

**Meeting of the Council of Governors**  
**Thursday, 21 December 2023**  
 Held at 10.00am in Lecture Theatres, Pinewood Education Centre,  
 Stepping Hill Hospital

## AGENDA

Time			Enc	Presenting
10.00	1.	<b>Welcome &amp; Opening Remarks</b>		Chair
	2.	<b>Apologies for Absence</b>		Chair
	3.	<b>Declarations of Interests</b>		All
	4.	<b>Minutes of Previous Meeting – 7 September 2023</b>	✓	Chair
	5.	<b>Action Log – No outstanding actions</b>		Chair
10.10	6.	<b>Chair’s Report</b>	✓	Chair
10.30	7.	<b>Non-Executive Directors Report</b> - Including highlights from Board Committees	✓	Non-Executive Directors - Board Committee Chairs
10.50	8.	<b>Membership Development Group Report</b>	✓	Chair of Membership Development Group
11.00	9.	<b>Operational Challenges Update</b> - <i>Presentation at Meeting</i>		Director of Operations
11.20	10.	<b>Stockport Locality Update</b> - <i>Presentation Enclosed</i>	✓	Director of Transformation
<b>Governance</b>				
11.40	11.	<b>Nominations Committee</b> • <b>Review of Nominations Committee Membership</b>	✓	Chair
11.45	12.	<b>Confirmation of Lead Governor Appointment</b>	✓	Chair
11.50	13.	<b>Arrangements: Chair of Stockport NHS Foundation Trust</b>	✓	Chair
<b>Date, Time &amp; Venue of Next Meeting</b>				
	14.	28 February 2024, 3.30pm, Pinewood Education Centre, Stepping Hill Hospital		
<b>Papers for Information</b>				
	15.	Draft Annual Members Meeting Minutes	✓	

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	<b>16.</b>	Council of Governors: <ul style="list-style-type: none"><li>- Calendar 2023/24 &amp; 2024/25</li><li>- Attendance 2023/24</li></ul>	✓	
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**STOCKPORT NHS FOUNDATION TRUST**  
**Minutes of a Council of Governors Meeting**  
**Held on Thursday 7<sup>th</sup> September 2023, 2.30pm**  
**in Pinewood Education Centre, Stepping Hill Hospital**

**Present:**

Professor T Warne	Chair
Mr H Austin	Public Governor
Mrs Janet Browning	Public Governor
Mrs V Cottam	Public Governor
Mrs P Hancock	Staff Governor
Cllr K Holloway	Appointed Governor
Mr D Kirk	Appointed Governor
Dr T Kondratowicz	Public Governor
Mr T Moore	Public Governor
Mr A Nottingham	Public Governor
Mr J Pantall	Public Governor
Mr A Pinder	Staff Governor
Mr Muhammad Rahman	Public Governor
Prof. C Summerton	Public Governor
Mrs S Thompson	Public Governor

**In attendance:**

Dr S Anane	Non-Executive Director
Mr A Bell	Non-Executive Director
Mrs A Bromley	Director of People and Organisational Development
Mrs N Firth	Director of Nursing
Mr J Graham	Chief Finance Officer
Mr D Hopewell	Non-Executive Director
Mrs K James	Chief Executive
Dr M Logan-Ward	Non-Executive Director
Dr A Loughney	Medical Director
Mrs R McCarthy	Trust Secretary
Mrs J McShane	Director of Operations
Mrs M Moore	Non-Executive Director
Dr L Sell	Non-Executive Director
Mr Meb Vadiya	Non-Executive Director

Ms Dawn Watson	External Auditor, Mazars
Ms Karen Murray	External Auditor, Mazars

Mrs J Wild	Minute Taking
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**Apologies:**

Mrs S Altng	Appointed Governor
Mr R King	Public Governor
Mr D McAllister	Staff Governor
Mrs G Roberts	Public Governor
Mrs M Slater	Public Governor
Mrs K Southwick	Public Governor

Ref	Item	Action
28/23	<b>Welcome &amp; Apologies for Absence</b> The Chair welcomed everyone to the meeting. Apologies for absence from governors were noted as above.	

	<p>Apologies were also received from:  J O'Brien, Director of Strategy &amp; Partnerships  C Parnell, Director of Communications and Corporate Affairs  B Fraenkel, Non-Executive Director</p> <p>The Chair informed the Council of Governors that the nominations phase of the governor elections had concluded. He confirmed that 4 nominations had been received for the 4 vacancies within the Heatons &amp; Stockport West public constituency, noting Prof. Chris Summerton and Mr Tad Kondratowicz would continue as governors, alongside 2 newly elected governors. The Chair confirmed 1 nomination had been received for the Tame Valley &amp; Werneth by-election, with 1 vacancy remaining. He added that a contested election was underway for the by-election for 1 vacancy in the Marple &amp; Hazel Grove public constituency. The Chair confirmed all new governors' term of office would commence on 6 October 2023.</p> <p>The Chair thanked Mr Jamie Hirst, Public Governor, and Mr Michael Cunningham, Public Governor, who had recently stood down.</p>	
<b>29/23</b>	<p><b>Amendments to Declaration of Interests</b>  There were no declarations of interest.</p>	
<b>30/23</b>	<p><b>Minutes of Previous Meeting</b>  The minutes of the previous meeting held on 7 June 2023 were agreed as a true and accurate record of the meeting.</p>	
<b>31/23</b>	<p><b>Action Log</b>  There were no outstanding actions noted from the action log.</p>	
<b>32/23</b>	<p><b>Chair's Report</b>  The Chair presented the Chair's Report providing reflections on recent activities within the Trust and wider health and care system including:</p> <ul style="list-style-type: none"> <li>• External partnerships</li> <li>• Trust activities</li> <li>• Strengthening board oversight.</li> </ul> <p>The Chair specifically provided update regarding Reinforced Autoclaved Aerated Concrete (RAAC) within buildings. He confirmed a RAAC survey had been completed in January 2021, and identified RAAC in one building (boiler house) on the Stockport NHS Foundation Trust hospital site. He confirmed immediate steps had been taken to support the RAAC and protect the services located within the boiler house, with a long-term solution to remove the RAAC to be presented to the Board in October 2023. He added that an asbestos survey had also been completed with any asbestos sealed, capped or removed. Cllr Holloway confirmed there were no schools within the Stockport area with RAAC.</p> <p>In relation to the recent trial of Lucy Letby, the Chair provided an overview of the governance in place at the Trust with respect to mortality and learning from deaths. Cllr Holloway confirmed that child death reviews took place for all children resident in Stockport, with a report subsequently presented to the Health &amp; Well Being Board for assurance. The Medical Director highlighted processes in place within the Trust, including the Perinatal Mortality Review meeting, and confirmed that no concerns were noted for the Trust.</p> <p><b>The Council of Governors received and confirmed the Chairs' Report.</b></p>	
<b>33/23</b>	<p><b>Non-Executive Directors Report</b></p>	

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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.

#### Finance

The Council of Governors acknowledged the Trust's position as a deficit of £9.3m at the end of Quarter 1 2023/24, which was adverse to plan by £0.9m, primarily due to industrial action, 2023/24 pay award costs and high costs of temporary staffing to support additional demand.

The Council of Governors were informed of a significant risk to achievement of the Greater Manchester Integrated Care System (GM ICS) financial plan, which was subject to regional and national oversight from NHS England. The Council of Governors were informed that a review of the year-end forecast position was currently underway.

#### Operational Performance

The Council of Governors were informed that the Trust continued to perform below the national core operating standards, albeit benchmarked well across GM. The Council of Governors noted the ongoing challenges to patient flow and no criteria to reside (NCTR). It was highlighted that the internal 'Programme to Flow' was positively influencing patients' length of stay, however the number of out of area patients with no criteria to reside was significant, with costs incurred to support these patients.

#### People

The Council of Governors acknowledged performance in relation to attendance (sickness absence) was within target.

The Council of Governors were informed that bank and agency expenditure remained an area of concern, primarily due to open escalation beds, industrial action and vacancies. It was noted that the Trust continued to focus on agency expenditure, with authorisation procedures in place, and initiatives to support recruitment.

In response to a query from Dr Kondratowicz, Public Governor, around staff confidence in raising concerns, the Chair highlighted that a new Freedom to Speak Up Guardian (Nadia Walsh) had commenced in post, focussing on raising her profile across the organisation. The Director of People & OD highlighted several other mechanisms for staff to raise concerns, including with their Line Manager, walkarounds by Board members and engagement sessions such as 'Big Conversations'. The Director of People & OD confirmed that Freedom to Speak Up featured in mandatory training for all colleagues, with different levels required for colleagues dependent on their role.

#### Quality

The Council of Governors acknowledged the continued improvement work within the maternity service, with positive assurances of key workstreams.

The Council of Governors were informed that sepsis antibiotic administration continued to perform below target with learning from other organisations being pursued to identify improvement opportunities. It was noted that no harms had been identified in line with this.

The Council of Governors were informed of improvements in relation to the complaints response rate, with some divisions having achieved a 100% response rate.

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	<p>Prof. Summerton, Public Governor, sought further assurance in relation to HSMR and the mortality risk for Ward E3 as discussed at the Board of Directors. The Medical Director provided contextual information regarding the HSMR measure, which would remain a feature within the Quality &amp; Safety performance report. He confirmed the metric had remained 'above expected' for some time at the Trust, with a series of deep dives into specific clinical areas taking place to understand this better. He commented that areas for improvement had been identified, albeit no significant failings in care identified through the deep dives. The Medical Director commented that the Trust was focussing on additional software to capture co-morbidities and the appropriate coding in relation to deaths, as this was likely contributing to the position. The Medical Director provided further contextual information regarding the mortality risk for Ward E3. He confirmed that, following review of data at Executive Director and divisional level, the risk score had reduced. He confirmed that further review of mortality data would be considered at Patient Safety Group in October 2023, with outcome subsequently reported to the Quality Committee and Board of Directors.</p> <p><u>Audit Committee</u> The Council of Governors received an update on key matters and reports considered by the Audit Committee. The Chair of the Audit Committee specifically highlighted that all year-end matters, including the Annual Report 2022/23, Annual Governance Statement, and Annual Accounts had been reviewed and recommended to Board for approval. He confirmed the Audit Completion Report had been received including an unqualified opinion on the financial statements, and that the Value for Money work identified a significant weakness in relation to financial sustainability, based on submission of a deficit financial plan for 2023/24.</p> <p><b>The Council of Governors received and noted the Non-Executive Directors Report.</b></p>	
34/23	<p><b>Membership Development Group Report: Membership Action Plan 2023/34</b></p> <p>The Chair of the Membership Development Group (MDG), Mr Howard Austin, Public Governor, presented a report detailing key discussions from the meeting on 21<sup>st</sup> August 2023 and key initiatives to support implementation of the Membership Strategy 2022-25.</p> <p>Mr Austin confirmed that, following a review of membership demographics, the MDG had agreed to focus on the 16-21 age group for targeted recruitment during 2023/24 to include exploring engagement with local college's.</p> <p><b>The Council of Governors received and noted the Membership Development Group Report.</b></p>	
35/23	<p><b>Quality Accounts 2022/23</b></p> <p>The Medical Director and Chief Nurse co-presented the Quality Accounts 2022/23 focussing on the delivery of priorities for improvement. It was confirmed that the Quality Accounts had been produced in line with NHS England guidance and had been approved by the Quality Committee and Board of Directors, with the full report available on the Trust website.</p> <p>In response to a query from Mr Pantall, Public Governor, in relation to patient communication and experience, the Chief Nurse confirmed that the Patient Experience Group had been established to consider issues relating to the patient experience agenda, reporting to the Quality Committee.</p>	

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	<b>The Council of Governors received and noted the Quality Accounts 2022/23.</b>	
<b>36/23</b>	<p><b>Stockport NHS Foundation Trust Annual Report &amp; Accounts 2022/23</b> The Chair presented the Trust's Annual Report &amp; Accounts 2022/23 which set out the Trust's key challenges and achievements for the year. The Chair acknowledged the contribution of Corporate Affairs and Finance teams in preparation of the Annual Report &amp; Accounts, which had been signed off by the Board of Directors and subsequently laid before Parliament.</p> <p><b>The Council of Governors received and acknowledged the Trust Annual Report &amp; Accounts 2022/23.</b></p>	
<b>37/23</b>	<p><b>Presentation of the Annual External Audit 2022/23 – Independent Auditor's report to the Council of Governors of Stockport NHS Foundation Trust</b> Ms Murray &amp; Ms Watson, Mazars Auditors, presented the Independent Auditor's report in relation to the Annual External Audit 2022/23 to the Council of Governors.</p> <p>Ms Murray confirmed the positive relationship with the Finance Team, the high quality of the draft accounts and that all deadlines for the year end audit process had been met without significant issues.</p> <p>Ms Murray confirmed an unqualified audit opinion had been issued on the financial statements, with two low risk recommendations relating to IT controls to strengthen the Trust's systems. With regards to Value for Money work, Ms Murray confirmed that one continuing recommendation had been reported regarding the Trust's significant cumulative deficit and lack of plans to address underlying annual deficits without additional funding. She acknowledged that in relation to strengthening the financial position, the recommendation acknowledged that work must take place with partners across the GM ICS and Local Authority to find ways to reduce the Trust's cost base, at the same time as keeping sustainable services.</p> <p>Ms Murray confirmed the Annual Report, including Annual Governance Statement, had been reviewed and were largely compliant with the extensive NHS England requirements.</p> <p>In relation to a query from Mr Pantall, Public Governor, around the understanding of performance within the community sector, the Chief Executive acknowledged that performance standards were not as extensive as within the acute sector, however confirmed that appropriate reporting was provided at various operational groups/committees across the Trust.</p> <p>In response, to Mr Pantall, Public Governor, seeking further understanding of cyber security issues, Ms Murray provided further contextual information regarding the IT recommendations, which focussed on timely removal of leavers from all IT systems to prevent unauthorised access. The Chief Finance Officer provided broader information regarding specialist advice sought from MIAA to test cyber security within the Trusts systems.</p> <p>Ms Murray thanked the Finance Team and Audit Committee for their continued support.</p> <p><b>The Council of Governors received and noted the Independent Auditor's report.</b></p>	

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	<i>Mrs Moore and Dr Sell (Non-Executive Directors) left the meeting for the Reappointment of the Non-Executive Directors item.</i>	
<b>38/23</b>	<p><b>Nominations Committee Report – Reappointment of Non-Executive Directors</b></p> <p>The Chair presented the report from the Nominations Committee including recommendation to reappoint Mrs Mary Moore and Dr Louise Sell as Non-Executive Directors at Stockport NHS Foundation Trust for a further term of office of 3 years, commencing on 1<sup>st</sup> October 2023 to 30<sup>th</sup> September 2026.</p> <p>The Chair highlighted the substantial contribution both Mrs Moore and Dr Sell had made to the Board of Directors and the organisation.</p> <p>In relation to recent NHS England guidance, the Chair informed the Council of Governors that future appointments would require engagement and inclusion of the NHS England Regional Office.</p> <p><b>The Council of Governors approved the reappointment of Mrs Mary Moore and Dr Louise Sell as Non-Executive Directors of Stockport NHS Foundation Trust for a further term of office of 3 years, commencing on 1st October 2023 to 30th September 2026.</b></p>	
	<i>Mrs Moore and Dr Sell returned to the Council of Governors meeting.</i>	
<b>39/23</b>	<p><b>Lead Governor Appointment Process</b></p> <p>The Council of Governors were asked to review and confirm the process for appointment of a Lead Governor concluding at the next Council of Governors meeting on 21<sup>st</sup> December 2023.</p> <p>Interested Governors were asked to submit a Nomination Form for the Lead Governor role to the Deputy Company Secretary by Friday 29<sup>th</sup> September 2023.</p> <p><b>The Council of Governors approved the process for appointment of a Lead Governor.</b></p>	
<b>40/23</b>	<p><b>Process for Appointment of the Trust’s External Auditor</b></p> <p>The Council of Governors were asked to approve the proposed approach for the appointment of External Auditors and request governors’ express interest in joining the External Audit Appointment Working Group to the Deputy Trust Secretary by 21<sup>st</sup> September 2023.</p> <p><b>The Council of Governors approved the proposed approach for the appointment of External Auditors and the request for expressions of interest in relation to the External Audit Appointment Working Group.</b></p>	
<b>41/23</b>	<p><b>Papers for Information</b></p> <ul style="list-style-type: none"> <li>▪ Draft Annual Members’ Meeting Agenda 2023</li> <li>▪ Council of Governors’ Calendar 2023/24 &amp; Attendance</li> </ul> <p><b>The above papers were received by the Council of Governors.</b></p>	
<b>42/23</b>	<p><b>Any Other Business</b></p> <p>Dr Kondratowicz, Public Governor, noted the unsuccessful bid for the new hospital programme, and enquired as to how the message had been communicated and received by colleagues. The Chief Executive confirmed that, although not successful, the Trust was working closely with the Local Authority, and continued to pursue alternative options for a new hospital with other partners. The Chair also noted the introduction of a national</p>	

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	procurement approach to new hospitals; however, Stockport NHS Foundation Trust were not currently featured on this list at present.	
<b>43/23</b>	<b>Date, time, and venue of next meeting</b> Thursday 21 <sup>st</sup> December 2023, 10.00am Pinewood Education Centre, Stockport NHS Foundation Trust	

Signed

Date

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<b>Meeting date</b>	21 <sup>st</sup> December 2023	<b>Public</b>	X	<b>Agenda Number</b>	06
<b>Meeting</b>	Council of Governors				
<b>Report Title</b>	Chair's Report				
<b>Director Lead</b>	Prof. Tony Warne, Chair	<b>Author</b>	Prof. Tony Warne, Chair		

<b>Paper For:</b>	<b>Information</b>	X	<b>Assurance</b>		<b>Decision</b>	
<b>Recommendation:</b>	<b>The Council of Governors is asked to note the contents of the Chair's Report</b>					

**This paper relates to the following Annual Corporate Objectives**

	1	Deliver personalised, safe and caring services
	2	Support the health and wellbeing needs of our community and colleagues
	3	Develop effective partnerships to address health and wellbeing inequalities
	4	Develop a diverse, talented and motivated workforce to meet future service and user needs
	5	Drive service improvement through high quality research, innovation, and transformation
	6	Use our resources efficiently and effectively
	7	Develop our estate and digital infrastructure to meet service and user needs

**The paper relates to the following CQC domains**

	Safe		Effective
	Caring		Responsive
X	Well-Led		Use of Resources

**This paper relates to the following Board Assurance Framework risks**

	PR1.1	There is a risk that the Trust does not deliver high quality care to service users
	PR1.2	There is a risk that patient flow across the locality is not effective
	PR1.3	There is a risk that the Trust does not have capacity to deliver an inclusive elective restoration plan
	PR2.1	There is a risk that the Trust is unable to sufficiently engage and support our people's wellbeing
	PR2.2	There is a risk that the Trust's services do not fully support neighbourhood working
	PR3.1	There is a risk in implementing the new provider collaborative model to support delivery of Stockport ONE Health & Care (Locality) Board priorities
	PR3.2	There is a risk that the Trust does not deliver a joint clinical strategy with East Cheshire NHS Trust
	PR4.1	There is a risk that, due to national shortages of certain staff groups, the Trust is unable to recruit and retain the optimal number of staff, with appropriate skills and values

PR4.2	There is a risk that the Trust's workforce is not reflective of the communities served
PR5.1	There is a risk that the Trust does not implement high quality transformation programmes
PR5.2	There is a risk that the Trust does not implement high quality research & development programmes
PR6.1	There is a risk that the Trust does not deliver the annual financial plan
PR6.2	There is a risk that the Trust does not develop and agree with partners a multi-year financial recovery plan
PR7.1	There is a risk that the Trust does not implement the Digital Strategy to ensure a resilient and responsive digital infrastructure
PR7.2	There is a risk that the estate is not fit for purpose and/or meets national standards
PR7.3	There is a risk that the Trust does not materially improve environmental sustainability
PR7.4	There is a risk that there is no identified or insufficient funding mechanism to support the strategic regeneration of the hospital campus

**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.

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## 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

The invasion and war in Ukraine continues' and as I write this report. Since I last reported to the Council of Governors, the news from the Middle East and conflict between Israel and Hamas is equally troubling. The origins of both these conflicts are many years old, and resolution for both appears a long way off. However, I'm certain that standing together, love and not hate will eventually triumph. Until then we should keep all those caught up in these conflicts around the world, in our thoughts and prayers.

Since I last reported to the Council of Governors, I took two weeks off on holiday to visit India and Nepal, so was unable to do some of the things I would normally hope to do here at the Trust. However, I was pleased to be able to attend the NHS Providers Annual conference in November. There were nearly 900 delegates on each of the two days, and there was a full programme of presentations from leading health and care professionals, commentators and politicians.

Following a Cabinet reshuffle immediately before the conference Victoria Atkins, was promoted to Secretary of State for Health and Social Care - the fifth in the last two years. She couldn't attend in person but had sent a pre-recorded video. Resolving the doctors' industrial action was something she absolutely saw as a critical first task, which was very encouraging to hear. She also acknowledged there was much more that requires addressing. The NHS is contending with significant pressures from all sides. A tired and often burnt-out workforce, with massive vacancies still to fill (125,000); increasing demands across all services (October saw more than 2.2 million people attending A&E departments); a post-pandemic long waiting list legacy (nearly eight million people); and of course, continuing financial pressures (including a need to revolutionise capital funding across the whole NHS).

Victoria also noted that she would need to work across the various government departments if health inequalities are to be addressed and thus reduce the demand on health care services. Likewise, the acute sector must find ways to shift more of its resources to primary and community care, so that people can be better supported in more appropriate settings and ideally closer to, or in their own home.

Amanda Pritchard, Chief Executive of NHS England also gave a keynote speech. She was passionate but challenging, well-informed and quoted, by name, many folk that she had met over the past year who were doing incredible things in making a difference to others. It was a stellar performance by someone demonstrating the leadership qualities so needed in a world challenged by so many inter-related and seemingly intractable problems.

Wes Streeting, the Shadow Secretary of State for Health and Social Care, speaking after Amanda, cautioned us that if we keep increasing the funds for the NHS, and the NHS continues to push the boundaries of what a healthcare system should be doing, the rest of the public sector is likely to

suffer. Every £1 extra for the NHS is £1 less for education, defence, the police and so on. He wanted to see transformation and reform, but wasn't referring about more structural reform, so ICS are here to stay. His reform ideas were about making a greater investment in primary and community services and tackling social care provision.

Finally, from the conference was a speaker who spoke about the interrelated concepts of '*wilful blindness*', '*organisational conformance*', '*whistleblowing*' and why the NHS appears unable to learn from the mistakes of others, even when these are set out clearly in extensive reviews. It was compelling challenge. She was the wonderfully straight-talking Margaret Heffernan. You can gain a sense of her presentation here, from a similar key-note paper a year ago. Her talk starts at 09.30 mins into this film - <https://youtu.be/PPJYGqpaBak?si=9Vwj4mSv52L6DGY9>

Closer to home, I visited St Annes Hospice, both to visit the service and also to meet with other Chairs from Sector 3, Mastercall, Viaduct, Pennine Care, Health Watch, and Stockport Homes to continue our discussions on working more closely together across Stockport.

Like all NHS provider organisations within the Greater Manchester Integrated Care System (GM ICS), we have been working with Price Waterhouse Cooper (PwC), colleagues in examining and exploring how to improve our financial position as a system and more effectively lean into the elective recovery programme challenge. These have been challenging meetings and have required a great deal of extra work from Executive Director colleagues and their teams. They have also been very valuable in helping us better understand the drivers contributing to our deficit budget. This programme of work will continue into the new year.

The GM Chairs met during November, and Mark Fisher, CEO GM ICB, joined the meeting to discuss some of the current issues facing provider organisations and the ICB. I chaired my first North West Region NHS Providers meeting for chairs and CEO's at which Julian Hartley, CEO of NHS Providers, presented their latest views of health policy, politics, and challenges – it was an interesting insight into the full presentation he made a week later at the National Conference.

I was able to attend the Stockport Health and Wellbeing Board. It was a packed agenda. As well as reports on Safeguarding, the Annual Health Watch Report there were two extremely comprehensive reports that looked back (Covid 19 – Stockport Experience) and looked forward (the Stockport Food Plan). Both were very powerful accounts, but the food plan was the one that stood out for me. It covered everything from growing and consuming food, obesity, waste, food poverty and provided an evidence-based approach to tackling each of these aspects. It was a great example of how a multi-agency and multi-professional approach has to be the way we develop future health and wellbeing promoting services across Stockport. Both these reports, and others, can be found here:

<https://democracy.stockport.gov.uk/documents/g29219/Public%20reports%20pack%2029th-Nov-2023%2014.00%20Health%20Wellbeing%20Board.pdf?T=10>

### 3. TRUST ACTIVITIES

It was very sad to hear of the loss of two great supporters of SFT. John Pantall sadly passed away after a brief illness and stay in the hospital he gave so much to over many years. He was an

appointed Governor and then an elected Governor for many years. Like many of us, I will miss his observational challenges, always evidence based and hearing from his wonderful store of stories.

The other sad loss was of Imelda Mounfield. Imelda had been a patient here and at the Christie. With her husband, Gary 'Mani' Mounfield former bassist with the rock band the Stone Roses, they staged an auction of pop and rock memorabilia raising an incredible £100,000, half of which was donated to our Stockport NHS Charity. A swell as raising this incredible sum, the event also raised awareness of bowel cancer and early detection. Both Mani and Imelda were able to join us at this year's Making a Difference Awards and it was great to be able to publicly acknowledge their generosity and support for the Trust.

The night of celebration and recognition was held in the sumptuous and magnificent Stockport Town Hall Ballroom. Over 300 colleagues took part, and although not everyone got an award, every nomination showcased some incredible activities, and or people, all of whom had made a difference to others. The icing on the cake for me was the singing waiters – I'm not sure how that gets topped next year!

I spent a fascinating 2 hours attending the current round of Civility Saves Lives training – great facilitators and a very interactive session. I would urge all colleagues to sign up for one of the future sessions.

I have been able to get out and about and visiting colleagues since I last reported to the Board. The first visit was to our Fracture Liaison Service. Simply brilliant, proactive health care at its best. The very small team make such a difference to the lives of women (and men) at risk of future fractures due to disease, age or trauma.

I also spent an afternoon with our School Nursing colleagues. Part of my time with them was spent observing the Crucial Crew afternoon. For 15 minutes at a time, groups of 9,10 and 11-year-olds sat with a range of agencies that helped them understand how to stay safe on the railways, water, on buses and so on. Our School Nurses were there discussing the dangers of vaping. I was impressed by the enthusiasm, knowledge, and confidence of the young children. Another brilliant example of working upstream in maintaining people's health and wellbeing. It was also a fun event too.

I chaired three Consultant appointment panels, and we were able to appoint to all posts: one in Paediatrics; one in Gastroenterology; and two in Histopathology.

Finally, I would like to acknowledge and thank colleagues for the response they were able to make to the closure of Outpatient B facilities. The business continuity plans was activated, but it was the generosity of spirit, the flexibility in approach and the creativity of colleagues that really did make the difference in a difficult situation. Pride is sometimes an over used word, but as events unfolded following the decision to close the building, I could not have been prouder of the colleagues we work with. A magnificent effort, thank you to all those involved.

#### **4. STRENGTHENING BOARD OVERSIGHT**

We were able to hold our second externally facilitated Board Development event. The session focussed on how we interact as a Board in a Board meeting. The data were illuminating. There are two more sessions planned over the next six months.

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<b>Meeting date</b>	21 December 2023	<b>Public</b>	X	<b>Agenda Number</b>	07
<b>Meeting</b>	Council of Governors				
<b>Report Title</b>	Non-Executive Directors Highlight Report				
<b>Director Lead</b>	Non-Executive Directors	<b>Author</b>	Rebecca McCarthy, Trust Secretary		

<b>Paper For:</b>	<b>Information</b>		<b>Assurance</b>	X	<b>Decision</b>	
<b>Recommendation:</b>	The Council of Governors are asked to review the Non-Executive Directors Highlight Report and request any further clarification.					

**This paper relates to the following Annual Corporate Objectives**

X	1	Deliver personalised, safe and caring services
	2	Support the health and wellbeing needs of our community and colleagues
	3	Develop effective partnerships to address health and wellbeing inequalities
	4	Develop a diverse, talented and motivated workforce to meet future service and user needs
	5	Drive service improvement through high quality research, innovation, and transformation
	6	Use our resources efficiently and effectively
	7	Develop our estate and digital infrastructure to meet service and user needs

**The paper relates to the following CQC domains**

	Safe		Effective
	Caring		Responsive
X	Well-Led		Use of Resources

**This paper relates to the following Board Assurance Framework risks**

X	PR1.1	There is a risk that the Trust does not deliver high quality care to service users
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X	PR2.2	There is a risk that the Trust's services do not fully support neighbourhood working
	PR3.1	There is a risk in implementing the new provider collaborative model to support delivery of Stockport ONE Health & Care (Locality) Board priorities
	PR3.2	There is a risk that the Trust does not deliver a joint clinical strategy with East Cheshire NHS Trust

X	PR4.1	There is a risk that, due to national shortages of certain staff groups, the Trust is unable to recruit and retain the optimal number of staff, with appropriate skills and values
X	PR4.2	There is a risk that the Trust's workforce is not reflective of the communities served
	PR5.1	There is a risk that the Trust does not implement high quality transformation programmes
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X	PR7.3	There is a risk that the Trust does not materially improve environmental sustainability
X	PR7.4	There is a risk that there is no identified or insufficient funding mechanism to support the strategic regeneration of the hospital campus

### 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 to the organisational objectives to be monitored, and the type of improvement needed to be determined. A Key Issues 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 between October - November 2023, and the Board of Directors meeting that took place in December 2023.

Curtis Soile  
14/12/2023 12:43:45

## 1. Finance

- A balanced financial plan for the Greater Manchester Integrated Care System (GM ICS) has been submitted for 2023/24. The Trust's financial plan, as part of this, is a deficit of £31.5m, with cost improvements (CIP) of £26.2m. For the GM ICS financial plan to be delivered there are further system efficiencies of £130m required.
- There is a significant risk to achievement of the GM ICS financial plan, which has been subject to national oversight from NHS England, and is now subject to a formal turnaround process being led by Price Waterhouse Cooper (PwC). The Trust is fully engaged in this process.
- At Month 7, the Trust position is £2.0m adverse to plan – a deficit of £20.7m. The drivers of the movement from plan are the impact of industrial action, undelivered efficiency savings, the Elective Recovery Fund (ERF) estimated penalty (funding for delivery of elective activity), and the cost of the pay award 2023-24 above expected funding. In addition, the Trust continues to operate with additional capacity open in escalation beds and enhanced staffing levels to support the high level of attendances in the emergency department and patients requiring additional support.
- The Board of Directors does not yet have full assurance regarding the financial outturn, with an acknowledgement that this was being addressed by the GM ICS turnaround review.

## 2. Operational Performance

- The Trust continues to perform below the national core operating standards for A&E 4-hour standard, Cancer 62-day standard, 18-week Referral to Treatment (RTT) standard, and Diagnostic 6-week wait standard, albeit benchmarks comparatively well within Greater Manchester for the A&E 4-hour standard.
- Drivers of the performance continue to be the challenges around patient flow and no criteria to reside (NCTR) alongside increasing demand.
- Industrial action has had a significant adverse impact on elective restoration, particularly around cancer and elective performance. There is a need to work with GM regarding mutual aid, albeit, to date, this has not been possible to access.
- Further high level information will be reported regarding the key actions in place to move the dial to meet operational performance trajectories, including underlying assumptions, and implications if the targets were not met.

## 3. People

- Sickness Absence is above target for October, although an increase was expected due to seasonal illness. The Trust continues to focus on improvements and supporting the escalation of complex cases. The Trust is offering a free support service for staff experiencing mental health issues, with mental health one of the main contributors to staff not being in work.
- Although still above the target, both workforce turnover and mandatory training have shown significant improvement for consecutive months.
- As part of the GM turnaround process, there has been a focus on reduction of bank and agency costs. Agency costs were reported as lower than average for the fifth month running in October 2023.
- Progress is being made against the Equality, Diversity & Inclusion (EDI) Strategy targets, albeit culture change takes time to embed. Acknowledging further focus was needed to improve the experience of colleagues with a disability or neurodiversity, and completion of a self-assessment

against the North West Anti-Racism Framework, a re-prioritised action plan is to be developed for the start of the new year.

#### 4. Quality

- The Trust is performing well against the timely recognition of sepsis metric and back close to target levels. Antibiotic administration within timescales continues to be challenging; benchmarking and learning from other organisations is now being pursued.
- HSMR now shows an improving position, with focussed work on effective coding for end of life care. This continues to be reported via Quality Committee. In addition, Quality Committee received confirmation that a deep dive of the Ward E3 mortality risk had been completed, including review of mortality data, complaints, incidents & serious incidents, learning from deaths analysis, and a nursing perspective. It was confirmed that the risk score had reduced, and the risk description would be revised, as there was no evidence of excess mortality.
- Reported infection rates for C.diff and E.coli continue to be significantly higher than the thresholds. C.diff cases are linked with the increased use of antibiotics following the pandemic, with work taking place across GM to share learning. Regarding E.coli, the Trust is supporting the national Urinary Tract Infection (UTI) campaign to raise awareness and a review of the urinary catheter care is currently underway in the Trust to standardise practice.
- Work continues on several maternity improvement workstreams, with compliance on track where required.
- Audiology is seeing a lower than expected referral of children to the service, a review is underway to establish cause and develop an action plan, which will be monitored by the Patient Safety Group and reported to Quality Committee.

#### 5. Audit Committee

At its meetings in September and November 2023, Audit Committee reviewed the following matters:

- Arrangements by which Staff Can Raise Issues – Reviewed arrangements by which staff may, in confidence, raise concerns about possible improprieties in matters of financial reporting or other matters. Confirmed arrangements are in place for the proportionate and independent investigation of such matters and for appropriate follow-up action.
- Internal Audit Plan 2023/24 – The below internal audits were finalised and reported:
  - Quality Spot Check: Substantial Assurance
  - Stock Management: Limited Assurance
- Internal Audit Follow Up Actions – Reviewed and confirmed positive progress made implementing recommendations, with outstanding actions relating largely to the IT Internal Audit.
- Anti-Fraud Progress Report 2023/24 – Reviewed and confirmed.
- Waiver Report April - September 2023 – Reviewed and confirmed.
- Risk Management Committee Key Issues Report – Reviewed and confirmed, including alignment with key risks considered via the respective Board Committees.
- Board Assurance Framework 2023/24 – Reviewed and confirmed alignment with the internal audit plan.
- External Audit Appointment – Proposed Procurement Route - Reviewed and approved the proposed procurement route for the appointment of the Trust's external auditor to be recommended to the External Audit Appointment Working Group.

<b>Meeting date</b>	21 <sup>st</sup> December 2023	<b>Public</b>	X	<b>Agenda Number</b>	08
<b>Meeting</b>	Council of Governors				
<b>Report Title</b>	Membership Development Group Report				
<b>Presented by</b>	Howard Austin, Public Governor & Chair of Membership Development Group	<b>Author</b>	Soile Curtis, Deputy Company Secretary		

<b>Paper For:</b>	<b>Information</b>		<b>Assurance</b>	X	<b>Decision</b>	
<b>Recommendation:</b>	The Council of Governors are asked to review and confirm the current position against the Membership Action Plan 2023/24.					

**This paper relates to the following Annual Corporate Objectives**

	1	Deliver personalised, safe and caring services
X	2	Support the health and wellbeing needs of our community and colleagues
X	3	Develop effective partnerships to address health and wellbeing inequalities
	4	Develop a diverse, talented and motivated workforce to meet future service and user needs
	5	Drive service improvement through high quality research, innovation, and transformation
X	6	Use our resources efficiently and effectively
	7	Develop our estate and digital infrastructure to meet service and user needs

**The paper relates to the following CQC domains**

	Safe		Effective
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X	Well-Led	X	Use of Resources

**This paper relates to the following Board Assurance Framework risks**

	PR1.1	There is a risk that the Trust does not deliver high quality care to service users
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	PR2.2	There is a risk that the Trust's services do not fully support neighbourhood working
	PR3.1	There is a risk in implementing the new provider collaborative model to support delivery

		of Stockport ONE Health & Care (Locality) Board priorities
	PR3.2	There is a risk that the Trust does not deliver a joint clinical strategy with East Cheshire NHS Trust
	PR4.1	There is a risk that, due to national shortages of certain staff groups, the Trust is unable to recruit and retain the optimal number of staff, with appropriate skills and values
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	PR7.3	There is a risk that the Trust does not materially improve environmental sustainability
	PR7.4	There is a risk that there is no identified or insufficient funding mechanism to support the strategic regeneration of the hospital campus

## Executive Summary

The Membership Development Group (MDG) meets quarterly, with the most recent meeting held on 5 December 2023. The following governors were in attendance:

- Howard Austin, Public Governor (Chair of Membership Development Group)
- Sue Alting, Appointed Governor
- Richard King, Public Governor

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

The MDG considered the following item at the meeting:

- Membership Action Plan – Progress Report 2023/24 (Appendix 1)

## Membership Recruitment

The membership action plan 2023/24 set an aim to maintain an overall membership number and increase the number of members in the 16-21 age group by +100% in 2023/24.

	March 2023	November 2023
Overall Membership Number	10,398	10,282
Age 16-21	15	25

An increase in young people within the membership has been seen following successful engagement with the Trust's Cadets Programme. A workshop was held on 30 November 2023 with Board and Governor representation, during which membership was promoted, alongside further information on the work of the Board and Governors. 11 Cadets signed up to be a member, and a follow up workshop will be held in six months to gather feedback from the Cadets.

In addition, through engagement with the Organisational Development Team, additional opportunities to recruit and engage with young people have been explored including:

- Membership recruitment information has now been incorporated within the Volunteers Induction presentation and hard copy membership forms provided to the Practice Education Team with a view to recruiting young people as members during the induction.
- The Corporate Affairs Team have held an introductory meeting with the Student Experience Manager at the Trafford College Group, and Adrian Nottingham, Public Governor, to discuss membership promotion opportunities across the three Stockport college sites. A follow up meeting will be held on 12 December 2023.

### **Members' Events**

The next members' seminar will be held on Wednesday, 31 January 2024, 2pm-3pm in Pinewood House Education Centre. It is proposed that the seminar topic will be heart/cardiovascular disease, to link in with the National Heart Month in February. This will provide another opportunity for members to meet with governors and provide feedback.

### **Overall Progress - Membership Action Plan**

The MDG confirmed that, overall, positive progress had been made, particularly in improving representation of young people within the membership. However, regarding maintenance of overall membership numbers, it was acknowledged that achieving this aim would be challenging, with attrition of 20-30 members each month, predominately due to deceased members. It was agreed that further consideration would be given to this at the next MDG meeting, with an acknowledgement that maintaining numbers would require significant efforts and support from the Council of Governors, or whether development of a representative membership should be the primary focus.

In addition, the MDG agreed that further encouragement was required to ensure governors used their own networks to seek feedback to support identification of themes from members and the community at large.

*There are currently five governors on the MDG, if any more governors wish to join, please contact Soile Curtis, Deputy Trust Secretary – [soile.curtis@stockport.nhs.uk](mailto:soile.curtis@stockport.nhs.uk) / 0161 419 5166.*

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## Membership Action Plan 2023-2024

<b>Action Required</b> <i>Overview of actions to be taken</i>	<b>Responsible</b>	<b>Target Date</b>	<b>Key Performance Indicator</b>	<b>Progress against KPI</b> (Monitored by Membership Development Group)
<b>Aim: To maintain a sizeable membership that is representative of the communities the Trust serves</b>				
<b>Recruitment</b>				
To establish a paper channel for membership applications and promotion, to include QR code linking to online membership form.	Communications / Corporate Affairs	Q4 2023/24	Maintain overall membership number  (Total public membership number as of March 2023 = 10,398)  Membership form designed, printed and distributed to all governors.	Number of paper membership forms still available. Mindful of the Trusts financial position and the ongoing work around website redevelopment, the existing forms will be utilised until an updated form can be designed to align with the new website.
<p><b>Social Media</b> Messaging to advertise Council of Governors' meetings and promote membership to be shared on social media ahead of CoG meetings.</p> <p>2 x membership recruitment campaigns (members' week) via the Trust's social media channels to encourage member recruitment and showcase governors, to be aligned to member seminars.</p>	<p>Communications / Corporate Affairs</p> <p>Communications / Corporate Affairs</p>	<p>September / December / February</p> <p>January 2024 / April 2024</p>	<p>Maintain overall membership number</p> <p>(Total public membership number as of March 2023 = 10,398)</p>	<p>Social media messaging continues to be shared ahead of CoG meetings.</p> <p>A members' week to be held w/c 22 January 2024 (ahead of the next members' seminar) via the Trust's social media channels to encourage member recruitment.</p>

<b>Action Required</b> <i>Overview of actions to be taken</i>	<b>Responsible</b>	<b>Target Date</b>	<b>Key Performance Indicator</b>	<b>Progress against KPI</b> (Monitored by Membership Development Group)
<p><b>Targeted Recruitment</b>            Following review of membership demographics, the MDG and CoG agreed to focus on the 16-21 age group for targeted recruitment during 2023/24.</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"> <li>Stockport Colleges – Health &amp; Social Care Courses</li> </ul>	Corporate Affairs Team / Governors / Organisational Development Team	TBC	Increase number of members in targeted demographic group by +100%  Membership numbers as of March 2023:  <b>Total:</b> 10,398  <b>Age:</b> 16-21 = 15	Review of membership demographics completed in May 2023 – utilised to develop Action Plan.  Underrepresented groups identified for targeted recruitment: <ul style="list-style-type: none"> <li>Age 16-21</li> </ul> Further detail of engagement to date with Cadets, Volunteers and Stockport Colleges included in the covering report.  Current public membership numbers (as at 28/11/2023): <ul style="list-style-type: none"> <li>Total = 10,282</li> <li>Age 16-21 = 25</li> </ul>
<b>Aim: To develop an active and engaged membership</b>				
<b>Engagement</b>				
<p><b>Newsletter</b>            Include Governor Section in Stepping Up Newsletter, including:</p> <ul style="list-style-type: none"> <li>Meet your Council of Governors</li> <li>Governor activity</li> <li>How to contact your governors</li> <li>Council of Governors meetings</li> </ul>	Communications / Corporate Affairs / Membership Development Group	Summer 2023  Winter 2023  Spring 2024	3 x Stepping Up Newsletters including Governor Section	Winter edition due in January 2024, to include: <ul style="list-style-type: none"> <li>Results of elections, including starters and leavers</li> <li>CoG meeting dates</li> <li>How to contact governors</li> <li>Members' seminar</li> </ul>

<b>Action Required</b> <i>Overview of actions to be taken</i>	<b>Responsible</b>	<b>Target Date</b>	<b>Key Performance Indicator</b>	<b>Progress against KPI</b> (Monitored by Membership Development Group)
<b>Member Seminars</b> Facilitate 2 x face to face members seminars  Governor attendance at member seminars to promote governors and allow opportunity to seek feedback from members/public/staff	Corporate Affairs  Governors	January & April 2024	2 x Members Seminars including evaluation	Members Seminars to be held on: <ul style="list-style-type: none"> <li>31 January 2024, 2pm-3pm– topic to be Heart related to link in with National Heart Month</li> <li>19 or 29 April 2024 – date, time and topic TBC</li> </ul>
<b>Annual Members' Meeting</b> Open forum prior to Annual Members' Meeting as an opportunity for governors to seek feedback from members/public/staff	Governors	25 September 2024, 3.30pm (AMM starts at 4.30pm)	Annual Members' Meeting	
<b>Volunteers</b> Annual 'Meet with Volunteers' session with governors and volunteers.	Corporate Affairs Team / Governors / Volunteers	February 2024	Annual 'Meet with Volunteers' session	Membership recruitment now promoted through Volunteer Induction. Date to meet with volunteers to be confirmed.
<b>Staff Networks</b> Staff governor attendance at staff network forums to allow opportunity to seek feedback from staff.	Corporate Affairs Team / Staff Governors	Ongoing	Staff governor attendance at each staff network at least annually	To be taken forward in 2024.
<b>Website</b> Review Governor & Membership section of SFT website and revise content to ensure opportunity to become a member is clear & accessible.  Draft Membership & Governor Content reviewed at the MDG in December 2022.	Membership Development Group / Corporate Affairs / Communications	TBC Go live in line with new Trust website launch	Maintain overall membership number (+/- TBC%)  (Total public membership number as of March 2023 = 10,398)  New website live	Website user engagement sessions anticipated to take place in March / April 2024.

<b>Action Required</b> <i>Overview of actions to be taken</i>	<b>Responsible</b>	<b>Target Date</b>	<b>Key Performance Indicator</b>	<b>Progress against KPI</b> (Monitored by Membership Development Group)
User engagement in the website design process to be undertaken ahead of 'go live' – date TBC.				

The action plan is an iterative process, where further opportunities for recruitment and/or engagement are identified via the Corporate Affairs and Council of Governors, these can be undertaken in addition to activities highlighted above. This may include, for example, specific events and forums within a membership constituency. Existing channels of recruitment and/or engagement, e.g. Community Champions Network, are not repeated within the action plan.

The Corporate Affairs Team will continue to prompt governors to share feedback gathered as part of action plan activities or other engagement to update the Register of Governor Engagement 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.

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<b>Meeting date</b>	21 <sup>st</sup> December 2023	<b>Public</b>	X	<b>Agenda Number</b>	10
<b>Meeting</b>	Council of Governors				
<b>Report Title</b>	Stockport Locality Update				
<b>Presented by</b>	Angela Brierley, Director of Transformation	<b>Author</b>	Angela Brierley, Director of Transformation		

<b>Paper For:</b>	<b>Information</b>	X	<b>Assurance</b>	X	<b>Decision</b>	
<b>Recommendation:</b>	The Council of Governors is asked to receive information regarding work taking place to improve health and care in Stockport.					

**This paper relates to the following Annual Corporate Objectives**

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X	2	Support the health and wellbeing needs of our community and colleagues
X	3	Develop effective partnerships to address health and wellbeing inequalities
	4	Develop a diverse, talented and motivated workforce to meet future service and user needs
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**The paper relates to the following CQC domains**

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## Executive Summary

This paper describes work taking place to deliver the locality plan for health and care in Stockport, as part of the Greater Manchester Integrated Care System (GM ICS). This includes an overview of the neighbourhood model and pillars of neighbourhood working to support in making improvements to support everyone in Stockport to live healthy, happy lives and reduce inequalities which exist within our populations.

As part of this, Stockport Provider Partnership, led by Stockport NHS Foundation Trust, has agreed 4 priorities for the locality for the next 12 months, as follows:

- Diabetes
- Cardiovascular
- Alcohol Related Harm
- Frailty

Each workstream is currently at different stages of maturity and implementation.

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# Stockport Locality Update – December 2023

Thursday 21<sup>st</sup> December 2023

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Making a difference every day

## The One Stockport Neighbourhood Model

### Our Principles

People at the heart of what we do

Asset-based

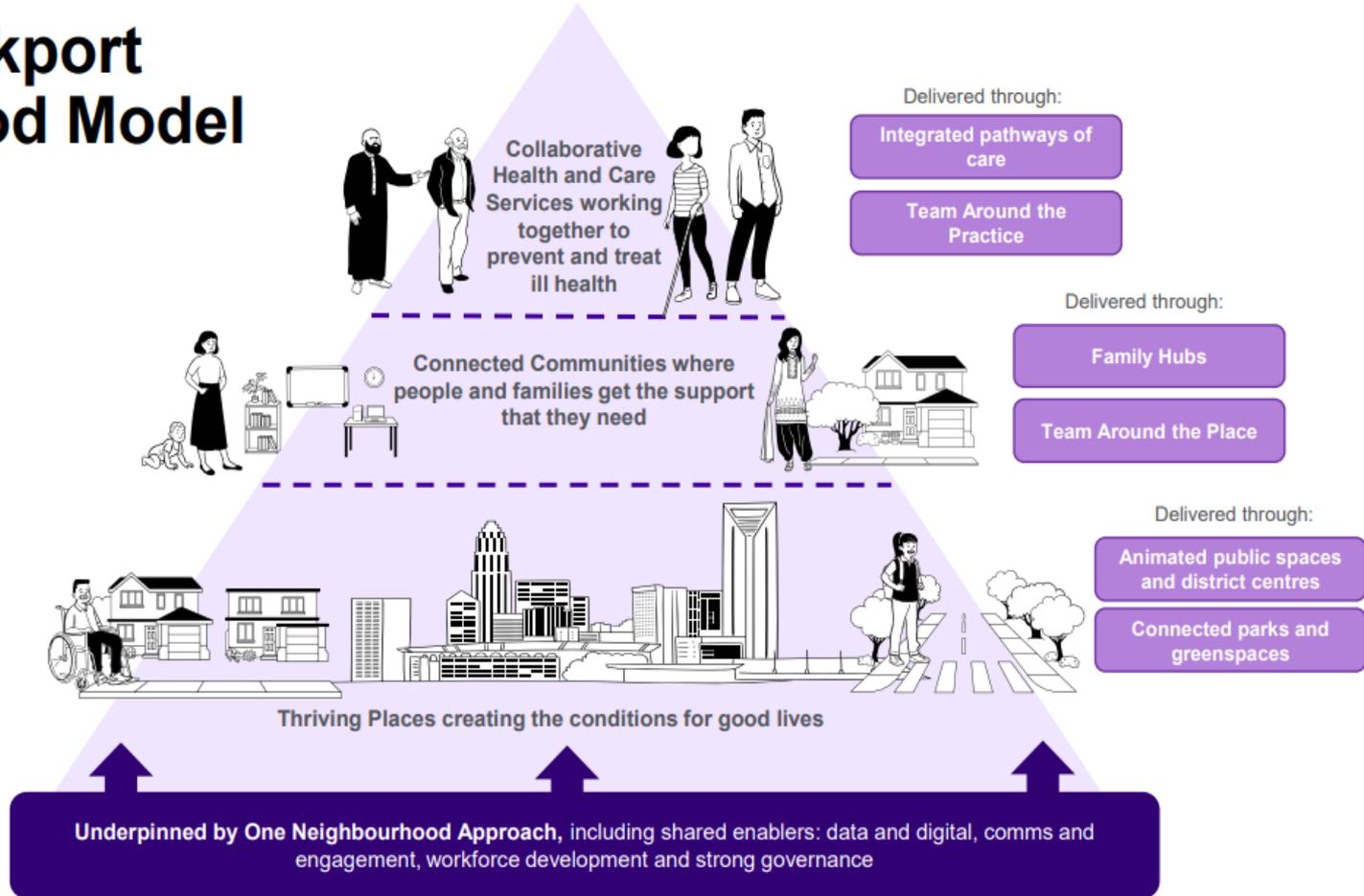
Strengths-based

Restorative Practice

Person-centred

Working together as one team

Know your community

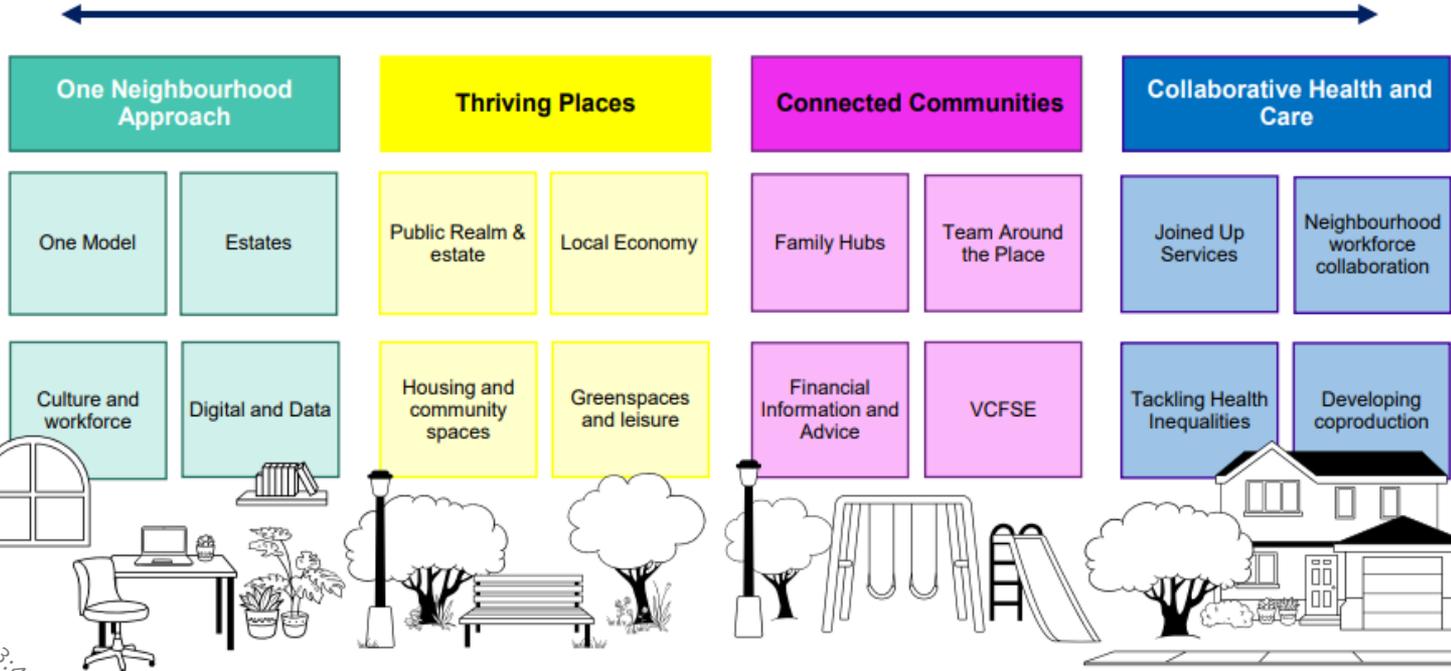


Making a difference every day

Curtis Soile  
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# The Four Pillars of Neighbourhood working in Stockport

## Neighbourhoods and Prevention Programme Board



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## Collaborative Health and Care

Collaborative teams focusing on prevention, early intervention and proactive care supporting people to be healthier, happier and independent in our neighbourhoods.

How do we deliver against this ambition?

Creating the conditions for change (OD & Workforce)

Empowering frontline staff to design new ways of working

Greater use of Population health management tools and data

Proactive Care and Prevention becomes "everyone's business" with a deliberate shift of focus

Building on successful existing arrangements

Greater collaboration across partners building on our strong existing relationships

Enabling clinical and managerial leadership/capacity

Utilising all resources, assets and community services within each neighbourhood

Optimising pathways and seamless transition between services

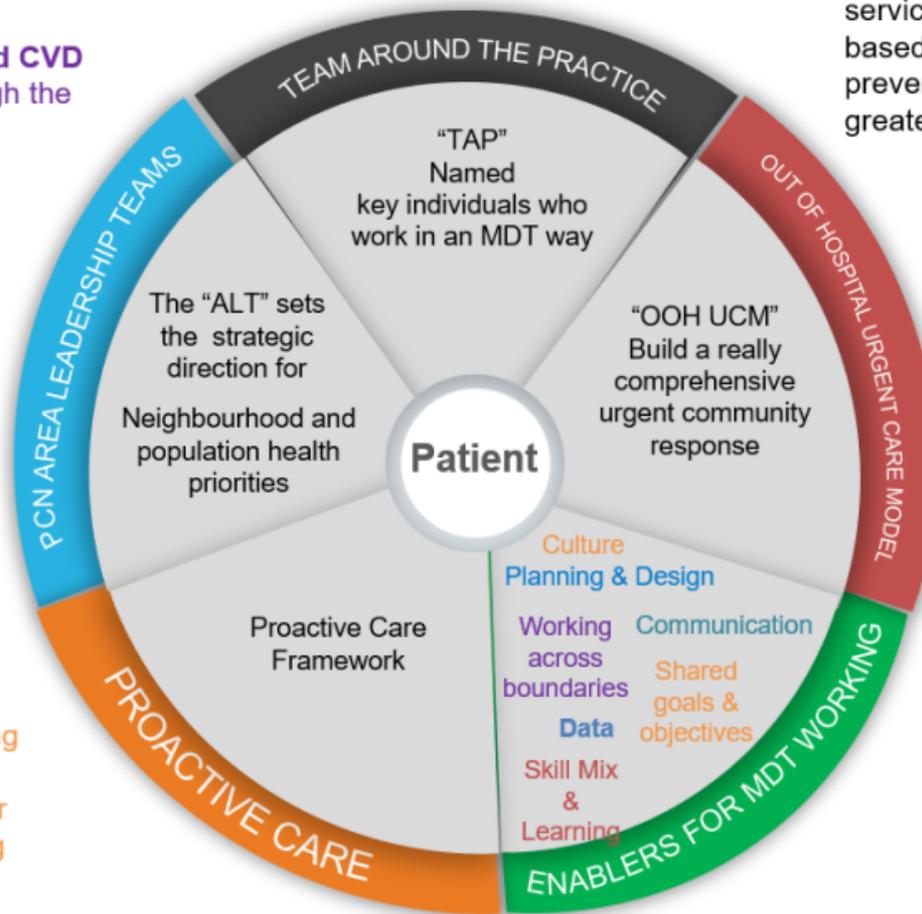
Looking for hidden communities and inequalities and offering tailored support and intervention to meet their specific needs

Making a difference every day

We have chosen to focus on four integrated pathways - **Diabetes, Frailty, Alcohol Related Harm and CVD** - these will be driven through the Provider Partnership

PCNs are in the process of setting up 6 Area Leadership Teams with stakeholders such as a clinical lead each and representation from staff across professional groups and services including VCSFE.

A proactive population health management approach for people living with multi-morbidities, vulnerable groups and/or complex needs, avoiding late crisis presentation.



The Team Around The Practice is a collaboration of health and care staff and services working together in a strength based way on a practice footprint to prevent and treat ill health and support greater independence.

- Optimising the system response to urgent on-the-day demand
- Helping to avoid hospital admissions or admission into residential care
- Enable people to live independently for longer in their own home
- GM Health and Care Record / Integrated Care Plans
- Integrated Information, Advice and Guidance
- Maximise the use of estates
- Utilising all available data as an essential enabler for the planning and monitoring of progress

Stockport Provider Partnership has agreed the top **4 priorities** for the Locality for the next 12 months are:

- **Diabetes**
- **Cardiovascular**
- **Alcohol Related Harm**
- **Frailty**

A Senior Responsible Officer (SRO) for each workstream has been chosen from different system partners across the locality.

Each workstream is currently at different stages of maturity and implementation.

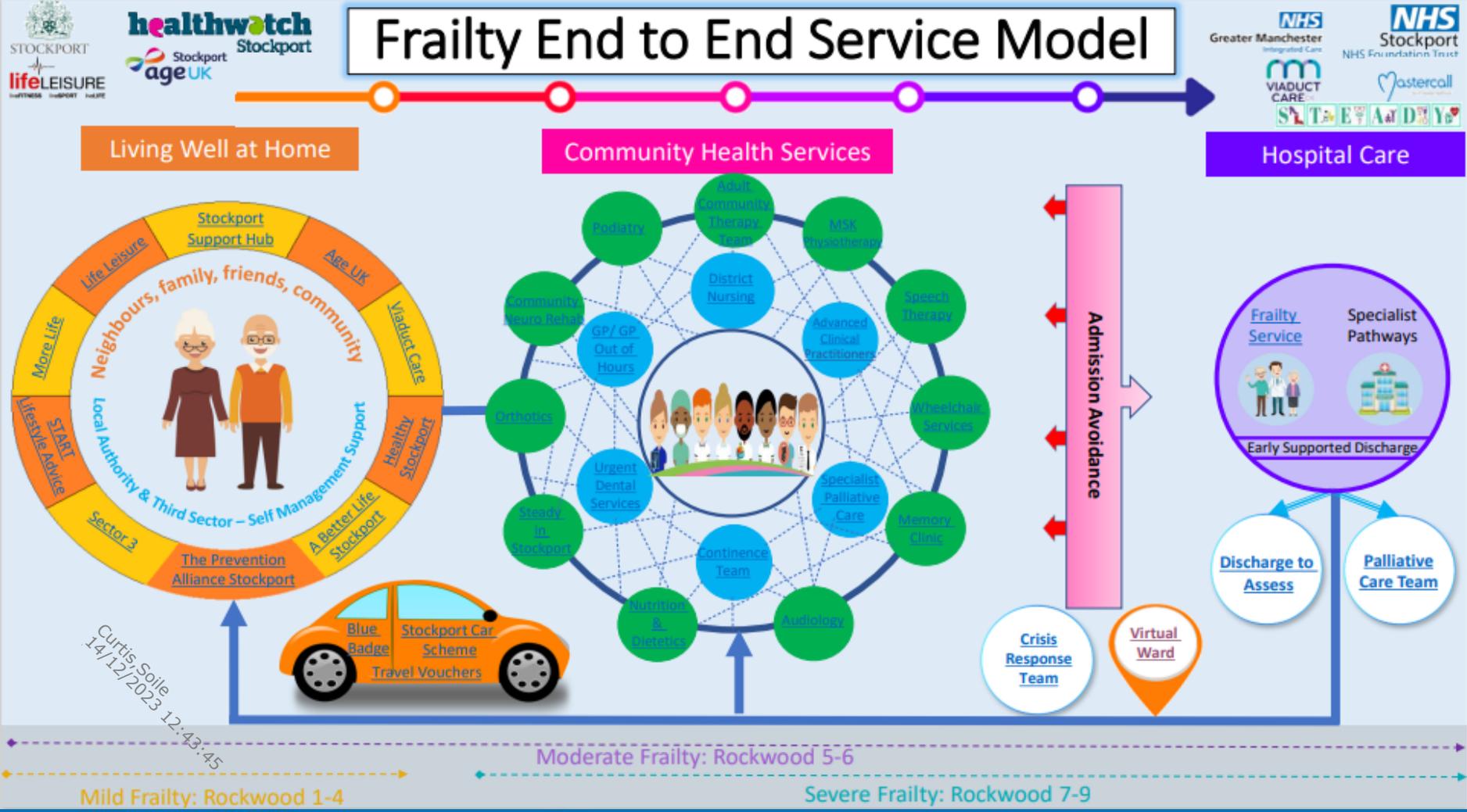


**The aim of this programme is to implement a model of care and pathway to enable the Stockport system to improve outcomes for those people living with frailty**

This programme includes:

- Urgent Crisis Response – Care Home pilot: identifying frail patients with a Clinical Frailty Score of  $>6$  who are high intensity users of urgent care
- Anticipatory care for frailty in each Primary Care Network (PCN)
- Social Prescribing offer in Bramhall PCN – integrating health and exercise
- Working with Tame Valley PCN reviewing falls in Care Homes
- Stockport Falls Workshop held in collaboration with Greater Manchester Ageing Well Programme
- System-wide education and training around frailty
- Scoping out a Consultant Geriatrician Model across acute and community services

## Frailty End to End Service Model



**Making a difference every day**

# Thanks

## Any Questions?



Curtis Soile  
14/12/2023 12:43:45

<b>Meeting date</b>	21 December 2023	<b>Public</b>	X	<b>Agenda Number</b>	11
<b>Meeting</b>	Council of Governors				
<b>Report Title</b>	Nominations Committee Membership				
<b>Lead Director</b>	Prof. Tony Warne, Chair	<b>Author</b>	Soile Curtis, Deputy Company Secretary		

<b>Paper For:</b>	<b>Information</b>	<b>X</b>	<b>Assurance</b>	<b>Decision</b>
<b>Recommendation:</b>	The Council of Governors is asked to: <ul style="list-style-type: none"> <li>Review the membership of the Nominations Committee</li> <li>Submit self-nominations to fill the vacant member position to the Deputy Company Secretary by 5 January 2024.</li> </ul>			

**This paper relates to the following Annual Corporate Objectives**

	1	Deliver personalised, safe and caring services
	2	Support the health and wellbeing needs of our community and colleagues
	3	Develop effective partnerships to address health and wellbeing inequalities
X	4	Develop a diverse, talented and motivated workforce to meet future service and user needs
	5	Drive service improvement through high quality research, innovation, and transformation
	6	Use our resources efficiently and effectively
	7	Develop our estate and digital infrastructure to meet service and user needs

**The paper relates to the following CQC domains**

	Safe		Effective
	Caring		Responsive
X	Well-Led		Use of Resources

**This paper relates to the following Board Assurance Framework risks**

	PR1.1	There is a risk that the Trust does not deliver high quality care to service users
	PR1.2	There is a risk that patient flow across the locality is not effective
	PR1.3	There is a risk that the Trust does not have capacity to deliver an inclusive elective restoration plan
	PR2.1	There is a risk that the Trust is unable to sufficiently engage and support our people's wellbeing
	PR2.2	There is a risk that the Trust's services do not fully support neighbourhood working
	PR3.1	There is a risk in implementing the new provider collaborative model to support delivery of Stockport ONE Health & Care (Locality) Board priorities
	PR3.2	There is a risk that the Trust does not deliver a joint clinical strategy with East Cheshire NHS Trust

	PR4.1	There is a risk that, due to national shortages of certain staff groups, the Trust is unable to recruit and retain the optimal number of staff, with appropriate skills and values
X	PR4.2	There is a risk that the Trust's workforce is not reflective of the communities served
	PR5.1	There is a risk that the Trust does not implement high quality transformation programmes
	PR5.2	There is a risk that the Trust does not implement high quality research & development programmes
	PR6.1	There is a risk that the Trust does not deliver the annual financial plan
	PR6.2	There is a risk that the Trust does not develop and agree with partners a multi-year financial recovery plan
	PR7.1	There is a risk that the Trust does not implement the Digital Strategy to ensure a resilient and responsive digital infrastructure
	PR7.2	There is a risk that the estate is not fit for purpose and/or meets national standards
	PR7.3	There is a risk that the Trust does not materially improve environmental sustainability
	PR7.4	There is a risk that there is no identified or insufficient funding mechanism to support the strategic regeneration of the hospital campus

## Executive Summary

A Nominations Committee of the Council of Governors has been established with responsibility for:

- The identification and nomination of Non-Executive Directors, including the Chair
- Consideration of appropriate succession planning for Non-Executive Directors
- Reviewing and deciding on appropriate terms and conditions for Non-Executive Directors
- Managing the process for any removal of the Chair and other Non-Executive Directors

The Nominations Committee makes recommendation to the Council of Governors regarding the above.

In light of the term of office for one member of the Nominations Committee (Mrs Michelle Slater, Public Governor), expiring on 3 January 2024, the Council of Governors is asked to review the membership of the Nominations Committee.

Governors interested in becoming a member of the Committee are asked to submit self-nominations to fill the position to the Deputy Company Secretary by 5 January 2024. In line with the Nominations Committee terms of reference, governors on the Committee shall have served a minimum of one year or be considered to have the relevant experience. All classes of governor (Public, Staff and Appointed) may become a member.

Should more governors than required wish to become a member of the Nominations Committee, discussion will take place with the Trust Secretary, Chair (Acting) and Lead Governor to determine membership.

The outcome will be communicated to governors and confirmed at the next meeting of the Council of Governors on 28 February 2024.

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## 1. Introduction

- 1.1 A Nominations Committee of the Council of Governors has been established with responsibility for:
- The identification and nomination of Non-Executive Directors, including the Chair
  - Consideration of appropriate succession planning for Non-Executive Directors
  - Reviewing and deciding on appropriate terms and conditions for Non-Executive Directors
  - Managing the process for any removal of the Chair and other Non-Executive Directors.

The Nominations Committee makes recommendation to the Council of Governors regarding the above.

- 1.2 The purpose of this report is to review the membership of the Nominations Committee.

## 2. Background

- 2.1 The term of office of one governor member of the Committee, Mrs Michelle Slater, expires on 3 January 2024, therefore self-nominations are sought from governors to fill the vacancy. The term of office is for a period of three years and is subject to individuals continuing to hold the office of governor.

- 2.2 As stated in s2.3 the Nominations Committee Terms of Reference, membership comprises five governors (to include the Lead Governor), and governors on the committee shall have served a minimum of one year or be considered to have the relevant experience.

- 2.3 The governors whose term of office on the Committee is expiring can re-stand and submit a self-nomination if they so wish.

## 3. Matters under consideration

- 3.1 The current membership of the Committee includes one appointed governor (Lead Governor) and four public governors. Governors are reminded that any member of the Council of Governors is eligible to become a member of the Nominations Committee.

- 3.2 Any interested Governors are asked to submit an expression of interest for the vacancies on the Committee in writing to Soile Curtis, Deputy Company Secretary ([soile.curtis@stockport.nhs.uk](mailto:soile.curtis@stockport.nhs.uk)) by 5 January 2024.

- 3.3 Where there is one nomination, that nominee will be appointed as a member unopposed. Where there are two or more nominations, a discussion will take place between the Chair (Acting), Trust Secretary and the Lead Governor considering the nominations, alongside current membership of the Committee. The outcome will be communicated to governors and confirmed at the next meeting of the Council of Governors on 28 February 2024.

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<b>Meeting date</b>	21 December 2023	<b>Public</b>	X	<b>Agenda Number</b>	12
<b>Meeting</b>	Council of Governors				
<b>Report Title</b>	Confirmation of Lead Governor Appointment				
<b>Lead Director</b>	Prof. Tony Warne, Chair	<b>Author</b>	Soile Curtis, Deputy Company Secretary		

<b>Paper For:</b>	<b>Information</b>		<b>Assurance</b>		<b>Decision</b>	X
<b>Recommendation:</b>	The Council of Governors is asked to approve the re-appointment of Mrs Sue Alting as Lead Governor for a two-year period with effect from 21 December 2023.					

**This paper relates to the following Annual Corporate Objectives**

	1	Deliver personalised, safe and caring services
	2	Support the health and wellbeing needs of our community and colleagues
	3	Develop effective partnerships to address health and wellbeing inequalities
	4	Develop a diverse, talented and motivated workforce to meet future service and user needs
	5	Drive service improvement through high quality research, innovation, and transformation
	6	Use our resources efficiently and effectively
	7	Develop our estate and digital infrastructure to meet service and user needs

**The paper relates to the following CQC domains**

	Safe		Effective
	Caring		Responsive
X	Well-Led		Use of Resources

**This paper relates to the following Board Assurance Framework risks**

	PR1.1	There is a risk that the Trust does not deliver high quality care to service users
	PR1.2	There is a risk that patient flow across the locality is not effective
	PR1.3	There is a risk that the Trust does not have capacity to deliver an inclusive elective restoration plan
	PR2.1	There is a risk that the Trust is unable to sufficiently engage and support our people's wellbeing
	PR2.2	There is a risk that the Trust's services do not fully support neighbourhood working
	PR3.1	There is a risk in implementing the new provider collaborative model to support delivery of Stockport ONE Health & Care (Locality) Board priorities
	PR3.2	There is a risk that the Trust does not deliver a joint clinical strategy with East Cheshire

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		NHS Trust
	PR4.1	There is a risk that, due to national shortages of certain staff groups, the Trust is unable to recruit and retain the optimal number of staff, with appropriate skills and values
	PR4.2	There is a risk that the Trust's workforce is not reflective of the communities served
	PR5.1	There is a risk that the Trust does not implement high quality transformation programmes
	PR5.2	There is a risk that the Trust does not implement high quality research & development programmes
	PR6.1	There is a risk that the Trust does not deliver the annual financial plan
	PR6.2	There is a risk that the Trust does not develop and agree with partners a multi-year financial recovery plan
	PR7.1	There is a risk that the Trust does not implement the Digital Strategy to ensure a resilient and responsive digital infrastructure
	PR7.2	There is a risk that the estate is not fit for purpose and/or meets national standards
	PR7.3	There is a risk that the Trust does not materially improve environmental sustainability
	PR7.4	There is a risk that there is no identified or insufficient funding mechanism to support the strategic regeneration of the hospital campus

## Executive Summary

The Council of Governors appointed Mrs Sue Alting as Lead Governor on 15 December 2021 for a two-year period, ending on 15 December 2023. The purpose of this report is to facilitate the appointment of a Lead Governor by the Council of Governors.

The Lead Governor appointment process was approved by the Council of Governors at its meeting on 7 September 2023.

In line with the approved process, a single expression of interest was received from Mrs Sue Alting, Appointed Governor, Age UK Stockport. It was agreed that the appointment process would be completed at the Council of Governors' meeting on 21 December 2023, and that where a single nomination was submitted, that nominee would be elected unopposed.

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## **1. Purpose**

- 1.1 The purpose of this report is to facilitate the appointment of a Lead Governor by the Council of Governors.

## **2. Background**

- 2.1 The Council of Governors appointed Mrs Sue Alting as Lead Governor at its meeting held on 15 December 2021, ending on 15 December 2023. As the term of office is concluding, it is necessary for the Council of Governors to appoint a Lead Governor.
- 2.2 NHS England does not specify the scope of the Lead Governor role beyond its requirement for an individual to facilitate direct communication between NHS England and the NHS Foundation Trust's Council of Governors. It is anticipated that such direct communication would only be necessary in a limited number of circumstances and where it would not be appropriate to communicate through normal channels i.e., Chairman and/or Chief Executive.
- 2.3 Stockport NHS Foundation Trust has developed a role specification setting out the nature and scope of the Lead Governor role for the organisation. This is included for reference at Appendix 2.
- 2.4 As stated within the Lead Governor role specification, the Lead Governor may be a Public, Staff or Appointed Governor, and the currently appointed Lead Governor may seek re-appointment at the end of that period.

## **3. Current Position**

- 3.1 The Council of Governors reviewed and confirmed the process for appointment of a Lead Governor at its meeting on 7 September 2023, and interested Governors were asked to submit a Nomination Form to the Deputy Company Secretary by 29 September 2023.
- 3.2 It was agreed that the appointment process would be completed at the Council of Governors' meeting on 21 December 2023, and that where a single nomination was submitted, that nominee would be elected unopposed.
- 3.3 A single expression of interest was received from Mrs Sue Alting, Appointed Governor, including confirmation of support from two governors. A copy of Mrs Alting's supporting statement is included at Appendix 1.

## **4. Recommendation**

- 4.1 The Council of Governors is asked to approve the re-appointment of Mrs Sue Alting as Lead Governor for a two-year period with effect from 21 December 2023.

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## **Supporting Statement – Mrs Sue Alting**

Having been Lead Governor I would welcome continuing in the role building on my learning and experience. My focus is the Trust delivering safe, effective and compassionate care, within the framework of stronger partnership working.

My priorities, in line with my values, are:

- all Governors have equal opportunity to ask questions and seek assurance on matters of concern;
- the Council has the information and opportunities to effectively challenge and hold the non-executive directors to account;
- making best use of pre-meetings;
- reflecting Council views;
- ensuring a strong and active Council in all aspects of its role.

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## **Council of Governors Lead Governor Role Specification**

### **1. The Role**

#### **1.1 The Lead Governor will:**

- Be appointed by the Council of Governors from amongst the Public Governors, Staff Governors or Appointed Governors in accordance with Annex 5 of the Trust's Constitution.
- Be appointed for a two year period and may seek re-appointment at the end of that period.
- Act as a contact point for Governors with NHS England should the need arise.
- Work with the Chair of the Board of Directors to ensure that the Council of Governors is working effectively.
- Meet with the Senior Independent Director and provide input to the Chair's annual appraisal on behalf of the Council of Governors.
- Meet routinely with the Chair to plan and prepare the agenda for Council of Governors meetings.
- Work with individual Governors who need advice or support to fulfil their role as a Governor.
- Represent the Council of Governors at Trust or other events when appropriate.
- Meet with members of the Council of Governors at least once a year.

#### **1.2 The Lead Governor should take steps to understand NHS England's role, and the basis on which NHS England may take regulatory action, in order to communicate more widely with other Governors.**

### **2. The Person**

#### **2.1 To be able to fulfil the role effectively, the Lead Governor will:**

- Have the confidence of Governor colleagues and of members of the Board of Directors.
- Have the ability to influence.
- Be able to present well-reasoned arguments on behalf of the Council of Governors.
- Be committed to the success of Stockport NHS Foundation Trust.
- Be able to meet the necessary time commitment (experience shows that, on average, this will amount to approximately 1.5 days per month in addition to the time already spent in the role of governor).

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<b>Meeting date</b>	21 December 2023	<b>Public</b>	X	<b>Agenda Number</b>	13
<b>Meeting</b>	Council of Governors				
<b>Report Title</b>	Arrangements: Chair of Stockport NHS Foundation Trust				
<b>Director Lead</b>	Prof. Tony Warne, Chair	<b>Author</b>	Rebecca McCarthy, Trust Secretary		

<b>Paper For:</b>	<b>Information</b>	X	<b>Assurance</b>		<b>Decision</b>	
<b>Recommendation:</b>	The Council of Governors is asked to receive confirmation of arrangements for the Chair of Stockport NHS Foundation Trust, further to Prof. Tony Warne, Chair, standing down as Chair on 31 <sup>st</sup> December 2023.					

**This paper relates to the following Annual Corporate Objectives**

	1	Deliver personalised, safe and caring services
	2	Support the health and wellbeing needs of our community and colleagues
	3	Develop effective partnerships to address health and wellbeing inequalities
X	4	Develop a diverse, talented and motivated workforce to meet future service and user needs
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	7	Develop our estate and digital infrastructure to meet service and user needs

**The paper relates to the following CQC domains**

	Safe	Effective
	Caring	Responsive
X	Well-Led	Use of Resources

**This paper relates to the following Board Assurance Framework risks**

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	PR3.2	There is a risk that the Trust does not deliver a joint clinical strategy with East Cheshire NHS Trust
	PR4.1	There is a risk that, due to national shortages of certain staff groups, the Trust is unable to recruit and retain the optimal number of staff, with appropriate skills and values

	PR4.2	There is a risk that the Trust's workforce is not reflective of the communities served
	PR5.1	There is a risk that the Trust does not implement high quality transformation programmes
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	PR7.1	There is a risk that the Trust does not implement the Digital Strategy to ensure a resilient and responsive digital infrastructure
	PR7.2	There is a risk that the estate is not fit for purpose and/or meets national standards
	PR7.3	There is a risk that the Trust does not materially improve environmental sustainability
	PR7.4	There is a risk that there is no identified or insufficient funding mechanism to support the strategic regeneration of the hospital campus

### Executive Summary

Prof. Tony Warne will be standing down as Chair of Stockport NHS Foundation Trust on 31<sup>st</sup> December 2023 to take up the post of Chair with Greater Manchester Mental Health NHS Foundation Trust.

Dr Marisa Logan-Ward, Deputy Chair, will be the acting Chair of the Trust, in line with the Trust's Constitution, whilst arrangements for the appointment of a Chair are undertaken.

Acknowledging the broader succession planning requirements of the Trust's Non-Executive Directors over the coming year, the first step of the process will include a review of the Board composition by the Remuneration & Appointments Committee, with recommendation to be made to the Nominations Committee of the Council of Governors.

It is anticipated that a Nominations Committee of the Council of Governors will take place in February 2023. Subsequently, the Nominations Committee of the Council of Governors will oversee required recruitment and selection process, with formal approval of appointment by the Council of Governors.

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**STOCKPORT NHS FOUNDATION TRUST**

**Minutes of the Annual Members Meeting held  
on 25<sup>th</sup> September 2023 at 4.30pm  
Pinewood House Education Centre, Stepping Hill Hospital**

**Attendance:**

Prof T Warne	Chairman
Ms A Bromley	Director of Workforce & OD
Mrs N Firth	Chief Nurse
Mr J Graham	Chief Finance Officer / Deputy Chief Executive
Mr D Hopewell	Non-Executive Director
Mrs K James	Chief Executive
Mrs M Moore	Non-Executive Director
Mrs J McShane	Director of Operations
Dr L Sell	Non-Executive Director

48 Public and Staff Members

	Item	Action
01	<p><b>Welcome and Opening Remarks</b></p> <p>The Chair welcomed everyone to the Stockport NHS Foundation Trust Annual Members Meeting 2023. The Chair provided an overview of the services provided by the Trust during the year, alongside key challenges the Trust, and the wider health and care system, had faced including financial and workforce pressures and increasing demand for services. He commended the many examples of great work by teams during the year.</p>	
02	<p><b>Outcome of Governor Elections 2023</b></p> <p>The Chair presented the outcome of the governor elections 2023, and thanked all governors that had stepped down during the year including:</p> <ul style="list-style-type: none"> <li>- Michael Cunningham, Public Governor</li> <li>- Lesley Higginbottom, Public Governor</li> <li>- Jamie Hirst, Public Governor</li> <li>- Julie Wragg, Public Governor</li> </ul>	
03	<p><b>Review of the Year 2022/23 and Looking Ahead</b></p> <p>The Chief Executive presented a review of the year, including a film showcasing key achievements during 2022/23. In addition, the Chief Executive described the Trusts objectives for 2023/24 and highlighted work taking place to:</p> <ul style="list-style-type: none"> <li>- Deliver personalised, safe and caring services.</li> <li>- Support the health and wellbeing needs of our community and colleagues.</li> <li>- Develop effective partnerships to address health and wellbeing</li> </ul>	

	<p>inequalities.</p> <ul style="list-style-type: none"> <li>- Develop a diverse, talented and motivated workforce to meet future service and user needs.</li> <li>- Drive service improvement through high quality research, innovation and transformation.</li> <li>- Use Trust resources efficiently and effectively.</li> <li>- Develop the Trusts estate and digital Infrastructure to meet service and user needs.</li> </ul>	
<p><b>04</b></p>	<p><b>Annual Accounts 2022/23</b></p> <p>The Chief Finance Officer presented the Annual Accounts 2022/23. He confirmed the financial position for 2022/23, including a breakdown of income and expenditure, and described the financial requirements for 2023/24, highlighting the significant challenge for the Trust and Greater Manchester Integrated Care System in achieving the respective annual financial plans. The Chief Finance Officer confirmed the Annual Accounts 2022/23 had been audited and an unqualified external audit opinion received.</p>	
<p><b>05</b></p>	<p><b>Start Well - Achieving excellent outcomes for children and families in Stockport</b></p> <p>Emma McDonough, Principal Lead Health, provided a presentation regarding the integrated work taking place between Stockport NHS Foundation Trust and Stockport Council, as part of the Stockport Family, to improve outcomes for all children 0 – 5 years, reduce health inequalities and ensure sufficient, high quality early education and childcare. She provided an overview of key inequalities within Stockport and the innovative work taking place to join up and enhance services delivered through family hubs in Local Authority areas, ensuring all families can access the support they need.</p>	
<p><b>06</b></p>	<p><b>Question &amp; Answer Session</b></p> <p>The Chair highlighted questions submitted in advance of the meeting as follows:</p> <p>Mr David Rowlands, public member, asked about measures in place to encourage and protect whistleblowers. The Chair confirmed that the Trust has adopted the national Freedom to Speak Up Policy and has had a Raising Concerns at Work (Whistleblowing) Policy in place for several years. He highlighted several ways in which colleagues could raise their concerns, including Board walkabouts, incident reporting and that the Trust also had a Freedom to Speak Up (FTSU) Guardian and nominated Non-Executive Director Lead for Freedom to Speak Up. The Chair confirmed all concerns reported to the Freedom to Speak Up were reported to the Board</p>	

of Directors, and that the Organisational Development Plan had a focus on creating a culture of openness and transparency to encourage staff to speak out with confidence.

Mr Les Jenkins, public member, sought further information regarding the reasons Stockport NHS Foundation Trust was placed in Segment 3 of the NHS Oversight Framework throughout 2022-23, specifically the Trust's breaches or suspected breaches of Licence Conditions. In addition he queried what differentiated the NHS Oversight Framework from Care Quality Commission (CQC) Inspections and when the outcome of the last CQC Inspection.

The Chair confirmed that, following the CQC Inspection in 2016/17, the Trust was found to be in breach of its licence conditions in relation to urgent & emergency care performance and weaknesses in governance processes. He confirmed that the Trust had been subject to formal monitoring by NHS England and Greater Manchester Health and Social Care Partnership, and that, in March 2021, the Trust was considered to have made sufficient progress against the issues identified that it no longer required intensive support from NHS England. The Chief Executive added significant structural change to the NHS had been undertaken during 2022/23, therefore formal removal of licence conditions had not been received. Notwithstanding this, the Chief Executive informed the meeting that she had recently received confirmation that the Trust would be placed in Segment 2 during 2023/24.

The Chair confirmed that the NHS Oversight Framework described NHS England's approach to NHS oversight, with the CQC the independent regulator of health and adult social care. He confirmed the most recent full CQC Inspection took place in January – February 2020, with the Trust receiving an overall rating of 'Requires Improvement'. He added that in November 2021, the CQC carried out an unannounced inspection of the Urgent and Emergency Care Service at Stepping Hill hospital, which demonstrated improvement across every domain, and a rating of 'Good'.

Mr John Pantell, Public Governor, sought further information regarding child vaccination uptake and work taking place to address obesity for children and young people. Emma McDonough confirmed that immunisation rates were positive across all areas of Stockport, with GPs, Public Health, Midwifery & Health Visiting teams working closely in areas of higher deprivation to support this. In addition, she described the healthy child programme, supporting families with healthy eating and encouraging take up of healthy start vouchers.

Mr David Rowlands, public member, congratulated the Trust on improvements made within the Emergency Department over recent years. He referred to the ageing estate, particularly the Pathology Department, and queried if addressing this estate would be prioritised. The Chief Executive confirmed that the Pathology Department was one of the poorest areas of estate and was not reflective of the state of the art equipment within the department. She confirmed that addressing this, and Outpatients B, was a priority for 2023/24, with consideration of estate options already underway.

Mr Steven Waugh, public member, referred to the new electronic patient record (EPR) at Manchester University NHS Foundation Trust (MFT), providing a single Trust-wide hospital record for each patient, and queried plans for Stockport NHS Foundation Trust. The Chief Executive confirmed one of the Trust priorities for the current year was to introduce an EPR, with a business case in development for this. The Chair echoed these comments and the Trust ambition to have paperless, seamless access to records. The Chair and Chief Finance Officer commented that the system provider may differ due to financial costs, with approval for funding required from Greater Manchester Integrated Care System.

Mr Tad Kondratowicz, Public Governor, acknowledged the financial challenges anticipated for the current and future years. In this light, he queried if the new Emergency & Urgent Care Centre (EUCC) and the Community Diagnostic Centre, may result in increased activity and if this may further increase expenditure for the organisation. The Chief Finance Officer expressed his view that improved, up to date, facilities would support efficiencies in delivery of care, and highlighted the importance of managing quality and safety through fit for purpose investments. The Director of Operations confirmed the current building was too small for the number of people attending, which in turn, impacted the length of time people were waiting. She confirmed that the design of the EUCC was led by clinicians, to create an agile and flexible building that could meet future urgent care needs, recognising attendances have continued to grow by circa 3% each year. She highlighted work to be done with GPs and primary care partners to ensure only those that need to come to A&E do so.

A member of the public sought further information regarding the types of complaints received, specifically if discharge planning was a theme considering the challenges in discharging patients in a timely way when they were medically fit. The Chair highlighted that a key theme related to various elements of communication. Mrs Mary Moore, Non-Executive Director, confirmed that the Quality Committee, considered complaints themes. She noted that discharge was not a common theme with

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	<p>complaints, with an increasing number of complaints relating to the length of time patients were waiting for appointments. Furthermore, the Chief Executive confirmed that she signed off all complaints, with a small number concerning discharge planning and arrangements.</p> <p>Mrs Janet Browning, Public Governor, commented that she was a governor representing High Peak &amp; Dales. Referring to comments that the Trust did not receive funding for all patients from the Derbyshire area that were treated at the Trust, she queried the reason for governors representing this constituency. The Chair and Chief Finance Officer commented that, irrespective of the financial regime, the Trust treated patients living within the High Peak &amp; Dales constituency, and beyond, and therefore it was important that the views of those members and communities could be represented.</p>	
<b>07</b>	<p><b>Close</b> The Chair thanked all for attending, noting the date and time of the meeting would be confirmed in due course.</p>	

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	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23	Jan-24	Feb-24	Mar-24
<b>Board of Directors (Public)</b>	6th 9.30-3.30		1st 9.30-3.30		3rd 9.30-3.30		5th 9.30-3.30		7th 9.30-3.30		1st 9.30-3.30	
<b>Council of Governors</b> (meetings held in Pinewood House)			7th 4.00-6.00 <i>Pre-meeting for governors 3.15-3.45</i>			7th 2.30-4.30 <i>Pre-meeting for governors 1.45-2.15</i>			21st 10-12 <i>Pre-meeting for governors 9.15-9.45</i>		28th 3.30-5.30 <i>Pre-meeting for governors 2.45-3.15</i>	
<b>Informal Council of Governors / Non-Executive Directors Meeting</b>	26th 3.00-4.00 (virtual)			26th 4.00-5.00 (virtual)			9th 4.00-5.00 (virtual)			15th 11.00-12.00 (virtual)		
<b>Nominations Committee</b> ( <i>Nominations Committee members only</i> )		30th 1.30-2.30 (virtual)										13th 1.00-2.00 (virtual)
<b>Membership Development Group</b>		16th 12.00-1.00 (virtual)			21st 12.00-1.00 (virtual)				5th 12.00-1.00 (virtual)		13th 12.00-1.00 (virtual)	
<b>Governor Training &amp; Development (All Governors)</b>												
Core Skills									6th 9.30-12.15 (Fred Perry House)			
Effective Questioning and Challenge / Holding to Account									6th 1.00-3.30 (Fred Perry House)			
Integrated Care Systems (ICS) Update							5th 10.00-12.00 (virtual)					
NHS Finance and Business Skills												5th 10.00-12.00 (Pinewood House)
NHS Providers Training: dates to be disseminated to governors as scheduled												
<b>Annual Members Meeting</b>							25th 4.30-6.00 (Pinewood House)					

NB: Timings may be subject to minor changes

	Apr-24	May-24	Jun-24	Jul-24	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25
<b>Board of Directors (Public)</b>	4th 9.30-3.30		6th 9.30-3.30		1st 9.30-3.30		3rd 9.30-3.30		5th 9.30-3.30		6th 9.30-3.30	
<b>Council of Governors</b> (meetings held in Pinewood House)			26th 4.00-6.00  Pre-meeting for governors 3.15- 3.45			17th 4.00-6.00  Pre-meeting for governors 3.15-3.45			9th 4.00-6.00  Pre-meeting for governors 3.15-3.45			19th 3.30-5.30  Pre-meeting for governors 2.45-3.15
<b>Informal Council of Governors / Non-Executive Directors Meeting (virtual)</b>	23rd 11.00-12.00			23rd 11.00-12.00			21st 11.00-12.00			28th 11.00-12.00		
<b>Nominations Committee</b> <i>(Nominations Committee members only)</i>			4th 9.30-10.30									11th 9.30-10.30
<b>Membership Development Group (virtual)</b>			11th 12.30-1.30		20th 12.30-1.30			25th 12.30-1.30				4th 1.30-2.30
<b>Governor Training</b>												
Core Skills								5th 9.30-12.15				
Effective Questioning and Challenge / Holding to Account								5th 1.00-3.30				
Governor Training (virtual)						10th 10.00-12.00						
NHS Finance											10th 10.00-12.00	
NHS Providers Training: dates to be disseminated to governors as scheduled												
<b>Annual Members Meeting</b>						25th 4.00-5.30						

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Council of Governors 2023/24 Meeting Attendance

Name	Constituency	Jun-23	Sep-23	Dec-23	Feb-24
Paula Hancock	Staff	Y	Y		
David McAllister	Staff	Y	A		
Adam Pinder	Staff	A	Y		
Karen Southwick	Staff	A	A		
Adrian Nottingham	Bramhall & Cheadle	Y	Y		
John Pantall	Bramhall & Cheadle	A	Y		
Michelle Slater	Bramhall & Cheadle	Y	A		
Sarah Thompson	Bramhall & Cheadle	Y	Y		
Howard Austin	Tame Valley & Werneth	Y	Y		
Gillian Roberts	Tame Valley & Werneth	Y	A		
Jamie Hirst	Heatons & Stockport West	Y			
Tad Kondratowicz	Heatons & Stockport West	Y	Y		
Chris Summerton	Heatons & Stockport West	Y	Y		
Val Cottam	Marple & Hazel Grove	Y	Y		
Michael Cunningham	Marple & Hazel Grove	Y			
Richard King	Marple & Hazel Grove	Y	A		
Tony Moore	Marple & Hazel Grove	Y	Y		
Janet Browning	High Peak & Dales	A	Y		
Lance Dowson	High Peak & Dales	A	A		
Thomas Lowe	High Peak & Dales	A	A		
Muhammad Rahman	Outer Region	Y	Y		
Keith Holloway	Stockport MBC	A	Y		
Sue Alting	Age UK Stockport	Y	A		
David Kirk	Healthwatch Stockport	A	Y		
<b>Was Meeting Quorate (Y/N)</b>					
		Y	Y		
<b>Key</b>					
Y	= Present				
A	= Apologies				
A(D)	= Attended as Deputy				

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