, Public Governor Jamie Hirst, Public Governor Richard King, Public Governor	

	In response to a comment from Mrs Alting, Appointed Governor, regarding staff governors challenge in attending Council of Governor meetings, it was acknowledged that the Trust Secretary would liaise with colleagues to support governors in attending meetings (ACTION). In respect of supporting governors to attend meeting more generally, information is included for potential governors, with a calendar of meetings disseminated in advance.	Trust Secretary
121/22	Amendments to Declaration of Interests There were no declarations of interest.	
122/22	Minutes of Previous Meeting The minutes of the previous meeting held on 28 th September 2022 were agreed as a true and accurate record of the meeting.	
123/22	Action Log The action log was reviewed and annotated accordingly.	
124/22	Chair's Report The Chair presented the Chair's Report providing reflections on recent activities within the Trust and wider health and care system including: <ul style="list-style-type: none"> • External Partnerships • Trust Activities • Strengthening Board Oversight Mr Pantall, Public Governor, sought further information regarding work to improve the communities understanding of, and best make use of health and social care services within the locality, to support areas of deprivation. The Chair highlighted work that had taken place to understand the demographics of the locality and identify health inequalities. He added that work was being progressed as part of the Stockport locality, to ensure primary care was accessible and utilised by communities. The Council of Governors received and noted the Chairs' Report.	
125/22	Non-Executive Directors Highlight Report The Non-Executive Director Chairs of the Board committees provided updates on high-level metrics and key assurance reports considered at Finance & Performance, People Performance, Quality, and Audit Committees. <u>Finance</u> The Council of Governors noted at month 7, the Trust position was £1.7m adverse to plan, primarily due to escalation beds remaining open beyond the planned winter period, continued growth in Emergency Department attendances and additional inflationary pressures. Furthermore, the Chief Finance officer provided the Council of Governors with update on the Greater Manchester (GM) Integrated Care System (ICS) financial position, noting adverse variance to plan. He confirmed all provider trusts had undertaken an exercise to identify best, likely and worst-case scenario for year-end financial position, with the Trust's likely position a £3m deficit. In addition to the key drivers highlighted, he noted higher levels of Covid-19 than planning guidance assumptions.	

	<p>In response to a query from Mr Austin, Public Governor, regarding the planning guidance and opportunity to challenge assumptions, the Chief Finance Officer highlighted annual planning guidance included national assumptions around efficiencies and efficiency savings. The Chair confirmed the Chief Finance Officer attended frequent meetings with GM Directors of Finance to obtain a system wide view on planning guidance and assumptions, which would be discussed with the NHS England regional teams. He confirmed further information regarding planning guidance would be shared with the Council of Governors as released (ACTION)</p> <p><u>Operational Performance</u></p> <p>The Council of Governors were informed that the Trust continued to perform below the national target against core operating standards, with ongoing operational pressures. It was noted that improvement plans were in place to address performance, noting the Trust was on trajectory to achieve the diagnostic waiting time standard by the end of the fiscal year.</p> <p><u>People</u></p> <p>The Council of Governors received an update regarding the Trust's preparation to potential industrial action, including confirmation that a regular group had been established to oversee planning and response to industrial action.</p> <p>The Council of Governors noted that sickness absence remained a concern, with a slight increase from 5.91% in September to 6.61% in October, and a deep dive undertaken focussing on principal areas contributing to sickness absence, alongside the health and wellbeing approach to support colleagues remain in work.</p> <p>In response to a query from Mr Pantall regarding how the Trust's sickness absence compared to similar organisations and how the Trust ensured ill health retirements were kept to a minimum, a Non-Executive Director acknowledged the increase in sickness compared to pre-Covid levels at a regional level. Non-Executive Directors highlighted the health and well-being approach to support colleagues stay in work, alongside improvements to flexible working opportunities, career progression and supporting staff at stages of their careers continuing to address workforce turnover.</p> <p>In response to Prof. Summerton, Public Governor, seeking confirmation that international recruitment was undertaken in an ethical manner, so not to disadvantage the countries from which colleagues were recruited, the Director of People & Organisational Development (OD) confirmed the Trust was only able to recruit from countries where there was a sufficient supply of workforce to withstand international recruitment, such as India.</p> <p><u>Quality</u></p> <p>The Council of Governors were informed that HSMR continued to be above the expected number of in-hospital deaths, and the Medical Director described in further detail work taking place in relation to UTI related deaths,</p>	<p>Director of Strategy & Partnerships</p>
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	<p>which remain a significant contributor. He confirmed the outcome this work would be presented to Quality Committee in March – April 2023.</p> <p>Furthermore, the Council of Governors noted that sepsis antibiotic administration remained below target, with implementation of a revised sepsis screening assessment tool to improve communication between colleagues caring for patients with suspected sepsis and improve performance. In response to a query from Dr Kondratowicz regarding the impact of delays in prescribing for sepsis, a Non-Executive Director confirmed that assurance had been received, where the Trust had not met the standard for antibiotic administration, this was by a marginal amount of time and that no clinical harm had been identified due to this.</p> <p><u>Audit Committee</u></p> <p>The Council of Governors received update regarding key reports considered by the Audit Committee.</p> <p>The Audit Committee received confirmation that Audit Committee reviewed a comprehensive report on the work of the Risk Management Committee, including significant risks and confirmed alignment between the Risk Management Committee discussions and key matters/challenges reviewed via the Board Committees.</p> <p>The Council of Governors noted the Non-Executive Directors Report.</p>	
126/22	<p>Patient Experience & National Inpatient Survey</p> <p>The Deputy Chief Nurse presented the Patient Experience & National Inpatient Survey Report, which included an overview of how the Trust learns from patient, family and carer experience, headlines from the latest National Inpatient Survey and current patient experience initiatives in response to feedback received.</p> <p>Discussion took place regarding the importance of seeking feedback from patients with protected characteristics to ensure equality of outcomes for patients.</p> <p>In response to Prof. Summerton, Public Governor, seeking clarity regarding the question relating to information for patients after leaving hospital, the Deputy Chief Nurse confirmed that this related to information shared with patients, opposed to the Trust interface with other agencies. Mr Austin, Public Governor, suggested that although the Trust sent information electronically to GPs, there was room for improvement regarding information for the patient, such as the time the patient would be discharged and the discharge process in general.</p> <p>The Council of Governors reviewed the Patient Experience & National Inpatient Survey Report, included improvement actions.</p>	
127/22	<p>Communications & Engagement Strategy</p> <p>The Director of Communications & Corporate Affairs presented the Communications and Engagement Strategy. She described the drivers for change, the key principles and action plan for 2023/24 and highlighted</p>	

	<p>governors' role in assisting to improve communication and engagement with members and the public.</p> <p>The Director of Communications & Corporate Affairs confirmed six monthly updates on implementation of the strategy would be presented to the Board of Directors.</p> <p>The Council of Governors received the Communications & Engagement Strategy and noted actions being taken to implement the strategy.</p>	
128/22	<p>Nominations Committee Report – Appointment of Non-Executive Director</p> <p>The Chair presented the report from the Nominations Committee which described the robust recruitment and selection process undertaken and which sought recommendation from the Council of Governors to:</p> <ul style="list-style-type: none"> • Approve the appointment of Beatrice Fraenkel to the position of Non-Executive Director from 4th January 2023, for an initial term of 3 years. • Support the appointment of Meb Vadiya to the position of Associate Non-Executive Director to commence in January 2023, for an initial term of 2 years. <p>Mrs Alting referred to Section 3.8 of the report, and confirmed she had been a formal member of the interview panel and her support for the recommendation. The Chair confirmed the report would be amended accordingly.</p> <p>The Council of Governors reviewed the report and:</p> <ul style="list-style-type: none"> • Approved the appointment of Beatrice Fraenkel to the position of Non-Executive Director from 4th January 2023, for an initial term of 3 years. • Supported the appointment of Meb Vadiya to the position of Associate Non-Executive Director to commence in January 2023, for an initial term of 2 years. 	
129/22	<p>Nominations Committee Membership</p> <p>The Chair presented the Nominations Committee Membership Report requesting the Council of Governors to:</p> <ul style="list-style-type: none"> • Review the membership of the Nominations Committee • Submit self-nominations to fill the vacant member positions by 30th December to the Deputy Trust Secretary. <p>Mrs Alting offered any governor who may be interested in becoming a member of the Nominations Committee the opportunity for informal discussions.</p> <p>The Council of Governors noted the Nominations Committee Membership Report.</p>	
130/22	Membership Development Group Report	

	<p>The Chair of the Membership Development Group (MDG), Mr Howard Austin, Public Governor, presented the Membership Development Group Report, providing overview of the most recent meeting held on 6 December 2022. He confirmed the MDG had considered the following items:</p> <ul style="list-style-type: none"> • Governor engagement including the register of governor contacts, process for register of governor engagement and engagement with Community Champions • Website: Membership & Governors Section • Membership Action Plan – Progress Report <p>The Chair of the MDG emphasised the importance of all governors considering how they could best support delivery of the action plan, including linking in with Community Champions initiative.</p> <p>The Council of Governors noted the report presented including progress against the Membership Action Plan 2022/23.</p>	
131/22	<p>Papers for Information</p> <p>The Council of Governors noted the following papers included for information:</p> <ul style="list-style-type: none"> • Draft minutes of the Annual Members Meeting 2022 • Council of Governors Calendar 2022/23 	
132/22	<p>Any Other Business</p> <p>Mrs Alting, Lead Governor, noted that this was Mrs Catherine Anderson, Non-Executive Director, last Council of Governors meeting. On behalf of the Council of Governors, she thanked Mrs Anderson for her expertise and extensive engagement as a Non-Executive Director and wished her all the best for the future.</p>	
133/22	<p>Date, time and venue of next meeting</p> <p>Wednesday, 22nd February 2023, 3pm Pinewood House, Stepping Hill Hospital</p>	

Signed:_____Date:_____

Council of Governors Action Log

Ref.	Meeting	Minute ref	Subject	Action	Bring Forward	Responsible
99/22	21 Dec 2022	120/22	Apologies for Absence	Trust Secretary to liaise with colleagues to support governors in attending meetings. Update February 2023 – Guidance to support staff governors attending meetings disseminated. Calendar of meetings 2023/24 issued to all governors.	Closed	Trust Secretary
100/22	21 Dec 2022	125/22	Non-Executive Directors Highlight Report	Further information regarding planning guidance 2023/24 to be shared with the Council of Governors.	On agenda	Director of Strategy & Partnerships

On agenda
Not due
Overdue
Closed

Stockport NHS Foundation Trust

Meeting date	22 nd February 2023	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Chair’s Report					
Lead Director	Chair, Professor Tony Warne		Author		Professor Tony Warne	

Recommendations made / Decisions requested

The Council of Governors is asked to note the content of the report.

Executive Summary

This report advises the Council of Governors of the Chair's reflections on recent activities within the Trust and wider health and care system.

1. PURPOSE OF THE REPORT

The purpose of this report is to advise the Council of Governors of the Chair's reflections on his recent activities.

2. EXTERNAL PARTNERSHIPS

This is our first Council of Governors meeting of 2023, and although it feels a little strange to say so, I wish all those I've not met so far this year, a very happy New Year. Sadly, as I write this report the invasion and war in Ukraine has been ongoing for over 356 days. The loss of life and disruption to life continues and we are all, in different ways, experiencing the consequences of this tragic and unwarranted conflict. I believe it is important that we continue to keep all those caught up in the Ukraine/Russia war and in other conflicts around the world, in our thoughts and prayers. My hope is that we see a more peaceful world in 2023.

In reviewing this report for the meeting, I was reminded that as I drove to Stockport in the early morning of the 6th February, my radio told me there were reports of an earthquake in Turkey and Syria. The BBC reporter noted there were 69 deaths so far. As I write this, just a week on the BBC is now reporting there have been 36,000 deaths with the final total likely to be more than 50,000. It is a tragedy almost beyond comprehension. Like the war in Ukraine, we must help where we can, and keep all those impacted by this disaster in our thoughts and prayers too.

Just before Christmas I was able to attend a Regional Road Show event hosted by Amanda Pritchard, NHS Chief Executive. The meeting was focused on the NHS 2023/24 Priorities and Operational Guidelines due to be published the following day. It was a most welcome opportunity to comment on the final draft before this was to be published. Also welcome was that this year the whole document was just 20 pages long. This year there are fewer national objectives, and the three key areas which these objectives are aimed at achieving, are outlined in our Chief Executive, Karen James', recent report to the Board.

Karen and our Executive Team will be reporting on what we will be doing as a Trust and in collaboration with others, what Greater Manchester are planning to do in working toward these objectives at our April Board meeting.

Whilst the reduced number of national objectives are welcome, the sharper focus perhaps reflects the difficult year ahead. Demand for treatment and care remains high across all our services, and although the NHS has received additional funding as part of the Chancellors Autumn Statement, finances and funding in the next financial year will be extremely tight.

This was emphasised at the NHSE North West Region Combined Leaders and Chairs meeting held in January. Whilst each of the three Integrated Care Systems (ICS) in the North West should remain independently financially solvent, it may well be the case this year that some fiscal mutual aid across the three ICS's is required for the North West as a whole to successfully deliver a balanced budget.

Managing our financial resources next year will require us to be extremely careful in deciding what is prioritised within our own Trust and how we work across the Greater Manchester ICS in securing the best value for taxpayers of every NHS £1 spent. This will inevitably mean we will perhaps not be able to do all that we had originally planned in the next financial year. However, we will continue to work with our immediate partners, Tameside and Glossop Integrated Care Foundation Trust (T&GFT) and East Cheshire Trust (ECT) in exploring how greater collaboration might help us achieve best use of the available funding.

Jane McCall, Chair at T&GFT, and I together facilitated our fourth Board to Board meeting between our two Trusts. This meeting was aimed at making both an independent and co-produced contribution to the development of the Greater Manchester ICS Joint Forward Plan. The meeting was jointly facilitated by Warren Heppolette, Chief Officer for Strategy and Innovation Greater Manchester Integrated Care System. There is now a national requirement for all ICS's to develop a strategy. All NHS organisations and Local Authorities are required by law, to have due regard to this strategy when making decisions about the use of health and care resources. The meeting was a great opportunity to focus on possible models for future working, desired outcomes and the commitments we might have to consider making. In April, I will report back to the Board on the outcomes of this consultation opportunity.

One of the many groups taking part in the wider consultation will be the Stockport Health and Wellbeing Board. It was something I raised at the third meeting of the Board this year. There were two other items on the agenda that I want to draw the Board's attention to. The first was a report of the work Stockport Council had led in response to the cost-of-living crisis. The responses included developing a wide range of warm spaces that provided company, tea and biscuits, and in some cases also soup and a sandwich. There was advice about managing energy costs and practical interventions like heated day blankets being provided free to the most vulnerable. Importantly for others, was the direct intervention in the case of those folk being threatened with forcibly having a pre-payment meter being installed for their gas and electric supply.

You may be interested in understanding why some of these measures are really important to many of our neighbourhoods. January saw the publication of the final and full report for the Greater Manchester Residents survey, which contains specific locality information – see here <https://www.greatermanchester-ca.gov.uk/what-we-do/research/resident-surveys/>

The other item to draw the Council of Governor's attention to is the plan to establish the formal constitution of the Stockport Locality Board with full terms of reference. This would be a hybrid committee and will need formal approval from both the Local Authority Councillors and the Greater Manchester Integrated Care Board (ICB). The focus of the Locality Board will be on achieving four outcomes:

1. People are happier and healthier, and inequalities are reduced
2. There are safe, high-quality services which make best use of the Stockport £1
3. Everyone takes responsibility for their health with the right support
4. We support local social and economic development together

Progress will be reported to the Health and Wellbeing Board (to provide assurance of the delivery of the Stockport One Health and Care Plan); to the Greater Manchester ICB by the Place Lead for Health and Care Integration; and through each member of the Board being responsible for reporting progress to their individual organisational governance processes as appropriate.

It was wonderful to be able to discuss plans for tackling some of the causes of poor health and wellbeing across our localities and communities. The contrast between the present unremitting demand for health and social care and the possibility of a very different future felt stark.

I was privileged to participate, as part of a stakeholders group, in the appointment process for a new Chair at East Cheshire NHS Trust. It was a good day with great candidates. The process is slightly different from ours as a Foundation Trust, and the appointment will need to be approved by the Secretary of State for Health and Social Care before successful candidate can be announced.

I was pleased to present the final paper at the inaugural North West Freedom To Speak Up Guardians' (FTSUG) conference. The national FSUG was in attendance and the event, which provided a helpful insight into how Trust's around the region were developing their approaches to giving colleagues a greater voice.

Finally, since I last reported to the Council of Governors, I also met with Health Watch colleagues; with Greater Manchester ICB colleagues at a professorial lecture at University of Salford; Greater Manchester Chairs Group; and with GGI and MaST colleagues looking at workforce development across integrated care systems.

3. TRUST ACTIVITIES

Our new NED, Beatrice Fraenkel, has now joined the Board. Her focus will be on supporting our People Plan and she has already made a great start in this area. Also joining us is Meb Vadiya, our new Associate NED. I thank everyone for the warm welcome both have been given on joining our Board.

I have chaired only one Consultant appointment panel since my last report, but we were able to successfully appoint a Consultant Physician in Acute Medicine. The successful candidate brings a wealth of global health experience.

Karen and I were also able to celebrate the contribution made by a number of our long serving colleagues at a second event just before Christmas. This was for colleagues who had made a 30 or 40 year contribution to the NHS and in many cases to our Trust. The event was held in the grand surroundings of Bredbury Hall, which I was reliably informed by several of our Executive Directors, was the place to go on a Saturday night back in the day.

Karen and I were both pleased to host a Christmas meal for many of our volunteers. Karen and I served the meals, although I'm not sure our Catering Manager, Duncan O'Neill, is likely to offer us a job in our restaurant anytime soon! It was a wonderful opportunity to meet and spend time with our long serving volunteers and to hear of their experiences working in our Trust.

Finally, I was able to meet our Treehouse colleagues for a brief visit, many thanks to Rachael Whittingham for facilitating such an interesting and informative visit. It was absolutely brilliant to see what had been achieved post-pandemic and what was being planned for the future. My time also included visiting the neonatal unit and again I was totally impressed with the colleagues I met and the service they were providing to families. Both services have a great future ahead of them.

4. STRENGTHENING BOARD OVERSIGHT

Due to the operational demands facing our Trust over the pre and post-Christmas period, it seemed sensible to postpone our planned Board Development event. The programme for the 2023 year is currently being finalised.

Stockport NHS Foundation Trust

Meeting date	22 nd February 2023	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Non-Executive Directors Report including: Update from Board Committees					
Presented by	Chairs of Board Committees		Author		Rebecca McCarthy, Trust Secretary	

Recommendations made/ Decisions requested

The Council of Governors is asked to review the Non-Executive Directors Report and seek any further assurance required on key matters.

Executive Summary

The work plans of the Board Committees, each chaired by a Non-Executive Director, are aligned to the agreed Corporate Objectives for the year. This includes review of high-level metrics and key assurance reports which enable performance relative the organisational objectives to be monitored and the type of improvement needed to be determined. A Key Issues & Assurance Report from all Board Committee's is routinely provided to the Board of Directors including Finance & Performance Committee, People Performance Committee, Quality Committee and Audit Committee.

This report highlights key matters for the Council of Governors attention following the most recent Board Committee meetings that took place in January 2023, and the Board of Directors meeting that took place in February 2023.

1. Finance

- The Trust has agreed a financial plan with a deficit of £23m for 2022/23, including a cost improvement programme (CIP) target of £18.1m, as part of the Greater Manchester (GM) Integrated Care System (ICS). In recent months, all Trusts in GM have been undertaking actions to support delivery of the financial plan, focussing on workforce and productivity and efficiency.
- At month 9, the Trust position was £2m adverse to plan – a deficit of £19.0m. The primary reasons remain unchanged; escalation beds open beyond the planned winter period, growth in A&E attendances and additional inflationary pressures.
- CIP remains a challenge - at month 9 the target has been delivered; however, the majority is non-recurrent.
- The year-end financial position is currently forecast to be between a balance position and overspend of £3m. The financial position for both the Trust, and GM ICS, is continually reviewed, and update will be provided in the meeting.
- The Trust has commenced activity, workforce and finance planning for 2023/24 as part of the GM ICS. Financial challenges have been identified in relation to inflation, workforce costs, growth in demand and efficiency savings.

2. Operational Performance

- The Trust continues to perform below the national target against the core operating standards (A&E 4-hour standard, Cancer 62-day standard, 18-week Referral to Treatment (RTT) standard, and Diagnostic 6-week wait standard), with ongoing operational pressures.
- A&E performance deteriorated in December, with increased attendances and timely access to domicile and community care remaining challenging. However, within GM, Stockport was the best performing Trust for type 1 A&E attendances in month. Our 'Programme of Flow' continues including regular ward Multi-Disciplinary Team and long length of stay reviews.
- Notwithstanding challenges on demand and patient flow, there is an improving trajectory for several other operational standards. Diagnostic performance remains consistent and on track to meet improvement standards. 62 day cancer performance remains at an improved level and the number of patients with the longest waits for treatment is reducing as work continues with locality partners.

3. People

- We remain alert to ongoing industrial action, and as a Trust continue to support our staff's right to strike. To ensure patient safety during this time a regular emergency preparedness/industrial action meeting has been established, overseeing planning and response to any industrial action.
- Marginal improvement in sickness absence was seen in November, yet increased in December 2022, with the rise in cough, cold, flu absence significant but expected. The Trust continues to provide flu and covid vaccinations and, in response to musculoskeletal sickness absence, has commenced a back care awareness campaign.
- In January 2023, the People Performance Committee considered the Organisational Development (OD) Plan, setting out our approach to enhancing performance and culture and attract, develop and retain colleagues. The plan includes a series of programmes/interventions under 4 priority areas:
 - Leadership & working relationships
 - Talent management
 - Innovation
 - OD consultancy

The OD Plan was subsequently approved by the Board of Directors in February 2023, and the People Performance Committee will receive regular reports on the effectiveness of the plan.

4. Quality

- HSMR continues to be above the expected number of in hospital deaths, with UTI related deaths a significant contributor. The outcome of audit to explore this will be reported to the Quality Committee in April 2023.
- Sepsis: antibiotic administration remains below target with rollout of an electronic sepsis screening tool to improve communication between colleagues caring for patients with suspected sepsis commencing in the new year.
- CDifficile rate remains above trajectory, with peer groups across Greater Manchester (GM) continuing to see an increase also. Challenges include increased acuity of patients and level of antibiotic prescribing both in the community and other Trusts. Trusts across GM are working on antibiotic resistance and prescribing.
- A rise in the number of complaints has been seen in recent months, with ongoing operational pressures having an impact on the ability to respond in the agreed timescale. When this occurs, the complainants are contacted and are kept informed. The PALS & Complaints team continue to focus on resolving concerns informally.
- The Quality Committee reviewed, and recommended to the Board of Directors, the Trust's submission for the Clinical Negligence Scheme for Trusts (CNST) Year 4 maternity incentive national scheme, recognising achievement of the level of compliance and assurance provided.

5. Audit Committee

At its meetings in February 2023, Audit Committee reviewed the following matters:

- Internal Audit Plan 2022/23 – The below internal audits were finalised and reported to Audit Committee:
 - Digital: Legacy / Unsupported Systems Review – Limited Assurance
 - Digital: Asset Management Review – Limited Assurance
 - HFMA: Financial Sustainability Review – Standards Met
 - Board Reporting: Provenance of Data – High Assurance
 - Emergency Preparedness, Resilience and Response Review – Limited Assurance
 Audit Committee confirmed follow up reports were scheduled in response to limited assurance internal audits.
- Draft Internal Audit Plan 2023/24 – Reviewed draft plan for 2023/24 based on organisational risk assessment. The final Internal Audit Plan will be presented in May 2023.
- Anti-Fraud Progress Report 2022/23 – Considered counter fraud work that had taken place since November 2022.
- Draft Counter-Fraud Plan 2023/24 – Reviewed and approved Counter-Fraud Plan for 2023/24 based on organisational risk assessment.
- External Auditor Progress Report – Reviewed and confirmed, including insight to a number of national publications concerning the health and social care sector.
- Policy for the Approval of Non-Audit and Additional Services by the Trust's External Auditors - Audit Committee reviewed the policy the Trust would apply if additional services were sought to be undertaken by the Trust's external auditors and recommended this for approval to the Board of Directors. The purpose of this policy is to ensure compliance ethical standards for auditors and ensure they remain professionally independent.

Stockport NHS Foundation Trust

Meeting date	22 February 2023	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Membership Development Group Report					
Lead Director	Caroline Parnell, Director of Communications & Corporate Affairs		Author		Rebecca McCarthy, Trust Secretary	

Recommendations made / Decisions requested

The Council of Governors is asked to:

- Review the report from the Membership Development Group including progress against the Membership Action Plan 2022-23

Executive Summary

Following approval of the Membership Strategy 2022-2025, the Council of Governors established a subgroup of the Council of Governors, to be known as the Membership Development Group (MDG), to oversee implementation of the Membership Strategy & associated Action Plan 2022-23.

The MDG meets quarterly and the most recent meeting was held on 14 February 2023. The following governors were in attendance:

- Howard Austin, Public Governor (Chair of Membership Development Group)
- Sue Alting, Lead Governor/Appointed Governor
- Jamie Hirst, Public Governor
- John Pantall, Public Governor

The meeting was supported by the Trust Secretary and Deputy Trust Secretary.

The MDG considered the following items at the meeting:

- Governor engagement
 - Register of governor contacts
 - Register of governor engagement
 - Engagement with Community Champions
- Membership Action Plan – Progress Report
- Governor Email Addresses
 - Procedure to advise new Governors
 - Regular reminders to Governors

The MDG acknowledged the importance of governors sharing feedback received from both formal and informal discussions to inform the register of governor engagement and provide evidence of governors fulfilling their statutory duty to represent members and the public. Governors are

reminded that this can be provided via the Register of Engagement Form, or email/phone to the Corporate Affairs team.

Following attendance of governors at two Community Champions Network meetings, the MDG acknowledged the value of developing this partnership, which included a variety of community groups/forums including those with protected characteristics. It was agreed to explore the opportunity to include governor/membership related information in the regular Sector3 newsletter (Sector 3 is the charity infrastructure support network for voluntary, community and faith-based groups, social enterprises and charitable organisations in Stockport).

-At its meeting in December, the MDG had agreed to invite governors to reflect on the Emergency & Urgent Care Campus members' seminar held in December and take forward learning points ahead of future member events. A meeting took place on 14 February 2023 with eight governors joining the discussion. Key feedback for future events included a chair for members' seminars and opportunity for members to provide feedback to governors incorporated within the event, supported by PALS where possible. Importance of a fully operational sound system to ensure the seminars are accessible for all. Furthermore, Governors to assist in determining seminar brief by gathering feedback, with promotion of the event providing clarity of seminar topic to manage expectations and improve experience.

Progress against the Membership Action Plan is provided at Appendix 1, which details the key activities since the last meeting.

There are currently six governors on the MDG, if any more governors wish to join, please contact Soile Curtis, Deputy Trust Secretary – soile.curtis@stockport.nhs.uk / 0161 419 5166.

Membership Plan 2022-2023

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
Aim: To maintain a sizeable membership that is representative of the communities the Trust serves				
Recruitment				
Survey governors to identify established links with community groups / forums and opportunity for recruitment of members	Corporate Affairs	August 2022	Maintain overall membership number (+/- 1%)	Governor survey undertaken Aug – Sept 2022. Register of Governor Contacts presented to Membership Development Group (MDG) in September 2022. Survey redistributed to governors in January 2023 as new governors in post. Standardised email developed and shared with governors that have identified link groups. Current public membership number = 10,461 (30/01/2023)
Establish a register of governor contacts	Corporate Affairs	August 2022	(Total public membership number as of March 2022 = 10,666)	
Presentation/email recruitment promotion to groups/forums identified as opportunities for recruitment	Governors	September - March 2023		
Website Review Governor & Membership section of SFT website and revise content to ensure opportunity to become a member is clear & accessible.	Membership Development Group / Corporate Affairs / Communications	Governor & Membership content confirmed – December 2022	Maintain overall membership number (+/- 1%)	Draft Membership & Governor Content reviewed at the MDG in December 2022.

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
		Go live in line with new Trust website launch	(Total public membership number as of March 2022 = 10,666) New website live	User engagement in the website design process to be undertaken ahead of 'go live' Q1-Q2 2023/24. MDG to consider a 'paper channel' for membership applications from potential members who do not have easy access to the current on-line channels.
Social Media Determine messaging for social media recruitment campaign to include: Messaging from governors/members – Why I became a member 2 x membership recruitment campaigns via the Trust's social media channels	Corporate Affairs / Communications / Membership Development Group Communications	September 2022 November 2022 / April 2023	Maintain overall membership number (+/- 1%) (Total public membership number as of March 2022 = 10,666)	Social media calendar and key messages reviewed and agreed by MDG in September 2022. Governors were asked to provide support messaging 'why I became a member' and 'why I became a governor'. A members' week held w/c 14 November 2022 via the Trust's social media channels to encourage member recruitment and showcase a number of governors. This will be repeated in April 2023. Messaging to advertise the next Council of Governors' meeting and

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
				<p>promote membership was shared on social media w/c 13 February 2023.</p> <p>Guidance for governors on social media channels utilised to be distributed to governors.</p>
<p>Review membership demographics via Task & Finish Group to identify underrepresented groups for targeted membership recruitment (Age, Ethnicity, Gender, Socio Economic Profile)</p> <p>Targeted recruitment activities to include: Presentation and/or Email recruitment promotion (dependent on most appropriate method) to:</p> <ul style="list-style-type: none"> • Stockport Colleges – Health & Social Care Courses • Stockport Local Authority – Community Champions (forum to be determined) • Stockport Homes • Equality, Diversity & Inclusion (EDI) BAME Forums/Community Groups (as identified in liaison with SFT EDI Lead) <p><i>NB – The number of ‘group/forums’ to be identified must be carefully considered as the relationship must be meaningful for all.</i></p>	<p>Corporate Affairs Team / Task & Finish Group</p> <p>Corporate Affairs Team / Governors / EDI Team</p>	<p>April 2022</p> <p>November 2022 – March 2023</p>	<p>Increase number of members in targeted demographic groups by +1%</p> <p>(Membership numbers as of March 2022</p> <p>Age: 16-21 = 26 22-29 = 688 30-39 = 410 40-49 = 646)</p> <p>BAME: Pakistani = 93 Chinese = 25 Mixed = 64 Black = 51</p> <p>At least 1 presentation / email campaign per month</p>	<p>Review of membership demographics completed in April 2022 – utilised to develop Action Plan.</p> <p>Underrepresented groups identified for targeted recruitment:</p> <ul style="list-style-type: none"> • Age 16-21, 22-29, 30-39, 40-49 • Black & Minority Ethnic (BAME) <p>MDG considered opportunities for engagement with established community groups and agreed to prioritise engagement with Community Champions. This was endorsed by the Council of Governors. A rota of interested governors compiled to enable 2/3 governors to attend the bi-monthly Community Champions Network meetings.</p>

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
				Further opportunities to be explored during 2023/24, inc. volunteers and opportunity to include governor/member related information in the Sector3 newsletter.
Aim: To develop an active and engaged membership				
Engagement				
Newsletter Include Governor Section in Stepping Up Newsletter, including: <ul style="list-style-type: none"> - Meet your Council of Governors - Why I became a governor - Governor activity - How to contact your governors - Council of Governors meetings 	Communications / Corporate Affairs / Membership Development Group	Summer 2022 Winter 2022/23	2 x Stepping Up Newsletters including Governor Section	Edition – Winter 2022/23, included: <ul style="list-style-type: none"> - 'Meet Your Governor' – Lead Governor - Election Results - Upcoming Meetings - Members' Event - Your Public Governors
Member Seminars Align national/local health and well-being campaigns with membership seminars to promote population health - Liaise with Communications Department regarding campaigns. Facilitate 1 x Virtual, 1 x Face to Face (subject to IPC guidance) members seminars Governor attendance at member seminars to promote governors and allow opportunity to seek feedback from members/public/staff	Corporate Affairs / Communications Corporate Affairs / Communications Governors	September 2022 December 2022 March 2023	2 x Members Seminars including evaluation	The first face to face member event held on 2 December 2022: <ul style="list-style-type: none"> - New Emergency & Urgent Care Campus Proposed event 27 March 2023 – Nutrition & Hydration aligned to National Nutrition & Hydration Week. Key feedback from December event to be incorporated.

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
<p>Engagement with Community Groups/Forums <i>(as identified as part of recruitment)</i></p> <p>Corporate Affairs to liaise with Board of Directors to identify a key theme which may be used to guide discussion. This may include a key strategic development/future plan or emergent matter from internal data sources.</p> <p>Establish a key link/rota for governor attendance at Community Group/Forums (as identified as part of recruitment initiatives) to seek feedback:</p> <p>Public</p> <ul style="list-style-type: none"> - Community Champions - Stockport Homes - Equality, Diversity & Inclusion BAME Forums <p>Staff</p> <ul style="list-style-type: none"> - Staff Network Groups <p><i>NB. In addition established public governor links with community groups / forums will provide opportunity for engagement, alongside appointed governor engagement with appointing organisation and informal networks.</i></p>	<p>Corporate Affairs / BoD / Membership Development Group</p> <p>Corporate Affairs / Governors</p>	<p>October 2022 – March 2023</p>	<p>Attendance at 1 group/forum per month</p>	<p>See above.</p> <p>Governor Engagement Report presented to MDG:</p> <ul style="list-style-type: none"> - Register of Contacts - Register of Engagement - Community Champions <p>Engagement with Community Champions endorsed by Council of Governors. A rota of interested governors compiled to enable 2/3 governors to attend the bi-monthly Community Champions Network meetings.</p> <p>2 governors attended Network meeting on 24 November 2022, and 3 governors attended meeting on 19 January 2023.</p>
<p>Register of Governor Engagement</p> <p>Develop a register of engagement and process to ensure record of patients, public and staff feedback received by governors, thus providing evidence of governors fulfilling their statutory duty to represent members and public.</p> <p>Register of engagement to be reviewed by Membership Development Group (quarterly) to identify trends and utilised to inform agenda item at subsequent Council of Governors meeting.</p>	<p>Corporate Affairs / Membership Development Group</p> <p>Corporate Affairs / Membership Development Group</p>	<p>October 2022</p> <p>December 2022 March 2023</p>	<p>Register of Engagement</p>	<p>Register template developed and shared with governors. Disseminated on 25 November 2022 and quarterly thereafter.</p> <p>Messaging to support register to facilitate completion on an on-going basis.</p>

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
Other				
Review of minimum age limit for members.*	Membership Development Group	October 2022	Recommendation (and approval of change if required) by Council of Governors	<p>Initial discussion via MDG held in September 2022. MDG agreed to pause any further developments while publication of the model Constitution was awaited.</p> <p>Notwithstanding the above, MDG agreed to consider the following in April: young people's engagement; impact of realignment of Stockport electoral ward boundaries on the Trust's existing public constituencies.</p>

Acknowledging the phased approach to achieving the aims of the Membership Strategy, the Membership Development Group has identified the below for opportunities for potential recruitment and engagement during 2023/24:

- Stockport Signpost for Carers
- SFT Charity – Key organisations through which SFT Charity connects
- Poster promoting governors' role and availability as access point to the Trust

The action plan is an iterative process and where further opportunities for recruitment and/or engagement are identified via the Corporate Affairs and Council of Governors, these can be considered in addition to activities highlighted above. This may include, for example, specific events and forums within a membership constituency.

* Any changes to the minimum age limit for members will require revision to the Trust's constitution, which subsequently will require approval by the Council of Governors and Board of Directors. The Trust's constitution will be reviewed in light of the new Health & Social Care Act, which will see the establishment of statutory Integrated Care Systems and dissolution of Clinical Commissioning Groups. Further to this, the Membership Development Group may also wish to consider public constituencies following the realignment of electoral wards.



Stockport
NHS Foundation Trust

Operational Planning 2023/24

Council of Governors, 22nd February 2023

Jonathan O'Brien

Executive Director of Strategy & Partnerships

Internal Planning Framework

In the autumn a Joint Planning Framework for Stockport & Tameside was agreed by the two Executive Teams, this:

- Established a single process for planning across the Trusts
- Sharing existing best practice
- Reduced duplication

The Framework sets out a schedule for planning activities throughout the year and a clear definition of roles and responsibilities to enable delivery of operational plans

This was refreshed prior to publication of planning guidance for 2023/24 with work carried out to develop a baseline position against respective 2022/23 plans in preparation.

Planning Guidance Overview

- NHSE planning guidance for 2023/24 published on 23 December alongside guidance on developing joint forward plans for each Integrated Care System (ICS)
- Focus on 3 key tasks for year ahead:
 - Recover core services & productivity
 - Make progress in delivering key ambitions in the Long Term Plan (LTP); and
 - Continue transforming the NHS for the future
- Series of national objectives were outlined which will form basis for assessment of performance of NHS alongside local system priorities

2023-2024 Priorities



Workforce

- Improved staff experience & retention
- Increased productivity
- Flexible working practices
- Regional education & training investment plans



Elective & Cancer Care

- Reduce OPFUs
- Increase productivity
- GIRFT & Model Hospital
- Choice agenda
- Priority cancer pathways
- Increase diagnostics via CDCs
- Lung Health checks



Urgent & Emergency Care

- Increase bed capacity
- Reduce MOATs
- Increase ambulance capacity
- Reduce handover delays



Community & Primary Care

- Urgent Community response
- Expand direct access
- Increased community pharmacy participation



Mental Health, LD & Autism

- Increased expenditure
- Workforce plan
- Improve data related to po health
- GP LD register
- LD& A workforce plans
- Autism diagnostic assessments



Population Health & Inequalities

- Prevention
- Innovation & partnership working
- Women's health strategy
- QI approach to reflect Core20PLUS5
- High intensity use services



Digital

- Population health management
- Digital tools for patients
- What Good Looks Like plans



Effective Use of Resources

- Efficiency savings
- Increase productivity
- Oversight & governance
- Reduction in costs (incl. agency, corporate, procurement & supply chain)



System working

- ICP strategies
- Joint Forward Plans
- Provider collaboratives & place-based partnerships

Recovering core services

- Focus on:
 - Improving ambulance response times and ED waiting times
 - Reducing long waits and cancer backlogs
 - Making it easier for people to access primary care services

- Specific actions set out for:
 - Urgent & emergency care
 - Community health services
 - Primary care
 - Elective care
 - Cancer
 - Diagnostics
 - Maternity & neonatal; and
 - Use of resources

Delivering key NHS LTP ambitions

- Key actions:
 - Continue to achieve the Mental Health Investment Standard by increasing expenditure on mental health services by more than allocations growth.
 - Develop a workforce plan that supports delivery of the system's mental health delivery ambition
 - Improve mental health data to evidence the expansion and transformation of mental health services, and the impact on population health, with a focus on activity, timeliness of access, equality, quality and outcomes data
- Specific actions set out for:
 - People with a learning disability and autistic people
 - Embedding measures to improve health and reduce inequalities
 - Investing in our workforce
 - Digital
 - System Working

Joint Forward Plans (JFPs)

- The National Health Service Act 2006 (as amended by the Health and Care Act 2022) requires Integrated Care Boards (ICBs) and their partner trusts to prepare five-year JFPs before the start of each financial year.
- Guidance issued on 23 December – systems have flexibility to determine their JFPs scope
- Legal responsibility for developing JFP lies with ICB and its partner trusts
- Delegated budgets – move towards ICBs taking on population healthcare budgets with pharmacy, ophthalmology & dentistry services fully delegated by April 2023
- Statutory joint committees of ICBs and NHS England will oversee commissioning of appropriate specialised services across multi-ICB populations from April 2023, ahead of ICBs taking on this delegated responsibility in April 2024.

GM System Approach

- GM System Boards to lead development of the narrative plan sections:
 - Cancer
 - Mental Health/LDA
 - UEC
 - Elective
 - Vulnerable Services
 - Clinical Support Services
- GM Planning Steering Group will coordinate triangulation of plans across activity, finance and workforce
- Sub Groups of the Steering Group, including workforce, finance, activity, primary care and population health to agree common assumptions
- Trusts to submit data to GM for collation and approval ahead of national submission deadlines
- Confirm & Challenge process between draft and final submission to challenge ambition across Trusts

GM assumptions

A number of GM assumptions/targets have been set out to support system delivery of the national priorities:

URGENT AND EMERGENCY CARE

- Reduce the No Criteria To Reside (NCTR) list to under 650 across the GM footprint, proportionately spilt across localities, in line with trajectory set through Discharge & Flow Group.
- Ensure that 100% of all handovers are within 60 minutes, as agreed with through the GM Handover collaborative.
- Increase physical bed capacity and sustain capacity funded through winter 2022/23, maintaining an average of 6071 G&A Beds across GM
- 92% bed occupancy or below for adult general & acute.
- 85% paediatric bed occupancy.
- 85% critical care bed occupancy for both adults and paediatrics.

ELECTIVE CARE

1. Deliver 120% of 2019/20 activity
2. Value weighted elective activity target 103% (as a % of 2019/20) – excludes secondary dental

GM assumptions

CANCER

- Reduce the volume of patients on active pathways to 1155 (individual Trust delivery expected as well as system delivery)
- Stretch target to reduce backlog to pre-covid levels, and weekly surgical treatment averages to 371 per week.

DIAGNOSTICS

- 95% of tests received within 6 weeks, by March 2025 – Intermediary target of 87% by March 2024 (Note: this is based on where we will be as per our already agreed trajectories to get to 95% by March 2025)
- Deliver activity levels required to achieve the agreed GM targets for cancer and elective recovery
- Pathology Networks. All provider Trusts to have installed Digital Pathology capability by March 2024. All Trusts to demonstrate a 10% efficient gain by using digital pathology by March 2025
- Imaging Networks. All provider Trusts to have introduced PACS (Picture Archive Communications System) based reporting by March 2024. All Trusts to demonstrate a 10% efficiency gain by March 2025.

MATERNITY

- Reduction in still births to a rate of 3.85 per 1000 registerable births in 2023/24
- Reduction in still births to a rate of 3.5 per 1000 registerable births in 2024/25
- Reduction of serious intrapartum brain injury to a rate of 1.0 per 1000 live births in 2023/24
- Reduction of serious intrapartum brain injury to a rate of 0.70 per 1000 live births in 2024/25
- Reduction in maternal mortality to a rate of 0.06 per 1000 in 2024/25
- Increase fill rates against funded establishment for maternity staff by 30% and reduce attrition by 10% in 2024/25

Progress to date

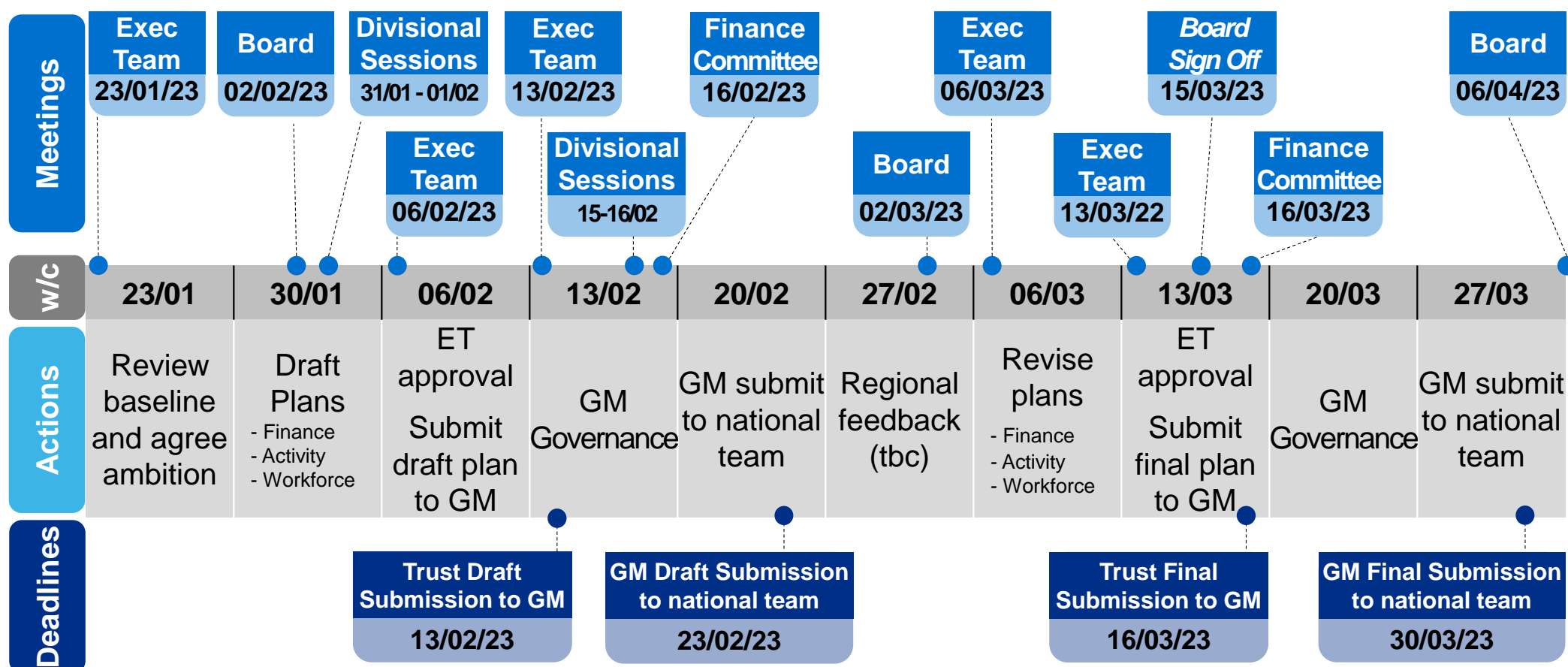
- Draft Workforce plan submitted to GM 9th February
- Draft Activity plan submitted to GM 13th February
- Draft Finance plan submitted to GM 15th February
- GM system submission to national team 23rd February
- GM Confirm and Challenge process between 27th Feb – 8th Mar, Stockport & Tameside have been paired together
- Particular challenge anticipated on key national targets and where Trusts may be an outlier against GM system assumptions
- Final Provider plans to be submitted to GM 16th March

Planning Timeline



Stockport

NHS Foundation Trust



Planning 2023/24

Meeting date	22 February 2023	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Confirmation of Nominations Committee Membership					
Presented by	Professor Tony Warne, Chair		Author	Rebecca McCarthy, Trust Secretary		

Recommendations made / Decisions requested

The Council of Governors is asked to note the membership of the Nominations Committee.

Executive Summary

The purpose of this report is to confirm the membership of the Nominations Committee.

As reported to the Council of Governors meeting on 14 December 2022, the term of office for two members of the Nominations Committee (Dr Tad Kondratowicz, Public Governor and Mr Richard King, Public Governor) would expire on 4 December 2022.

The Council of Governors was asked to review the membership of the committee and governors interested in becoming a member of the Nominations Committee were asked to submit self-nominations to fill the positions to the Deputy Company Secretary by 30 December 2022.

Two nominations were received from Mrs Sarah Thompson, Public Governor and Mr Richard King, Public Governor, including confirmation their suitability to be a member of the Committee. The Council of Governors is asked to note that the governors have consequently commenced as members of the Nominations Committee.

Governor appointments to the Committee are for a period of three years, provided the Committee member remains a Governor of the Foundation Trust. The membership of the Nominations Committee is currently as follows:

Name	Position	Term Ends
Sue Alting	Lead Governor	End of Lead Governor Term
Sarah Thompson	Public Governor	4 December 2025
Richard King	Public Governor	4 December 2025
Michelle Slater	Public Governor	3 January 2024
Chris Summerton	Public Governor	29 December 2024

Stockport NHS Foundation Trust

Meeting date	22 February 2023	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Appraisal Process for the Chair and Non-Executive Directors					
Presented by	Professor Tony Warne, Chair Dr Louise Sell, Senior Independent Director		Author		Rebecca McCarthy, Trust Secretary	

Recommendations made / Decisions requested

The Council of Governors is asked to:

- Review and approve the process for the appraisal of the Trust Chair and Non-Executive Directors
- Note the outcome of the Trust Chair and Non-Executive Director appraisals will be reported to the Nominations Committee and the Council of Governors in July 2023.

Executive Summary

This paper sets out background and details the proposed process and actions to be undertaken for the appraisal of the Chair and Non-Executive Directors of Stockport NHS Foundation Trust.

The appraisal process for the Chair reflects guidance issued by NHS England, ensuring alignment with the Chair's Competency Framework and opportunity for multi-source stakeholder feedback. The process concludes in an appraisal discussion between the Senior Independent Director and the Chair. The appraisal process for Non-Executive Directors comprises one to one discussion between the Chair and each Non-Executive Director to reflect on their activities and performance during the year and establish any areas for development over the next 12 months.

Learning from the processes undertaken for 2021/22 has been applied, acknowledging the Corporate Affairs Team will support the Lead Governor to obtain the wider views of the Council of Governors in advance of completing the Chair's assessment questionnaire, and a simplified Non-Executive Director appraisal document.

Following approval, the appraisal processes will commence in line with the timetable outlined and the outcome of both the Chair and Non-Executive Directors appraisals presented to the Nominations Committee, and subsequently to the Council of Governors in July 2023.

1. INTRODUCTION

- 1.1 The purpose of this report is to advise, and seek approval from the Council of Governors, regarding the process for the annual appraisal of the Trust Chair and Non-Executive Directors.

2. BACKGROUND

- 2.1 The Nominations Committee has responsibility, as delegated by the Council of Governors, to oversee the process for appraising the performance of the Chair and Non-Executive Directors.
- 2.2 In March 2020, the Nominations Committee agreed to adopt the NHS England guidance: '*Framework for conducting annual appraisals of NHS provider Chairs*'. The document sets out a standardised framework within which annual appraisals of the chair are applied and managed, ensuring alignment to the Provider Chair's Competency Framework, and multi-source stakeholder feedback.
- 2.3 This guidance informed the 2021/22 annual appraisal process of the Chair, approved by the Council of Governors in February 2022. The outcome of the annual appraisal was subsequently presented to the Nominations Committee and Council of Governors in June 2022.
- 2.4 In relation to Non-Executive Directors, the Council of Governors has established an appraisal process comprising one to one discussion between the Chair and each Non-Executive Director to reflect on their activities and performance during the year and establish any areas for development over the next 12 months.

Again, the outcome of the Non-Executive Director annual appraisals for 2021/22 was presented to the Nominations Committee and Council of Governors in June 2022.

3. CHAIR'S APPRAISAL 2022/23 - PROCESS

- 3.1 In line the NHS England framework for annual appraisal of NHS provider Chair's, and feedback received regarding the process undertaken for 2021/22, the process for the 2022/23 appraisal will include the following stages:

Stage 1: Appraisal preparation	At a pre-appraisal meeting, the Chair and the Senior Independent Director (SID) will review the assessment questionnaire (Appendix 1) and determine any additional areas of focus, consider and agree stakeholders to be invited to complete the assessment and agree final timetable.
Stage 2: Multisource assessment	<p>The SID, via the Trust Secretary, requests agreed stakeholders to complete the online assessment questionnaire on the Chair.</p> <p>The stakeholders will be determined by the SID and the Chair at the pre-appraisal meeting as stated above, and should include the Lead Governor, Non-Executive Directors, the Chief Executive, Executive Directors and identified system partners.</p>

	<p>The Corporate Affairs Team will support the Lead Governor to obtain the wider views of the Council of Governors in advance of completing the assessment questionnaire.</p> <p>Concurrently, the Chair will conduct an online self-assessment using the assessment questionnaire. The self-assessment will include commentary on any identified personal development or support needs.</p>
Stage 3: Evaluation	<p>The Trust Secretary will collate responses from the online assessment questionnaire.</p> <p>The SID will evaluate the collated stakeholder assessment questionnaires and may determine to meet with stakeholders to gain greater insight. The evaluation of stakeholders' views should then be considered alongside the Chair's own self-assessment.</p>
Stage 4: Appraisal output	<p>The Chair and SID will meet to discuss the outcome of the appraisal, identify any development needs and determine key objectives for the next 12 months.</p> <p>The key points arising from the appraisal discussion will be formally recorded by the SID and agreed by the Chair using the Chairs Appraisal Document (Appendix 2).</p> <p>The outcome of the appraisal will be summarised and presented to the Nominations Committee, and subsequently to the Council of Governors by the SID.</p> <p>A copy of the Council of Governors report will be sent to NHS England.</p>

3.2 DRAFT TIMESCALE FOR CHAIRMAN'S APPRAISAL

The timetable for the Chair's appraisal will be agreed by the Chair and the SID at the pre-appraisal meeting, with key headline dates as follows:

Activity	Date
Pre-appraisal meeting between the Chairman and SID	March 2023
Assessment questionnaires emailed to relevant stakeholders for completion	April 2023
Stakeholder assessment questionnaires completed	April 2023
Self-assessment completed by Chairman	April 2023
Summary of assessment questionnaires produced and provided to SID and Chair	May 2023

SID evaluation of all the collated stakeholder assessments, and meetings to seek further information/gain greater insight undertaken where required.	May 2023
The Chair and SID hold an appraisal discussion meeting and complete the associated documentation	June 2023
Summary report presented to the Nominations Committee by SID	5th July 2023
Summary report presented to the Council of Governors by SID	26th July 2023

4. NON-EXECUTIVE DIRECTORS' APPRAISAL PROCESS

- 4.1 The process proposed for the Non-Executive Directors' appraisal for 2022/23 includes the following key stages:

Stage 1	Each Non-Executive Director will prepare a Non-Executive Director Appraisal Document (Appendix 3) ahead of the one-to-one appraisal discussion with the Chair.
Stage 2	The Chair and each Non-Executive Director discuss performance and professional / personal development at appraisal discussion meeting, reflecting on their activities and performance in 2022/23 and any areas for development over the next 12 months.
Stage 3:	An agreed set of objectives and a personal development plan are identified for the year ahead.
Stage 4:	The Chair presents the outcome of each Non-Executive Directors' appraisal to the Nominations Committee, and subsequently to the Council of Governors.

4.2 DRAFT TIMESCALE FOR NON-EXECUTIVE DIRECTORS' APPRAISAL

Key headline dates for the Non-Executive Directors' appraisal are as follows:

Activity	Date
Non-Executive Directors complete Non-Executive Director Appraisal Document Part 1 & 2 and send to Chair	March 2023
One-to-one appraisal discussions take place between Chair and Non-Executive Directors and complete Non-Executive Director Appraisal Document Part 3 & 4	April/May 2023
Summary report presented to the Nominations Committee by the Chair	5th July 2023
Summary report presented to the Council of Governors by the Chair	26th July 2023

Chair Assessment Questionnaire

Stockport NHS Foundation Trust	
Name of Chair:	Professor Tony Warne
Name and role of appraisal facilitator:	Dr Louise Sell, Senior Independent Director
Assessment period:	2022/23

Part 1: Responses to statements relating to the NHS provider chair competencies framework

The following themed statements relate to the chair's impact and effectiveness in their role.

Please respond to as many of the statements as possible.

Where you are unable to provide a response, please leave the relevant field(s) blank.

Competency: Strategic	Strongly agree	Agree	Disagree	Strongly disagree
Leads the board in setting an achievable strategy.				
Takes account of internal and external factors to guide decision-making sustainably for the benefit of patients and service users.				
Provokes and acquires new insights and encourages innovation.				
Evaluates evidence, risks and options for improvement objectively.				
Builds organisational and system resilience, for the benefit of the population of the system as a whole.				

Competency: Partnerships	Strongly agree	Agree	Disagree	Strongly disagree
Develops external partnerships with health and social care system stakeholders.				
Demonstrates deep personal commitment to partnership working and integration.				
Promotes collaborative, whole-system working for the benefit of all patients and service users.				

Seeks and prioritises opportunities for collaboration and integration for the benefit of the population of the system as a whole.				
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Competency: People	Strongly agree	Agree	Disagree	Strongly disagree
Creates a compassionate, caring and inclusive environment, welcoming change and challenge.				
Builds an effective, diverse, representative and sustainable team focused on all staff, patients and service users.				
Ensures all voices are heard and views are respected, using influence to build consensus and manage change effectively.				
Supports, counsels and acts as a critical friend to directors, including the chief executive.				

Competency: Professional acumen	Strongly agree	Agree	Disagree	Strongly disagree
Owens governance, including openness, transparency, probity and accountability.				
Understands and communicates the trust's regulatory and compliance context.				
Leverages knowledge and experience to build a modern, sustainable board for the benefit of patients and service users.				
Applies financial, commercial and technological understanding effectively.				

Competency: Outcomes focus	Strongly agree	Agree	Disagree	Strongly disagree
Creates an environment in which clinical and operational excellence is sustained.				
Embeds a culture of continuous improvement and value for money.				
Prioritises issues to support service improvement for the benefit of the population of the system as a whole, ensuring patient safety, experience and outcomes remain the principal focus.				
Measures performance against constitutional standards, including those relating to equality,				

diversity and inclusion.				
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Part 2: Strengths and opportunities

Please highlight the chair's particular strengths and suggest any areas in which there are opportunities for increasing their impact and effectiveness.

Strengths: What does the chair do particularly well?

Opportunities: How might the chair increase their impact and effectiveness?

Part 3: Additional commentary

Please provide any additional commentary relating to any aspects of the chair's conduct, impact and effectiveness in their role.

Additional commentary

Thank you for participating. The completed questionnaire will be collated by the Trust Secretary and provided to the appraisal facilitator. All responses will be treated in the strictest confidence.

Appendix 2: Chairs Appraisal Document

Chair Appraisal Document

Stockport NHS Foundation Trust	
Name of Chair:	Professor Tony Warne
Name and role of appraisal facilitator:	Dr Louise Sell, Senior Independent Director
Assessment period:	2022/23

Part 1: Multisource stakeholder assessment outcomes (for completion by appraisal facilitator)

a. Summary of significant emergent themes from stakeholder assessments:

b. Highlighted areas of strength:

c. Identified opportunities to increase impact and effectiveness:

Part 2: Self-reflection (for completion by chair)

Summary of self-reflection on multisource stakeholder assessment outcomes:

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Part 3: Personal development and support (for completion by chair and appraisal facilitator)

Identification of personal development and/or support needs:

Description	Proposed intervention	Indicative timescale	Anticipated benefit/ measure of success

Part 4: Principal objectives (for completion by chair and appraisal facilitator)

Identification of three principal objectives for next 12 months:

Objective	Anticipated benefit/ measure of success	Anticipated constraints/ barriers to achievement

Part 5: Confirmation

Confirmation of key outcomes of appraisal discussion:		
Confirmed by	Signature	Date
Chair		
Appraisal facilitator		

Confirmation of Fit & Proper Person Requirements for Chair:		
Confirmed by	Signature	Date
Dr Louise Sell, Senior Independent Director		

Non-Executive Directors Annual Appraisal

Name	
Position inc. additional roles	
Review Year	2022/23
Date of Review	

Part 1. Self-assessment of performance against objectives for 2022/23

Role objectives
Personal objectives
Other contributions (e.g. Committee work)
Personal development (e.g. Training attended)

Part 2. Proposed objectives for 2023/24

Role objectives
Personal objectives
Personal development

Part 3. Chair's Overall Comments

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Non-Executive Director signature	Chair's signature	Date
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Stockport NHS Foundation Trust

Meeting date	22 nd February 2023	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Nominations Committee Report: Annual Review of Non-Executive Director (including the Chair) Remuneration					
Presented by	Director of People & Organisational Development		Author		Rebecca McCarthy, Trust Secretary	

Recommendations made / Decisions requested

The Council of Governors is asked to approve the recommendation from Nominations Committee that there is no increase to Non-Executive Director, including the Chairman, remuneration for 2023/24.

Executive Summary

The Council of Governors holds statutory responsibility for deciding, among other matters, the remuneration of the chair and the other non-executive directors. A Nominations Committee has been established to consider such matters in detail and make recommendations to the Council of Governors.

In accordance with its terms of reference, the Nominations Committee met on 14th February 2023 to undertake an annual review of remuneration for non-executive directors, including the Chair, for 2023/24.

Nominations Committee acknowledged the current guidance from NHSE/I on remuneration for non-executive directors and chairs (November 2019); the Trusts approach to alignment with the guidance, as approved by the Council of Governors in February 2022; and current remuneration levels in relation to the guidance.

The Nominations Committee acknowledged:

- No further guidance regarding non-executive director remuneration had been issued by NHS England
- Alignment with the NHS England approach had not adversely impacted on successful recruitment to new non-executive director positions, with the Trust attracting a strong field of candidates and recruiting to two non-executive directors' vacancies (and an Associate Non-Executive Director) during 2022/23
- The Trust's financial position, and that of the Greater Manchester (GM) system, remained significantly challenged
- Benchmarking had confirmed that, with a single exception, no other Trust in GM had

uplifted their non-executive director/chair remuneration in year.

On this basis the Nominations Committee agreed to recommend to the Council of Governors that no increase was applied to the non-executive director and chair remuneration levels for the year 2023/24.

NHS England have informally indicated that further guidance regarding non-executive directors and chairs remuneration will be issued in early 2023/24. At the time of publication, the Council of Governors is asked to note that the Nominations Committee may wish to review and make further recommendation to Council of Governors.

1. Introduction

- 1.1 The Council of Governors holds statutory responsibility for deciding, among other matters, the remuneration of the chair and the other non-executive directors. A Nominations Committee has been established to consider such matters in detail and to make recommendations to the Council of Governors.

2. Context & Current Arrangements

- 2.1 In November 2019, NHS England/Improvement (NHSE/I) published a '*Structure to align remuneration for chairs and non-executive directors of NHS trusts and NHS foundation trusts.*' The purpose was to address longstanding issues associated with significant disparities between the remuneration of chairs and non-executive directors of NHS Trusts and NHS Foundation Trusts.

- 2.2 The structure proposed a single uniform rate of £13,000 for non-executive directors, with local discretion to award supplementary payments of up to £2000 per annum in recognition of designated extra responsibilities.

For Chairs, proposed ranges were identified relative to the organisation size and complexity.

- 2.3 Whilst accepting the discretion afforded to Foundation Trusts, it was anticipated that NHS Foundation Trusts would adopt an alignment approach or explain why it would be inappropriate to do so.

- 2.4 In February 2022, the Nominations Committee comprehensively considered the NHSE/I document, with earlier consideration delayed due to the onset of the pandemic.

- 2.5 It was noted that alignment with the NHSE/I structure would not impact on the remuneration of the Chair of Stockport NHS Foundation Trust, which lay within the range for size and complexity of the organisation.

With respect to non-executive director's, alignment with the NHSE/I structure would reduce non-executive directors' remuneration by around £1,100.

- 2.6 Subsequently, the Council of Governors approved the Nominations Committee recommendation that any new non-executive director appointments were made in line with the framework. Any re-appointments, subject to outcome of a robust performance appraisal, would be made on existing salaries. Furthermore, supplementary payments of £1000 for non-executive directors undertaking the duties of Vice-Chair, Senior Independent Director and Chair of Audit Committee were approved.

- 2.7 The recommendation was primarily based on the following:
 - The Trust had been successful in attracting and appointing a high calibre of candidates for recent non-executive director positions; it was not anticipated that alignment with the NHSE/I structure would pose a risk to successfully recruiting to future non-executive director positions.
 - The Trust was financially challenged and would require a compelling reason for determining remuneration above that of the national structure moving forward.

- Available benchmarking information for non-executive director and chairs remuneration.

2.8 The current remuneration for Non-Executive Directors is as follows:

Non-Executive Directors (Appointed post-March 2022)	Non-Executive Directors (Appointed pre-March 2022)	Chair
£13,000	£14,164	£47,999.95

Supplementary payments of £1000 in place for non-executive directors undertaking the duties of Vice-Chair, Senior Independent Director and Chair of Audit Committee.

3. Remuneration Review for 2023/24

3.1 The Nominations Committee met on 14th February 2023 in accordance with its terms of reference, to consider remuneration for Non-Executive Directors, including the Chair, for 2023/24.

The Lead Governor, Sue Alting, was joined by Michelle Slater (Public Governor), Sarah Thompson (Public Governor) and Richard King (Public Governor). Prof. Tony Warne (Chairman), Amanda Bromley (Director of People & Organisational Development), Karen James (Chief Executive) and Rebecca McCarthy (Trust Secretary) supported the committee.

3.2 The Nominations Committee acknowledged:

- No further guidance regarding non-executive director remuneration had been issued by NHS England
- Alignment with the NHS England approach had not adversely impacted on successful recruitment to non-executive director positions, with the Trust attracting a strong field of candidates and recruiting to two non-executive directors' vacancies (and an Associate Non-Executive Director) during 2022/23
- The Trust's financial position, and that of the Greater Manchester (GM) system, remained significantly challenged
- Benchmarking had confirmed that, with a single exception, no other Trust in GM proposed uplift to their non-executive director/chair remuneration in anticipation of new guidance to be issued.

On this basis the Nominations Committee agreed to recommend to the Council of Governors that no increase was applied to the remuneration levels for the year 2023/24.

3.3 NHS England have informally indicated that further guidance regarding non-executive directors and chairs remuneration will be issued in early 2023/24. At the time of publication, the Nominations Committee may wish to review and make further recommendation to the Council of Governors.

Meeting date	22 February 2023	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	NHS Providers Governor Workshop – Feedback					
Presented by	Paper for Information	Author		Council of Governor Members		

Recommendations made / Decisions requested

Paper for Information

Executive Summary

NHS Providers held virtual governor workshops on 30 January 2023 and 9 February 2023. The topics covered included an update on current NHS policy, sharing good practice, exploring key governor duties, and breakout groups to provide opportunity for governors to share experiences and ask questions of colleagues and the NHS Providers' team.

The following governors attended the virtual workshops:

- Sue Alting, Lead Governor
- Val Cottam, Public Governor
- Gillian Roberts, Public Governor
- Karen Southwick, Staff Governor
- Sarah Thompson, Public Governor

This report highlights the topics that were covered at the workshops together with the associated key messages/learnings the governors attending wished to share with the Council of Governors. The slide presentations will be disseminated to all governors.

1. Update from NHS Providers Governor Support

Key Messages / Learnings:

- CQC 2019 Guide for Councils of Governors to be updated – Expected Autumn 2023
- Governor Focus Conference 23rd May 2023 at Kia Oval, London – 2 Governor places per Foundation Trust. Do we have anything we would like to showcase?

2. The NHS Update – A National Perspective on Topical Issues for Governors

Key Messages / Learnings:

- Long and medium term financial outlook remains a concern
- Capital investments limited as costs continue to rise, and prioritisation for capital spending remains complex, with significant backlog maintenance.
- New Hospital Programme unclear - Potential impact for Stockport NHS FT bid
- Operational Pressures: Record high A&E attendances and delayed discharges with social

care capacity a challenge – however elective care waiting list reduced for first time since Covid

- Workforce Pressures: Sustained pressure on staff impacting recruitment and retention. Industrial action may continue into 2023/24.
- Quality of care under sustained pressure, steps forward in focusing on safety and improvement but challenges in ability to delivery consistently high-quality care
- Transformation: First winter for ICSs to come, with collaborations developing and new partnerships with social care. Virtual Wards to be implemented and NHSE strategies for Urgent and Emergency Care and intermediate care.
- Failures in inpatient mental health care – enquiries commenced in particular cases (Essex and Greater Manchester), quality improvement programme fast-tracked
- Health inequalities must be addressed as central theme in local plans and ICB leadership
- Summary of challenges for Trust Boards adapting to new ICS structure – eg. Accountability to CQC as individual Trust and as part of ICS.

3. Breakout Discussions (An opportunity to share experiences and challenges, ask questions of each other and the NHS Providers team)

Key Messages / Learnings:

- Political environment challenging but slightly more stable.
- Level of challenge across all sectors are high, compounded by industrial action – workforce and finance topping list of concerns.
- Opportunity for staff governors to be released to attend meetings and training is under pressure.
- Need for greater understanding of challenges facing social care as effective social care is key to improvement of services of provider Trusts
- Governors should try to go out into their communities and address groups and individuals, asking for their experiences and views of their Trust and feed this back to Council of Governors and Non-Executive Directors.

Summary of NHS Providers Role and Activities:

- NHS Providers is a membership organisation open to all NHS hospital, mental health, community and ambulance trusts
- Influencing role – influencing the strategic direction of the NHS and other current priorities notably mental health, specialised services, community, primary care and ambulance
- Governor support and training - Range of bespoke and general training for governors available virtually and face to face.
- Professional networks
- Board development programme.