

# COUNCIL OF GOVERNORS MEETING

## 5 DECEMBER 2018

Your Health. Our Priority.



Council of Governors bundle - 5 December 2018 - FILE COPY

	Document	Page
1	CoG Meeting Agenda 5 Dec 18	3
2	Item 3 - CoG Minutes 25 Oct 2018	5
3	Item 5 - Chief Executive's Report	15
4	Item 6 - NED Extension Report	21
5	Item 7 - Nominations Committee Report	27
6	Item 7_1 - Attach to Nominations Committee Report	31
7	Item 8 - Collective Performance	37
8	Item 8_1 - Attach to Collective Performance Report	41
9	Item 9 - Committee Arrangements Report	47
10	Item 10 - Strategy Consultation Report	53
11	Item 11.1 - Governance Committee Report - 5 Nov 18	59
12	Item 11.2 - Quality Standards Committee Report - 5 Dec 18	61

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#### Meeting of the Council of Governors Wednesday, 5 December 2018

Held at 4.00pm in the Lecture Theatres, Pinewood House, Stepping Hill Hospital

## AGENDA

Time	_		Enc	Presenting
1600	1.	Apologies for Absence		
	2.	Amendments to Declarations of Interests		
1605	3.	Minutes of previous meeting: 25 October 2018	To Follow	A Belton
1610	4.	Chair's Report	Verbal	A Belton
1615	5.	Chief Executive's Report	√	H Mullen
1625	6.	Non-Executive Directors – Terms of Office	$\checkmark$	A Belton
1635	7.	Nominations Committee Report	$\checkmark$	A Belton
1645	8.	Council of Governors – Collective Performance	$\checkmark$	P Buckingham
1705	9.	Governor Committee Arrangements 2019 ✓		P Buckingham
1720	10.	Trust Strategy – Consultation Process Update	$\checkmark$	A Bailey
1730	11.	Reports from Governor Committees:	$\checkmark$	Committee Chairs
		<ul><li>Governance &amp; Membership Committee</li><li>Quality Standards Committee</li></ul>		
1740	12.	Lead Governor Communication	Verbal	L Jenkins
	13.	DATE, TIME & VENUE OF NEXT MEETING		
	13.1	Monday, 8 April 2019, 4.00pm in the Lecture Theatres, P House.	inewood	

#### 14. Resolution:

"To move the resolution that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to commercial sensitivity and confidentiality of patients and staff, publicity of which would be premature and/or prejudicial to the public interest" This page has been left blank

#### STOCKPORT NHS FOUNDATION TRUST Minutes of a Council of Governors Meeting Held on Thursday 25 October 2018, 4.00pm in the Lecture Theatres, Pinewood House, Stepping Hill Hospital

#### Present:

Mr A Belton	Chair
Mrs E Brown	Public Governor
Dr R Catlow	Public Governor
Dr R Cryer	Public Governor
Mr R Greenwood	Public Governor
Mr L Jenkins	Public Governor
Mr T Johnson	Public Governor
Mr R King	Public Governor
Dr T Kondratowicz	Public Governor
Cllr T McGee	Appointed Governor
Mrs L Woodward	Public Governor
Mr G Wright	Public Governor
Mr T Morley	Public Governor
Mrs J Wragg	Public Governor
Mr L Dowson	Public Governor
Mrs L Appleton	Public Governor
Mr C Lyons	Public Governor
Ms C Mitchell	Staff Governor
Mrs J Keyes	Staff Governor
Mr C Dawson	Staff Governor

#### In attendance:

Director of Corporate Affairs
Non-Executive Director
Non-Executive Director
Non-Executive Director
Interim Chief Executive
Director of Finance
Director of Support Services
Chief Nurse
Interim Director of Workforce

#### 36/18 Apologies for absence

Apologies for absence were received from Prof C Galasko, Mrs M Harrison, Ms C Barton, Mrs K Glass, Dr C Wasson, Mrs C Anderson, Ms A Smith and Mr D Hopewell.

Mr A Belton welcomed recently-elected Governors to the meeting and introductions were made.

#### ACTION

#### 37/18 Amendments to Declarations of Interests

There were no amendments made to the Register of Interests.

#### 38/18 Minutes of the Previous Meeting

The minutes of previous meetings held on 25 July 2018 and 1 October 2018 were agreed as true and accurate records of the meetings. The action log was reviewed and annotated accordingly.

In response to a question from Mr T Johnson, regarding delays to implementation of the Electronic Patient Record (EPR) programme, Mr H Mullen provided an overview of the current status of the programme and advised that the Trust had taken a decision to hold back payment of maintenance costs. Mr T Kondratowicz commented on shortcomings relating to general NHS development of EPR systems over the past 20 years. Mrs C Barber-Brown acknowledged these comments and advised that the current situation was particularly complex. She noted that she held regular meetings with the EPR team and, in response to a follow-up question, confirmed that a phased roll-out approach would be adopted for implementation at the appropriate time.

#### 39/18 Chair's Report

Mr A Belton advised those present of a series of assessments / inspections that had taken place during September and October 2018 as part of the CQC Well Led Review. These were:

- 6 September 2018 Use of Resources Assessment
- 11 13 September 2018 Core Services Inspection
- 2 4 October 2018 Well Led Assessment

Mr A Belton noted that the Trust would receive draft inspection reports for factual accuracy checking in due course and advised that the final report was scheduled to be published by the CQC within 60 days of completion of the inspection. Mr A Belton advised of continuing operational pressures as the Trust entered the winter period and noted an excellent response from staff across the organisation in the context of the inspection process.

Mr A Belton concluded his report by noting the appointment of Mrs Louise Robson as Chief Executive and advised that a provisional start date of 7 January 2019 had been agreed for Mrs Robson to commence work with the Trust.

The Council of Governors:

• Noted the verbal Chair's Report.

#### 40/18 Chief Executive's Report

Mrs H Thomson briefed the Council of Governors on the impact of a

significant increase in referrals on Breast Services at Stepping Hill Hospital and advised of the potential of 4-5 week waits against a 2week target. She advised that, as a result, commissioners had amended referral arrangements to ensure that patients would continue to receive appointments within the 2-week target period. The interim Chief Executive advised that normal services at Stepping Hill Hospital were unlikely to resume before January 2019.

In response to concerns raised by Mrs L Woodward, regarding impact on patients resident in the High Peak, Mrs H Thomson acknowledged the inconvenience for High Peak patients but noted that the revised arrangements facilitated timely referral for treatment. With regard to the period of notice given, Mrs H Thomson advised that the Trust had escalated issues to both Stockport CCG and NHS Improvement in June 2018. Mrs L Woodward noted the lack of public transport facilities to allow patients to attend appointments in Sheffield, Chesterfield, Macclesfield or Wythenshawe and advised that High Peak patients did not seem to matter.

Mrs H Thomson advised that all patients mattered and noted that the clinical reasons for a 2-week referral target were clear in terms of need for assessment / treatment. She also noted that North Derbyshire CCG was responsible for commissioning and access. In response to a question from Mr A Belton, Mr L Dowson also expressed his concern over the impact on High Peak patients and suggested that arrangements discriminated in favour of Stockport residents. He noted that he had recently attended a meeting during which additional transport facilities for High Peak residents had been discussed.

In response to comments from Mr R Greenwood, regarding issues in other services due to workforce challenges, Mrs H Thomson acknowledged that there were a range of specialties subject to national shortages. In response to a question from Mr A Belton regarding lessons learned, Mrs H Thomson commented on the need for closer and more effective work between partners to manage capacity and demand in fragile services. Mr A Belton also commented on the need for clear and unambiguous communication with all concerned.

Mr T Johnson requested that a written report from the Chief Executive be provided at future meetings and commented on the need for feedback on appropriate use of Greater Manchester funding and achieving savings through rationalisation. Mr F Patel provided an overview of work being undertaken by the Greater Manchester Finance Directors to accelerate saving opportunities. Mr T Johnson then briefed the Council on his own recent experience of attending the Emergency Department and admission delays. Mrs H Thomson noted the challenges of maintaining patient flow through the hospital and the particular need to reduce the number of stranded patients and facilitate discharge earlier in the day. In response to a suggestion from Mr T Johnson that more beds were needed, Mrs H Thomson noted the national shortage of nurses and advised that the additional staff required for extra beds were just not available. The Council of Governors:

Noted the verbal Chief Executive's Report

#### 41/18 Revised Trust Strategy Report

Mr H Mullen advised the Council that the Board of Directors had recently approved a revised Trust Strategy for consultation and delivered a presentation which covered the following subject areas:

- Refreshed Strategic View
- Your Health, Our Priority
- Our Mission
- Our Priorities
- Our Supporting Strategies
- Our Clinical Services

Mr H Mullen provided an overview of the consultation process, which was scheduled to run from November 2018 – January 2019, with presentation to the Board of Directors of a final Strategy document for approval scheduled on 31 January 2019.

Mr G Wright noted the example of Breast Services, and queried whether there were other services that were overstretched. Mr H Mullen commented on the need for collaboration in circumstances where the Trust may struggle to provide services on its own and noted in particular the challenge of attracting breast radiologists. In response to a follow-up question, Mr H Mullen acknowledged that the Trust was not currently achieving the 18-week standard across all specialties, including Urology.

In response to a question from Mr T Johnson, regarding recruitment and level of turnover, Mr H Mullen advised that the Medical Director would be visiting India in early November 2018 as part of a Greater Manchester group focusing on the recruitment of middle grade doctors. With regard to nurse recruitment, Mr H Mullen acknowledged the challenge and noted a national shortage of circa 40,000 registered nurses. With regard to leavers, Mrs H Brearley advised that approximately a third left due to retirement, a third to take up positions in other organisations and a third left the nursing profession. She noted that the Trust was not an outlier in terms of level of turnover and advised of innovative role design, such as Physician Associates and Trainee Nurse Associates to address the recruitment challenge.

Mr R Greenwood noted the content of supporting strategies and suggested that the Communications Strategy should also be included. Mr L Jenkins commented on the Board's responsibility in terms of determining organisation strategy and noted the need for metrics that would allow Non-Executive Directors to holding management to account for progress and provide subsequent assurance to Governors. Mr M Sugden advised that progress would be tracked through the

Board Committee structure with quarterly / six-monthly reports to the Board. He noted that the strategy would be subject to annual review to take into account any changes in the operating environment.	
Mr T McGee noted that the Joint Social Needs Assessment (JSNA) was currently subject to review and advised that outcomes from the review would influence future commissioning decisions. Mr H Mullen acknowledged these comments and noted engagement with the local authority leadership team as part of the consultation process.	
The Council of Governors:	
<ul> <li>Received and noted the Revised Trust Strategy Report.</li> <li>Agreed that a report on progress with the consultation and emerging themes would be presented at the next meeting on 5 December 2018.</li> </ul>	нм
Medium Term Financial Strategy	
Mr F Patel briefed the Council of Governors on development of a Medium Term Financial Strategy and delivered a presentation which covered the following subject areas:	
<ul> <li>Background</li> <li>Historical Financial Information</li> <li>Drivers of the Deficit</li> <li>Going Concern</li> <li>The Do Nothing Scenario</li> <li>Five Point Improvement Strategy</li> <li>Financial Impact</li> <li>Delivery Resources.</li> </ul>	
In response to a question from Mr G wright, Mr F Patel advised of the need for a level of investment to provide supporting resources required for service transformation activities. Mr A Belton emphasised that service transformation was essential to the delivery of financial plans. In response to questions from Mr T Kondratowicz, regarding neighbourhood care savings, Mr F Patel noted the need to drive benefits through implementation of the Stockport Together programme in order to realise efficiency savings. He acknowledged the risk associated with identification of unmet needs. Mr F Patel also advised that enhancing availability of services 'closer to home' would facilitate a reduction in bed numbers.	
Dr M Cheshire commented on the need for focus on how wisely the 'Stockport Pound' was spent and how system partners can work	

42/18

'Stockport Pound' was spent and how system partners can work collectively to achieve value for money and quality of care. He noted the challenges of a fast moving system and environment and commented on Governor support in terms of communicating with members. Mr R Greenwood endorsed these comments in terms of enhancing public understanding of the need to balance and target resources effectively. Mr M Sugden advised the Council that NHS Improvement had a keen interest in the Trust's plans and was supportive of the actions being planned by the Trust. He also noted that it was imperative for plans to be operationalised at the earliest opportunity to ensure in-year delivery and maximise opportunities for over-delivery in 2019/20. In response to a question from Mr L Jenkins, Mr F Patel confirmed that a number of NHS organisations had financial deficits but noted the expectation that the Trust had to move towards a balanced position. In response to a question from Mr C Lyons, Mr F Patel provided an overview of national funding arrangements and noted the likelihood of additional funding for the NHS as part of forthcoming Budget announcements.

In response to questions from Mr R King and Mr C Lyons, Mr F Patel clarified borrowing arrangements referenced at s9.1f of the draft strategy document and noted the negative implications of Private Finance Initiative arrangements. He also commented on work to explore alternative borrowing sources. Mr T McGee commented on innovative use of pension funds and noted the importance to the local authority of benefits from the Stockport Together programme. He noted that the local authority had experienced a budget reduction of circa £118m and was not allowed to plan a deficit position.

The Council of Governors:

• Noted development of a Medium Term Financial Strategy.

#### 43/18 Constitution Report

Mr P Buckingham presented a report seeking approval of proposed amendments to the Trust's Constitution in addition to seeking views from Governors on the subject of Tenure of Governors. He suggested that these matters be dealt with separately and briefed the Council on proposed amendments relating to Meeting Attendance Requirements and Nominations Committee Membership as detailed at s3 of the report. He advised that the proposed amendments had been approved by the Board of Directors on 27 September 2018.

The Council of Governors:

 Approved the proposed amendments set out at s3.3 and s3.6 of the report.

Mr P Buckingham then referred Governors to s4.1 of the report and noted that the Trust currently differed from the majority of NHS Foundation Trusts in not having a maximum term of office for Governors. He referred those present to s4.5 of the report which summarised the position in Greater Manchester and noted that a maximum term of nine years was commonly applied by NHS Foundation Trusts.

Mr P Buckingham advised that discussion of this subject by the

Governance & Membership Committee had proved to be inconclusive but noted that the view of the Board of Directors was that a maximum term of office should be applied. Mr A Belton then invited views from Governors and noted the importance of wide contribution to the debate. There followed a lengthy and detailed debate during which both arguments for and against the proposal were passionately debated. Mr L Jenkins provided a detailed overview of the background to developments resulting in current Constitution content and argued that any link to Non-Executive Director arrangements and independence / objectivity was not relevant in this instance. He argued that the matter should be determined by the electorate as part of the normal election process.

Arguments in favour of a maximum term were also put forward by Governors and Mr R Greenwood commented on the need to modernise the approach to Council business and the risk that lengthy tenures could result in stagnation of practice. He also noted the need to reflect on the views expressed by the Board of Directors. Mr R Greenwood then commented on his own experience in so far as it could be difficult for newer Governors to have a voice and advised that it was important to understand the reasons why a number of Governors had chosen to resign after relatively brief terms.

Mr T Johnson noted his opposition to the proposal and suggested that the matter be put to a vote. Mr P Buckingham advised that the matter was not the subject of a formal proposal and explained that the purpose of the report was to seek Governor views on the subject. Mr T McGee advised that notice would need to be given for decision-making purposes and noted that such decision-making would need to be informed by a formal report on the subject. Mr A Belton summarised the discussion, which remained inconclusive and thanked Governors for their contribution to the debate. He advised that the matter would clearly need further consideration prior to any formal proposal and noted that he would be happy to speak with Governors on an individual basis. He advised that this would provide an opportunity for all Governors to share their views.

#### 44/18 Reports from Governor Committees

Mr L Jenkins presented a report from a meeting of the Governance & Membership Committee held on 3 September 2018. Mr R King then briefed Governors on his observation of a recent Quality Committee meeting and advised that; the meeting had been well chaired, reports had been well presented and there had been a good level of debate and discussion.

The Council of Governors:

• Received and noted the reports.

#### 45/18 Lead Governor Communication

Mr L Jenkins briefed the Council of Governors of his Lead Governor activities since the last meeting which included one to one meetings with the Director of Finance and Director of Corporate Affairs, participation as a Focus Group member as part of the Chief Executive recruitment process and participation in a Governor Focus Group during the CQC Well Led Review.

Mr L Jenkins advised that, along with Mrs E Brown, Mr R Catlow and Ms C Mitchell, he had attended a North West Governors Forum meeting on 18 October 2018. He provided an overview of the agenda for the day and noted that it had been an interesting and informative event. In response to a question from Mr L Jenkins, Mr P Buckingham advised that the appraisal process for the Chair would commence in November 2018 and noted that all Governors would be invited to complete an online survey.

The Council of Governors:

• Received and noted the verbal report.

#### 46/18 Date, time and venue of next meeting.

The next meeting of the Council of Governors was scheduled to be held on Wednesday, 5 December 2018, in the Lecture Theatres, Pinewood House, commencing at 4.00pm.

Signed:

Date: \_\_\_\_\_

#### COUNCIL OF GOVERNORS: ACTION TRACKING LOG

Ref.	Meeting	Minute Ref	Subject	Action	Responsible
				In response to a question from Mr T Johnson, the Director of Corporate Affairs advised that the Council of Governors would receive a presentation regarding the Trust's medium-term Financial Strategy at the meeting on 16 April 2018.	F Patel (Director of Finance)
6/17	6 Dec 17	44/17	Report of the Chief Executive	<ul> <li>Update 23 May 18 – It was noted that as the preparation of the Financial Strategy was still in progress, the presentation would be deferred to the Council of Governors' meeting in July 2018.</li> <li>Update 25 Jul 18 – Mr F Patel briefed the Council on the development of a Medium Term Financial Strategy which was still commercial in confidence. He noted that the intention was for the Strategy to be presented to the Public Board meeting on 27 September 2018, following which it would be presented to the October meeting of the Council of Governors.</li> <li>Update 25 Oct 18 – Report included on the agenda. Action complete.</li> </ul>	
				In response to a question from the Chair, the Director of Support Services agreed to consider the role Public Governors could play in helping to shape the cultural change in the community.	H Mullen (Director of Support Services)
2/18	23 May 18	13/18	Operational Plan	<ul> <li>Update 25 Jul 18 – Mr P Buckingham agreed to follow the action up with Mr H Mullen and circulate the outcome to Governors by email.</li> <li>Update 25 Oct 18 – Mr H Mullen advised that the subject would be incorporated in discussion on the Revised Trust Strategy. Action complete.</li> </ul>	
3/18	25 Jul 18	25/18	External Auditor's Report	In response to questions from Mr L Jenkins, regarding the Electronic Patient Record (EPR) system, the Director of Finance suggested that Governor representatives be invited to observe meetings of the EPR Programme Group to facilitate a better understanding. Mr L Jenkins welcomed this suggestion and commended the invitation to Governor colleagues. <b>Update 25 Oct 18</b> – Mr F Patel advised that a presentation on the EPR Programme had been delivered at a recent Governance & Membership Committee meeting. Action complete.	F Patel (Director of Finance)

4/18	25 Jul 18	26/18	Governor Discussion & Questions on Annual Report & Accounts 2017/18	<ul> <li>Mr L Jenkins commented that the Trust had missed out on £400k of Commissioning for Quality and Innovation (CQUIN) funds and noted that the main issue had related to proactive and safe discharges. In response to a question from Mr L Jenkins, the Medical Director agreed to find out more detail about this issue and feed back to the Council.</li> <li>Update 25 Oct 18 – Dr G Burrows advised that the CQUIN target in question had been suspended and that, consequently, there had not been an opportunity to gain income. Action complete.</li> </ul>	C Wasson (Medical Director)
5/18	25 Oct 18	41/18	Revised Trust Strategy	It was agreed that a report on progress with the consultation and emerging themes would be presented at the next meeting on 5 December 2018.	H Mullen (Deputy Chief Executive)



Report to:	Report to: Council of Governors		5 December 2018
Subject:	Chief Executive's Report		
Report of: Interim Chief Executive		Prepared by:	Mr P Buckingham

## **REPORT FOR NOTING**

Corporate objective ref:		Summary of Report The purpose of this report is to advise the Council of Governors of recent operational and / or strategic developments. Subject areas included in the report are:
Board Assurance Framework ref:		<ul> <li>Breast Services</li> <li>EPR Programme</li> <li>Winter Plan 2018/19</li> <li>Celebrating Stockport</li> </ul>
CQC Registration Standards ref:	N/A	
Equality Impact Assessment:	Completed	
Attachments:	Nil	

This subject has previously been reported to:	<ul> <li>Board of Directors</li> <li>Council of Governors</li> <li>Audit Committee</li> <li>Executive Team</li> <li>Quality Committee</li> <li>F&amp;P Committee</li> </ul>	<ul> <li>PP Committee</li> <li>SD Committee</li> <li>Charitable Funds Committee</li> <li>Nominations Committee</li> <li>Remuneration Committee</li> <li>Joint Negotiating Council</li> <li>Other</li> </ul>
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#### 1. PURPOSE OF THE REPORT

1.1 The purpose of this report is to advise the Council of Governors of recent operational and / or strategic developments.

#### 2. BREAST SERVICES

- 2.1 At the Council of Governors meeting on 25 October 2018, Governors were briefed on the decision taken by Stockport CCG to advise neighbouring CCGs that Stepping Hill Hospital would not be accepting new referrals for the Breast Service as supportive action to reduce the level of referrals being managed by the Trust. This resulted from a significant increase in the overall number of referrals and a situation where the Trust was unable to meet the 2-week target for seeing new referrals.
- 2.2 In October 2018 we agreed support arrangements with two neighbouring units, in Macclesfield and Wythenshawe for the referral of patients in excess of the Trust's capacity. Neighbouring CCGs also made alternative arrangements for the referral of patients from the relevant areas. There was lengthy discussion on this subject at the Council of Governors meeting on 25 October 2018, particular in relation to patients resident in the High Peak with the prospect of journeys to Chesterfield, Macclesfield or Wythenshawe for treatment.
- 2.3 Governors are requested to note that the remedial action taken manage capacity have worked well, particularly in relation to the support arrangements in Macclesfield and Wythenshawe, and there has been a considerable improvement in patient waiting times. The situation was reviewed by the Executive Management Group on 26 November 2018 and it was agreed that a phased approach to the re-introduction of normal referral patterns should be adopted. The first phase, which will be implemented as soon as is practicable, will be re-introduction of referrals to Stepping Hill Hospital from North Derbyshire CCG. At present we aim to fully resume normal services by January 2019.

#### 3. EPR PROGRAMME

3.1 Work has continued on efforts to resolve delays experienced in implementation of the EPR Programme, and the project was the subject of thorough consideration at the Board of Directors meeting held on 29 November 2018. An overview of the up to date position will be provided at the Council of Governors meeting on 5 December 2018.

#### 4. WINTER PLAN 2018/19

- 4.1 The Board of Directors reviewed a comprehensive report from Mrs J Wood, Improvement Director, on the subject of the system winter plan during the Board meeting held on 29 November 2018. The plan is based on clearly defined actions to be undertaken by partners across the Stockport system including; the Trust, Stockport Metropolitan Borough Council, Viaduct Care and Mastercall Healthcare.
- 4.2 While the impact of winter pressures will be influenced by a number of factors, the actions included in the Winter Plan are generally aimed at; reducing attendance at hospital, increasing hospital capacity and patient flow and enhancing service availability outside the

hospital to facilitate effective discharge of patients. Delivery of the plan will be actively monitored by the Urgent Care Delivery Board, which comprises senior level representatives from Stockport system organisations.

#### 4.3 Examples of schemes being implemented in the Trust are as follows:

#### Support for Emergency Department / Acute Medical Unit (AMU)

- Extra Acute medical consultant at weekends 9am to 5pm and weekdays
- Extra AMU SHO/ANP at weekends 9am to 5pm
- Extra Acute SHO/ANP in ED 6pm to 2am 7 days a week
- Extra ED consultant or middle grade 7 days a week 6pm to2am
- ED consultant extended from 10pm finish until midnight
- Extra Consultant 2pm to 10pm at weekends
- ED streaming clinical navigator role 7 days a week 12 hours a day.
- ED streaming Band 4 support
- ED treatment stream and outstanding actions- Band 3
- ED Physiotherapist (FRESH) extend to 12 hour days
- ED social worker to support FRESH
- Additional Pharmacist deployed in ED and AMU.
- AMU therapy- weekend cover
- AMU Occupational Therapy 7day cover

#### Support for Patient Flow

- The recruitment of a Transfer Team
- Transfer Unit to be open at weekends
- Additional consultants at weekend- 3hr PA (Sat and Sun). Each consultant to be supported by a FY2
- Consultant of the week-DMOP
- In-reach in to AMU- Cardiology and Respiratory.
- Integrated Transfer Team (ITT) support to escalation wards.

In addition to the above, there are plans in place to open 63 additional beds within the Trust with access to approximately 19 further beds in Community settings.

#### 5. CELEBRATING STOCKPORT

5.1 A 'Celebrating Stockport' event is scheduled to be held on Tuesday, 4 December 2018. These events are a valuable means for us to recognise and applaud the efforts of staff across the Trust in the delivery of high quality, effective patient care. Many of the categories are based on peer nominations and the work of the judging panel in determining the successful nominations is becoming increasingly difficult as the number and quality of nominations increase - which is a lovely position to be in! An overview of outcomes will be provided at the Council of Governors meeting on 5 December 2018.

#### 6. **RECOMMENDATIONS**

- 6.1 The Council of Governors is recommended to:
  - Receive and note the content of the report.

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Report to:	Council of Governors	Date:	5 December 2018
Subject:	Non-Executive Director – Extensio	ns to Term of Offi	ce
Report of:	Chair	Prepared by:	P Buckingham

## **REPORT FOR APPROVAL**

Corporate objective ref:	N/A	Summary of Report Identify key facts, risks and implications associated with the report content. The purpose of this report is to seek approval from the Council of	Identify key facts, risks and implications associated with the report
Board Assurance Framework ref:	N/A	<ul> <li>Governors for extensions of term of office for the following Non-Executive Directors:</li> <li>Mrs C Anderson</li> <li>Ms A Smith</li> <li>Mr M Sugden</li> </ul>	
CQC Registration Standards ref:	N/A		
Equality Impact Assessment:	Completed X Not required		

Attachments: Nil		
This subject has previously been reported to:	<ul> <li>Board of Directors</li> <li>Council of Governors</li> <li>Audit Committee</li> <li>Executive Team</li> <li>Quality Committee</li> <li>F&amp;P Committee</li> </ul>	<ul> <li>PP Committee</li> <li>SD Committee</li> <li>Charitable Funds Committee</li> <li>Nominations Committee</li> <li>Remuneration Committee</li> <li>Joint Negotiating Council</li> <li>Other</li> </ul>

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#### 1. INTRODUCTION

1.1 The purpose of this report is to seek approval from the Council of Governors for extensions to the term of office for a number of Non-Executive Directors.

#### 2. BACKGROUND

- 2.1 There are three Non-Executive Directors whose term of office is scheduled to be completed during the period 31 December 2018 31 March 2019. Details are as follows:
  - Mrs C Anderson initial three-year term expires on 31 December 2018.
  - Ms A Smith initial three-year term expires on 31 March 2019.
  - Mr M Sugden one year extension expires on 31 March 2019 (total term of office = seven years).
- 2.2 In the context of the many-faceted challenges facing the Trust, financial, performance and quality, it is imperative that we maintain consistency and stability amongst the Non-Executive Director cohort of the Board of Directors as we collectively endeavour to address these challenges.
- 2.3 It is considered that the need for stability, and retention of experience, is enhanced as a result of significant turnover amongst the Executive Director cohort where there will be changes in personnel for the following positions over the coming months; Chief Executive, Director of Workforce and Director of Corporate Affairs. Recent Board meetings, both formal Board of Directors meetings and informal development sessions, have illustrated to me the strength of relationships and diversity of profiles that we have across the current Non-Executive Director cohort which in combination work productively and effectively with the Executive Director cohort.
- 2.4 Consequently, the emphasis in my discussions with relevant individuals has been to test level of commitment and identify means to ensure that we retain the skills and experience that individuals bring to the Board. Outcomes from these discussions and associated recommendations are detailed in the following sections of the report.

#### 3. CURRENT SITUATION

#### 3.1 Mrs C Anderson

Mrs C Anderson will complete her first three-year term of office on 31 December 2018. She has developed well as a Non-Executive Director over the three-year period and has demonstrated an added value in the areas of patient focus, estates and facilities services and development of system relationships where she has been

an enthusiastic participant in engagement with partners at a Non-Executive Director level. She has also demonstrated a sound, experienced approach in the handling of recruitment and personnel panels.

3.2 In addition to valued input to Board deliberations, Mrs C Anderson demonstrates her patient-focused approach in providing Non-Executive leadership for the Trust's PLACE Group meetings. She is also an active member of both the Finance & Performance Committee and People Performance Committee. Mrs C Anderson willingly responds to the additional time commitments expected from our Non-Executive Directors and she remains committed to working enthusiastically with the Board in achieving successful outcomes for the Stockport system and our patients in neighbouring areas. My recommendation is that Mrs C Anderson be appointed for a further three-year term commencing on 1 January 2019.

#### 3.3 <u>Ms A Smith</u>

Ms A Smith will complete her first three-year term of office on 31 March 2019. She too has developed well as a Non-Executive Director over this period and has steadily improved her understanding of practice within the NHS, which can at times differ significantly from practices she will have experienced in the private sector. We are fortunate in having someone with her extensive Human Resources background to provide challenge and insight on such matters around the Board table.

3.4 With workforce becoming one of the key enablers for addressing a variety of challenges, retaining an individual with skills and experience of Ms A Smith as Chair of the People Performance Committee is considered to be of paramount importance, particularly in the context of a forthcoming change in the post of Director of Workforce. Her contribution to effective working of the Board is by no means confined to workforce matters and she has ably demonstrated her ability to make a positive contribution across a range of subject areas. In addition to her role as Chair of People Performance Committee, Ms A Smith is also an effective member of both the Quality Committee and the Audit Committee. My recommendation is that Ms A Smith be appointed for a further three-year term commencing on 1 April 2019.

#### 3.5 <u>Mr M Sugden</u>

Mr M Sugden will complete the first of a maximum three one-year extensions on 31 March 2019. He is a hugely experienced Non-Executive Director who continues to have my complete confidence in his role as Deputy Chair. Deeply committed to the Trust, he undertakes his duties as Deputy with enthusiasm, great professionalism and, as a result, has increased his profile with regulatory bodies such as NHS Improvement. This has particularly been the case over the last 12 months through his regular participation in Enhanced Oversight meetings with NHS Improvement.

3.6 Mr M Sugden continues to commit his time to the Trust generously, over and above

the normal expected requirement, and he is an effective Chair of the Finance & Performance Committee. He is also a valued and respected member of the Audit Committee. Mr M Sugden's background and experience as a senior finance professional continues to prove invaluable to the Board as we seek to address a deteriorating financial position. The scale of the financial challenge faced by the Trust will not decrease during 2019/20.

3.7 The reasons stated above, i.e. Mr M Sugden's capability and performance as Deputy Chair and his financial experience, provide the rationale for seeking a further oneyear extension to his current term of office. I have discussed the situation with Mr M Sugden, whose commitment to the Trust remains undiminished, and he has confirmed his willingness to undertake a 12-month extension.

#### 4. CONCLUSION

4.1 This subject and the proposed appointments were considered at a meeting of the Nominations Committee held on 28 November 2018. Those present at the meeting unanimously endorsed the proposals and recommended the appointments to the Council of Governors for approval.

#### 5. **RECOMMENDATIONS**

- 5.1 The Council of Governors is recommended to approve Non-Executive Director appointments as follows:
  - Mrs C Anderson to be appointed for a further 3-year term commencing 1 January 2019
  - Ms A Smith to be appointed for a further 3-year term commencing 1 April 2019
  - Mr M Sugden to be appointed for a further 12-month period commencing 1 April 2019.

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Report to:	Council of Governors	Date:	5 December 2018
Subject:	Nominations Committee Report		
Report of:	Chair	Prepared by:	P Buckingham

## **REPORT FOR APPROVAL**

Corporate objective ref:	N/A	Summary of Report Identify key facts, risks and implications associated with the repor- content. The purpose of this report is to advise the Council of Governo	
Board Assurance Framework ref:	N/A	business conducted during a meeting of the Nominations Committee held on 28 November 2018.	
CQC Registration Standards ref:	N/A		
Equality Impact Assessment:	Completed X Not required		

Attachments: Annex A – Nomir	nations Committee Terms of Refer	rence
This subject has previously been reported to:	<ul> <li>Board of Directors</li> <li>Council of Governors</li> <li>Audit Committee</li> <li>Executive Team</li> <li>Quality Committee</li> <li>F&amp;P Committee</li> </ul>	<ul> <li>PP Committee</li> <li>SD Committee</li> <li>Charitable Funds Committee</li> <li>Nominations Committee</li> <li>Remuneration Committee</li> <li>Joint Negotiating Council</li> <li>Other</li> </ul>

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#### 1. INTRODUCTION

1.1 The purpose of this report is to advise the Council of Governors of business conducted during a meeting of the Nominations Committee held on 28 November 2018.

#### 2. BACKGROUND

- 2.1 The Nominations Committee met on 28 November 2018 and considered an agenda which included the following items:
  - Non-Executive Director Extensions to Terms of Office.
  - Non-Executive Director Succession Planning & Recruitment.
  - Review of Terms of Reference.

#### 3. MEETING OUTCOMES

#### 3.1 Non-Executive Director – Extensions to Terms of Office

This matter is the subject of a separate agenda item for the Council of Governors meeting on 5 December 2018.

#### 3.2 <u>Non-Executive Director – Succession Planning & Recruitment</u>

The Committee looked forward to a potential need for recruitment activity in relation to the Non-Executive Director positions filled by Dr M Cheshire and Mrs C Barber-Brown whose terms of office will expire on 31 August 2019. The Committee agreed that the Chair would commence engagement with both of the individuals to clarify their intentions in order that, if required, timely recruitment action can commence in the spring of 2019.

#### 3.3 <u>Review of Terms of Reference</u>

The Committee completed a review of its Terms of Reference and the outcomes of the review, in the form of draft Terms of Reference, are included for reference at Annex A of this report. Governors should note that the only material change to the Terms of Reference relates to the membership requirements at s2.1 which reflect the associated amendment to the Constitution approved by the Council of Governors on 25 October 2018.

3.4 The Committee noted that the terms of office of two of the Governor members of the Committee expire in December 2018 and agreed that self-nominations to fill these positions should be sought from members of the Council of Governors. This process will be coordinated by the Director of Corporate Affairs and, if necessary, the Council of Governors will be invited to elect members of the Committee during the meeting on 5 December 2018.

#### 4. **RECOMMENDATIONS**

- 4.1 The Council of Governors is recommended to:
  - Receive and note the report from the Nominations Committee
  - Approve the draft Terms of Reference included at Annex A of the report.



## NOMINATIONS COMMITTEE FOR CHAIR AND OTHER NON-EXECUTIVE DIRECTORS

### **TERMS OF REFERENCE**

#### 1. INTRODUCTION

- 1.1 The Nominations Committee, with external advice as appropriate, and with due consideration to laws and regulations and the provisions of the NHS Foundation Trust Code of Governance and other relevant guidance, will have responsibility for:
  - The identification and nomination of Non-Executive Directors, including the Chair
  - Consideration of appropriate succession planning
  - 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.

#### 2. MEMBERSHIP

- 2.1 The Nominations Committee will comprise the Chair (or, when a Chair is being appointed, the Deputy Chair unless they are standing for appointment, in which case another Non-Executive Director), Deputy Chair and five Governors (to include the Lead Governor). The Chair of another Foundation Trust will be invited to act as an independent assessor to the Nominations Committee. The Nominations Committee will consult the Chief Executive.
- 2.2 Only members of the Committee have the right to attend Committee meetings. Other individuals, such as the Chief Executive, Director of Workforce and external advisers, may be invited to attend for all, or part of, any meeting as appropriate.
- 2.3 Governor appointments to the Committee shall be for a period of three years, provided the Committee member remains a Governor of the Foundation Trust. Governors on the Committee shall have served a minimum of one year or be considered to have the relevant experience.

- 2.4 The Chair of the Committee shall be the Chair of the Board of Directors, or Deputy Chair of the Board of Directors or a Non-Executive Director. In the absence of the Chair and/or an appointed Deputy, the remaining members present shall elect one of their number to chair the meeting. The Chair shall not chair the Committee when it is dealing with the matter of succession to the Chairmanship and shall not participate in discussions concerning their performance or possible re-appointment.
- 2.5 Members conflicted on any aspect of an agenda presented to the Committee, such as succession planning for a Non-Executive Director vacancy or the Chair's position shall declare their conflict and withdraw from the meeting. On matters of succession planning for the Chair and in the event of individuals referenced at s2.1 above having to withdraw from a meeting, the Committee should maintain, wherever possible, for the purpose of such discussions two non-conflicted (voting) Non-Executive Directors and if necessary one would be invited to chair the Committee.

#### 3. SECRETARY

3.1 The Trust Secretary or their nominee shall act as the Secretary to the Committee.

#### 4. QUORUM

4.1 The quorum necessary for the transaction of Committee business shall be three Governors and one Non-Executive Director (the Chair counts as a Non-Executive Director). A duly convened meeting of the Committee at which a quorum is present shall be competent to exercise all or any of the authorities, powers and discretions vested in or exercisable by the Committee.

#### 5. FREQUENCY OF MEETINGS

5.1 The Committee shall meet at least twice a year and at such other times as the Chair of the Committee shall require.

#### 6. NOTICE OF MEETINGS

- 6.1 Meetings of the Committee shall be called by the Secretary to the Committee at the request of the Chair of the Committee.
- 6.2 Unless otherwise agreed, notice of each meeting confirming the venue, time, date, together with an agenda of items to be discussed and supporting papers, shall be forwarded to each member of the Committee no later than five working days before the date of the meeting. A copy of the agenda of items to be discussed will be forwarded to other Governors at the same time.

#### 7. MINUTES OF MEETINGS

- 7.1 The Secretary shall minute the proceedings and resolutions of all meetings of the Committee, including recording names of those present and in attendance.
- 7.2 The Secretary shall ascertain, at the beginning of each meeting, the existence of any conflicts of interest and minute them accordingly.
- 7.3 Minutes of Committee meetings shall be circulated promptly to all members of the Committee and, once agreed, to all members of the Board of Directors and Council of Governors unless a conflict of interest exists.

#### 8. ANNUAL MEMBERS' MEETING

8.1 The Chair of the Committee shall attend the Annual Members' Meeting prepared to respond to any members' questions on the Committee's activities.

#### 9. DUTIES - NOMINATIONS

- 9.1 Identification and nomination of Non-Executive Directors, including the Chair
- 9.2 Having reviewed the existing Succession Plan, the Committee should consider and prepare an appropriate person specification and description of the role in advance of a recruitment process.
- 9.3 The Committee will oversee the recruitment process ensuring that open advertising is used to ensure candidates from a wide range of backgrounds are able to apply.
- 9.4 The Committee may on occasions use the services of external advisers to facilitate a search for candidates.
- 9.5 The Committee will have final responsibility for shortlisting candidates using objective criteria and deciding on the details of the selection process.
- 9.6 The Committee will oversee and may participate in the selection process on behalf of the Council of Governors and be responsible for the identification and nomination of candidates for final approval by the Council of Governors. The Committee will ensure that there is a majority of Governors on the interview panel.
- 9.7 Ensure that on appointment to the Board of Directors, Non-Executive Directors receive a formal letter of appointment setting out clearly what is expected of them in terms of time commitment, Committee service and involvement outside Board meetings, and that all Non-Executive Directors have confirmed that they have the

time to serve. Terms and conditions of employment should be made available for public inspection.

#### **10.** DUTIES – SUCCESSION PLANNING

- 10.1 Consideration of appropriate succession planning.
- 10.2 Periodically review the balance of skills, knowledge, experience and diversity of the Non-Executive Directors and make recommendations to the Board of Directors and report to the Council of Governors with regard to any outcomes.
- 10.3 Give consideration to succession planning for Non-Executive Directors taking into account the challenges and opportunities facing the Trust and what skills and expertise might be needed by the Board in future. Advise the Chair of any suggested development needs for Non-Executive Directors
- 10.4 Keep the leadership needs of the Trust under review at Non-Executive level so that it continues to operate effectively.
- 10.5 Where an existing Non-Executive Director seeks re-appointment, the Nominations Committee should look at the existing candidate against the current job description and person specification for their role at the Trust. This job description should be reviewed on an ongoing basis by the Nominations Committee. Due consideration should also be given to the relevance of the NHS Foundation Trust Code of Governance and guidance on such a re-appointment. Once these processes have been undertaken, the re-appointment can be put to the Council of Governors for approval.
- 10.6 The Committee shall make recommendations to the Council of Governors concerning the proposals for the position of Deputy Chair, where appropriate and with due regard for the opinions of the Board of Directors.
- 10.7 The Chair will consult with the Committee on the appointment of one of the Non-Executive Directors as the Senior Independent Director.

#### 11. DUTIES – TERMS AND CONDITIONS

- 11.1 Review and make recommendations to the Council of Governors with regard to the appropriate terms and conditions for Non-Executive Directors.
- 11.2 Periodically consider the scale of remuneration of Non-Executive Directors, including the Chair, taking account of all relevant NHS Foundation Trust policies and any available market comparisons.

- 11.3 Review other terms and conditions of office including appropriate time commitments and the range of duties contained in the job descriptions required by all Non-Executive Directors.
- 11.4 To make appropriate recommendations to the Council of Governors on any alterations to the terms and conditions including remuneration.

# 12. DUTIES – OTHER

- 12.1 Coordination of the process for removal of the Chair and Non-Executive Directors in accordance with requirements set out in the Trust Constitution.
- 12.2 Act as the focal point for reviewing the annual appraisals of the Chair and Non-Executive Directors.

## 13. **REPORTING**

- 13.1 The Committee Chair shall report formally to the Council of Governors on its proceedings after each meeting.
- 13.2 A statement will be included in the Trust's Annual Report about the Committee's activities, the process used to make appointments and to explain if external advice or open advertising has not been used.
- 13.3 The Committee shall make available upon request, in a format they deem appropriate, information regarding the attendance of all members at Committee meetings.
- 13.4 The Committee will at least once a year review its own performance and compliance with its terms of reference to ensure it is operating at maximum effectiveness and recommend any changes it considers necessary to the Council of Governors.

# 14. AUTHORITY

- 14.1 The Committee is a Committee of the Council of Governors and has no executive powers, other than those specifically delegated in these terms of reference.
- 14.2 The Committee is authorised to obtain, at the Trust's expense, external professional advice on any matter within its terms of reference.

## 15. REVIEW

15.1 The Terms of Reference will be reviewed every three years.

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Report to:	Council of Governors	ncil of Governors Date:	
Subject:	Assessing Collective Performance	- Council of Gover	nors
Report of:	Director of Corporate Affairs	Prepared by:	P Buckingham

# **REPORT FOR DISCUSSION**

Corporate objective ref:	N/A	Summary of Report Identify key facts, risks and implications associated with the report content. The purpose of this report is to feedback outcomes from a
Board Assurance Framework ref:	N/A	Collective Performance assessment to the Council of Governors.
CQC Registration Standards ref:	N/A	
Equality Impact Assessment:	Completed X Not required	

Attachments: Annex A – Ma	ster Collective Performance Template	
This subject has previously been reported to:	<ul> <li>Board of Directors</li> <li>Council of Governors</li> <li>Audit Committee</li> <li>Executive Team</li> <li>Quality Committee</li> <li>F&amp;P Committee</li> </ul>	<ul> <li>PP Committee</li> <li>SD Committee</li> <li>Charitable Funds Committee</li> <li>Nominations Committee</li> <li>Remuneration Committee</li> <li>Joint Negotiating Council</li> <li>Other</li> </ul>

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## 1. INTRODUCTION

1.1 The purpose of this report is to feedback outcomes from a Collective Performance assessment to the Council of Governors.

# 2. BACKGROUND

- 2.1 Governors considered a draft assessment template prior to the Council of Governors meeting on 25 October 2018. The discussion resulted in suggested additions / amendment of the content and it was agreed that the revised template would be further reviewed at the next Governance & Membership Committee meeting.
- 2.2 The revised template was subsequently considered and endorsed at the Governance & Membership Committee meeting held on 5 November 2018. A copy of the final assessment template was then circulated to all members of the Council of Governors for completion.

# 3. CURRENT SITUATION

- 3.1 Completed templates were received from eleven Governors and responses were consolidated and summarised by the Director of Corporate Affairs. A copy of the consolidated template is included for reference at Annex A of the report.
- 3.2 The overall outcome from the assessment is encouraging, with most respondents responding positively to all questions in the assessment. A number of themes for consideration by the Council of Governors, which could form the basis of a forward development programme, have been identified as follows:
  - Enhancing understanding and practical application of Roles & Responsibilities
  - Enhancing understanding and practical application of Holding to Account responsibilities
  - Continuing development of Committee arrangements
  - Improving Governor communication and engagement with members
- 3.3 In addition to consideration of the above, the Council of Governors should also consider response to Question 4, relating to suggestions as to how the effectiveness of meetings could be improved.

# 4. **RECOMMENDATIONS**

- 4.1 The Council of Governors is recommended to:
  - Consider the outcomes of the Effectiveness Review included at Annex A of the report.
  - Adopt the areas identified at s3.2 of the report as the basis for a forward Development Programme for the Council of Governors.

# COUNCIL OF GOVERNORS – EFFECTIVENESS REVIEW NOVEMBER 2018

	Question		Comments
1.	Does the frequency of Council meetings comply with requirements in the Constitution? (i.e. minimum of 4 meetings per year)	Yes	The Council complies with meeting requirements but several respondents noted implications of changes to meeting dates and impact on attendance levels.
2.	Are Council meetings well attended?	Yes	The majority of respondents considered that meetings are well attended although some commented that attendance levels are variable. Potential link to changes in meeting dates.
3.	Do all Governors participate at Council meetings and do you feel that the meetings are effective?	Yes / No	<ul> <li>A mix of responses with a summary of observations as follows:</li> <li>Newly elected Governors may not have the knowledge to contribute</li> <li>Obvious leaders can sometimes make participation difficult for fear of 'saying the wrong thing'</li> <li>Some people contribute more than others, reflecting level of knowledge</li> <li>It's about what some bring to the table and how confident they are to speak up and challenge</li> <li>There are a small number who attempt to monopolise meetings through lengthy articulation of their own views</li> </ul>
4.	Any suggestions for how the effectiveness of meetings could be improved?	N/A	<ul> <li>A number of suggestions were made by respondents as follows:</li> <li>All Governors having knowledge and understanding of their Role &amp; Responsibilities</li> <li>Stronger chairing of meetings and more direction from the Chair</li> <li>Governors having fully prepared for meetings</li> <li>Meeting environment needs to be more welcoming so that people feel at ease to contribute</li> <li>More constructive participation and fewer 'side conversations' which affect ability to focus</li> <li>Need to continue to develop practice and recognise the skills and experience that all Governors are able to bring to discussion</li> <li>The Chair could do more to seek contribution from a wider group of participants</li> </ul>

			The Council pre-meeting is not an effective use of time.
5.	Does the Council participate in agenda setting and forward planning for meetings?	Νο	Respondents noted the involvement of the Lead Governor in agenda planning with some suggesting that there was limited input from the wider Council.
6.	Do you feel that the quality of reports to Council and Governor access to information is satisfactory?	Yes	<ul> <li>Overall, respondents considered the quality of reports to be satisfactory but a number of comments were made as follows:</li> <li>Some reports are too lengthy and would benefit from an Executive Summary</li> <li>Volume can appear intimidating but format constantly improving</li> <li>Generally, the reports that are produced are helpful</li> <li>Development of a 'Governor Hub' would provide Governors with better access to general information.</li> </ul>
7.	Are the Role and Responsibilities of Governors clearly documented and understood?	Yes	<ul> <li>Respondents generally considered that Roles &amp; Responsibilities are understood with a number of comments made as follows:</li> <li>Workshops to enhance Governor understanding would be helpful</li> <li>Roles &amp; Responsibilities understood but can sometimes restrict the scope for discussions</li> <li>Not sure that all Governors fully understand their role and how it fits in with the Trust</li> </ul>
8.	Do you feel that effective use is made of the time you are able to commit as a Governor?	Yes	<ul> <li>While the majority of respondents responded positively, comments were made as follows:</li> <li>Would like to have more of a role in the local community</li> <li>At times there is a degree of negativity at Council / Committee meetings and time could be used better for more constructive discussion</li> <li>There is scope for better sharing of responsibilities amongst Governors to even up opportunities for involvement.</li> </ul>

9.	Has the Council of Governors appointed one of its number as Lead Governor?	Yes	
10.	Do you think that there should be a Deputy Lead Governor?	Yes / No	Respondents were fairly evenly split on this subject. Those in favour suggested that a Deputy position would aid development and succession planning with nominated cover in the event of unplanned absences.
11.	Does the Council discharge its 'holding to account' responsibilities effectively?	Yes / No	<ul> <li>The responses received suggest a degree of uncertainty in relation to this question, with a sample of observations as follows: <ul> <li>This may be improved if all Governors felt that there contributions were welcomed.</li> <li>A Holding to Account training session would be beneficial</li> <li>The approach of the Non-Executive Directors is crucial in building a bridge between 'us and them'</li> <li>Could do very much better e.g. being adequately briefed on reasons for delayed transfers of care</li> <li>Not sure the Council always thinks of this part of the role</li> <li>Could be increased through meetings between Non-Executive Directors and Governors</li> <li>Not sure that we 'feel' the burden of accountability in quite the way we should</li> <li>Patchy; it is essential that Non-Executive Directors are observed in action</li> </ul> </li> </ul>
12.	Does the Council receive an annual report from External Audit and how effectively is this presented?	Yes	<ul> <li>All respondents responded positively to this question with some mixed views on effectiveness of presentation as follows:</li> <li>Relevance of presentation to Governors has improved over the course of the contract</li> <li>The report is complicated and not easy to deliver to a large forum</li> <li>It would help if the report was simplified</li> <li>Report delivered very efficiently</li> </ul>

13.	Does the Council have arrangements for sub-Committees and are these effective?	Yes	<ul> <li>Positive responses to this question though not necessarily in relation to effectiveness</li> <li>Only 2 of the 3 Committees have been operating effectively in 2018.</li> <li>The Quality Standards and Patient Experience Committees should be merged</li> <li>The Committee process is cumbersome and confusing. If Committees don't have decision making powers, why have them?</li> <li>Committee Chairs should have a greater involvement in agenda planning</li> <li>Could be better utilised with consistent attendance and would benefit from a 'holding to account' methodology.</li> <li>Effectiveness is variable and evolving</li> <li>Need to stick to scheduled dates for meetings</li> </ul>
14.	Do each of the Committees have Terms of Reference and are these subject to periodic review?	Yes	All respondents responded positively to this question.
15.	Is the Council appropriately involved in the recruitment and appointment of the Chair and other Non-Executive Directors, and has the Council approved the appointment of the Chief Executive?	Yes	<ul> <li>All respondents responded positively to this question with the following observations made:</li> <li>Some people would perhaps like a greater degree of involvement</li> <li>Interviews should not be conducted by the same three Governors</li> <li>Yes, but not sure that if I were a candidate I would be inspired to work for the organisation</li> <li>A core team tend to get involved as willing to devote time</li> </ul>
16.	Does the Council have the opportunity to review and comment on the Trust Strategy and Operational Plan?	Yes	<ul> <li>All respondents responded positively to this question with the following observations made: <ul> <li>Greater feedback would be appreciated on progress and/or changes to plans</li> <li>Query the depth of knowledge to make constructive suggestions, are their sections which would be more relevant for review by Governors</li> <li>Not everyone seems to want to look to the future on a strategic basis</li> </ul> </li> </ul>

17.	Do Governors effectively communicate and engage with members?	Yes / No	<ul> <li>A mix of responses with perhaps the majority feeling that communication and engagement with members could be improved.</li> <li>There are no effective ways to achieve this</li> <li>Inability to reach broad constituency due to finance and time limitations</li> <li>Partially</li> <li>Lack of opportunities so ad hoc at best</li> <li>Excited about how we might build on Neighbourhoods to raise profile but not sure we're on the starting blocks at the moment</li> <li>Communication avenues don't promote a natural flow of communication with members and the public. Could more be done in our local communities</li> <li>Outcomes form a members survey may help with this question.</li> </ul>
			• Outcomes form a members survey may help with this question.

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Report to:	Council of Governors	Date:	5 December 2018
Subject:	Governor Committee Arrangemen	ts	
Report of:	Director of Corporate Affairs	Prepared by:	P Buckingham

# **REPORT FOR APPROVAL**

Corporate objective ref:	N/A	Summary of Report Identify key facts, risks and implications associated with the report content. The purpose of this report is to propose a review of Committee
Board Assurance Framework ref:	N/A	arrangements to the Council of Governors for approval.
CQC Registration Standards ref:	N/A	
Equality Impact Assessment:	Completed X Not required	

Attachments: Appendix 1 – Scho	edule of Meetings 2019	
This subject has previously been reported to:	<ul> <li>Board of Directors</li> <li>Council of Governors</li> <li>Audit Committee</li> <li>Executive Team</li> <li>Quality Committee</li> <li>F&amp;P Committee</li> </ul>	<ul> <li>PP Committee</li> <li>SD Committee</li> <li>Charitable Funds Committee</li> <li>Nominations Committee</li> <li>Remuneration Committee</li> <li>Joint Negotiating Council</li> <li>Other</li> </ul>

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#### 1. INTRODUCTION

1.1 The purpose of this report is to propose a review of Committee arrangements to the Council of Governors for approval.

## 2. BACKGROUND

- 2.1 The Council of Governors last reviewed its Committee arrangements on 6 December 2017 and approved establishment of the following Committees:
  - Governance & Membership Committee
  - Patient Experience Committee
  - Quality Standards Committee
- 2.2 Discussions at recent Committee meetings and experience over the past 12 months suggest that the arrangements should be subject to further review.

## 3. CURRENT SITUATION

- 3.1 While the Governance & Membership Committee and the Quality Standards Committee have been operating effectively, this has not been the case with the Patient Experience Committee. This has been primarily due to difficulties in identifying dates for meetings that are acceptable for sufficient members to attend to achieve a quorum. As a result of this situation, business which would ordinarily be considered by the Patient Experience Committee was included in the agenda for the most recent Quality Standards Committee meeting held on 15 November 2018. This worked effectively. Consequently, it is proposed that the Committees, and their membership, be merged to form a Quality of Care Committee.
- 3.2 Meetings of the Governance & Membership Committee have been operating effectively throughout the year. However, the subject of communication and engagement with both members and the wider public is a growing area of business for the Council, and this is borne out by the outcomes from the recently completed Effectiveness Review. Consequently it has been suggested that a separate Membership Engagement Committee should be established in order to provide a specific Governor focus in this subject area. The Council of Governors is recommended to consider this proposal.

## 4. GOVERNOR COMMITTEE MEMBERSHIP

Governance	Patient Experience	Quality Standards
Les Jenkins (Chair)	Linda Appleton	Charles Galasko
Eve Brown	Lance Dowson	Caroline Mitchell
Roy Greenwood	Tad Kondratowicz	Ron Catlow
Robert Cryer	Lynne Woodward	Gerry Wright (Chair)
Tom McGee	Julie Wragg (Chair)	Tony Johnson
		Richard King

4.1 Membership of the current Governor Committees is as follows:

- 4.2 Should the proposed merger of the Patient Experience and Quality Standards Committees be approved, it is suggested that the Committee membership should also be merged.
- 4.3 Any other revisions to Committee arrangements would necessitate revised membership arrangements. In addition, recently-elected Governors should be invited to join one of resultant Committees.

### 5. MEETING DATES 2019

5.1 Meeting dates for 2019 are included for reference at Appendix 1 of the report. Given the likelihood of revised Committee arrangements, it is proposed that the merged Quality of Care Committee will take the dates for the Quality Standards Committee. Any Membership Engagement-focused Committee would take the dates identified for the Patient Experience Committee.

#### 6. **RECOMMENDATIONS**

- 6.1 The Council of Governors is recommended to:
  - Consider and approve the proposed changes to Committee arrangements.
  - Note the meeting dates for 2019 included at Appendix 1.

#### SCHEDULE OF MEETINGS 2019

Governance & Membership	Patient Experience	Quality Standards	Council of Governors*
Mon, 4 March 2019 @ 2.00pm	Thu, 7 March 2019 @ 2.00pm	Thu, 14 March 2019 @ 2.00pm	Mon, 8 April 2019 @ 4.00pm
Mon, 3 June 2019 @ 2.00pm	Thu, 6 June 2019 @ 2.00pm	Thu, 13 June 2019 @ 2.00pm	Wed, 17 July 2019 @ 4.00pm
Mon, 2 September 2019 @ 2.00pm	Thu, 5 September 2019 @ 2.00pm	Thu, 12 September 2019 @ 2.00pm	Mon, 7 October 2019 @ 3.00pm
Mon, 4 November 2019 @ 2.00pm	Thu, 7 November 2019 @ 2.00pm	Thu, 14 November 2019 @ 2.00pm	Thu, 5 December 2019 @ 2.00pm
*Council of Governors meetings will r	ormally be preceded by an informal de	velopment session for Governors.	•

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Report to:	Council of Governors	Date:	5 December 2018
Subject:	Trust Strategy Consultation - Prog	ress Report	
Report of:	Director of Strategy, Planning & Partnerships	Prepared by:	Associate Director Strategy & Planning

# **REPORT FOR INFORMATION**

Board Assurance	Corporate objective ref:	S1 & S2	Summary of Report This paper provides an update on the consultation process underway on the refreshed Trust strategy.
Standards ref:			The Council of Governors is requested to note the update provided, specifically the consistent themes that have emerged to date and the proposed action and response that will developed.
	-		
Equality Impact Assessment: Not required		Completed	

Attachments:		Itation Sessions Complete Itation Sessions Planned	
This subject has previo	ously been	<ul> <li>Board of Directors</li> <li>Council of Governors</li> <li>Audit Committee</li> <li>Executive Team</li> <li>Quality Committee</li> <li>Finance &amp; Performance</li></ul>	<ul> <li>People Performance</li></ul>
reported to:		Committee	Committee <li>Charitable Funds Committee</li> <li>Exec Management Group</li> <li>Remuneration Committee</li> <li>Joint Negotiating Council</li> <li>Other</li>

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#### 1. INTRODUCTION

1.1 This paper provides an update on the consultation process underway on the refreshed Trust strategy.

## 2. BACKGROUND

2.1 The consultation process for the Refreshed Trust Strategy began in October 2018. Sessions booked from 1st October to 31st December 2018 are focusing on staff and key partners/stakeholders; the patient consultation process will begin in January 2019. All sessions are presented by Hugh Mullen, Director of Strategy, Planning and Partnerships or Andy Bailey – Associate Director Strategy & Planning with a member of the planning team to record attendance and document discussions. The majority have also been attended by Holly Cubitt, Head of Communications.

## 3. CURRENT SITUATION

## 3.1 Sessions

- 3.1.1 Agenda slots have been arranged at existing forums such as Business Group Quality Boards, JLNC and Council of Governors. Strategy specific sessions have been delivered to various staff groups which to date include Pharmacy staff, Estates & Facilities, IT and Finance and more of these are planned in the diary. The first of five 'all-staff' drop in sessions have taken place, with 2 more arranged at the Stepping Hill site and two booked in the Community.
- 3.1.2 As of Friday 23rd November, 18 sessions have taken place. A total number of 326 staff have received the briefing in person and had the opportunity for discussion and to give feedback (see annex a). A further 20 sessions have been confirmed and 5 more are planned but dates are not yet booked (see annex b).
- 3.1.3 Briefing sessions have all included a core set of slides with some slides adapted appropriate to the audience.

## 3.2 Feedback

3.2.1 Comments and feedback at each session is captured and recorded by a member of the Strategy & Planning Team. Common themes emerging from feedback so far are as follows:

Theme	Proposed action/response
Not in language that front line staff will understand, needs to be basic; focus on the point and purpose of the strategy, some elements are not consistent	<ul> <li>Full review of written documents with support from Head of Comms</li> <li>Produce revised version at end of consultation period</li> </ul>
Provide a summary document for managers to disseminate/hold sessions	<ul> <li>Develop summary document with support from Comms; feedback is drawing out ideas of what would be most useful for managers</li> </ul>
Staff potentially not understanding how their work contributes to delivering the aims of the	<ul> <li>Develop some examples of how different roles contribute to our five priorities –</li> </ul>

strategy	tailor these to different staff groups; identify some staff members as real examples
Sequencing of the five priorities in the briefing presentation and strategy document – comments received this suggests a priority order Leadership development priority: • wording suggests it does not include non-clinical leaders	<ul> <li>Acknowledged no intended priority order of how these have been presented</li> <li>Look at way of presenting these different visually</li> <li>Look at alternative wording at end of consultation process for discussion by EMG</li> </ul>
<ul> <li>seems to focus on leadership only and not staff development more broadly</li> <li>Not enough emphasis on some services:         <ul> <li>End of Life services</li> <li>Community teams</li> </ul> </li> </ul>	<ul> <li>Meet with Palliative Care lead – will incorporate some content on this area</li> <li>Associate Nurse Director to support development of more positive emphaisis on community services</li> </ul>
Financial priority – potential conflict between development and investment in services whilst the Trust is borrowing money and has a massive deficit	• Links between quality, operational performance and clinical services efficiency to be clearer in terms of how these support delivery of our financial priorities
Clinical Services Strategy – acknowledgement that very little of this is well defined	<ul> <li>Strategy &amp; Planning team to develop a structured approach to development and facilitate support to services – to start Jan 2019</li> </ul>

#### **All-User Communications**

A Team Brief email circulated to all staff on 01.11.18 included links to the Strategy document, a 7 Minute Briefing on the Strategy, and a 7 Minute Briefing on the consultation process. The email also detailed dates/times and venues for the 'all-staff' drop in sessions.

The Weekly Update email to all users on 19.11.18 also included the document links and the date/time of the first all-staff drop-in.

#### 4. CONCLUSION

3.3

- 4.1 The approach being taken has been received positively and provided the chance to engage with teams and members of staff who otherwise may have this opportunity.
- 4.2 The briefing sessions have gathered useful intelligence about the effectiveness of methods of communication. There has been differing levels of awareness of the strategy materials in circulation via all user email communications. It has also provided useful feedback to inform effective communication on the strategy going forward. The Associate Director Strategy & Planning and Head of Communications are meeting to develop a plan post consultation.

#### 5. **RECOMMENDATIONS**

5.1 The Council of Governors is requested is note the update provided.

# **ANNEX A** - Consultation Sessions Complete

# Sessions Complete (as of Friday 23rd Nov 2018)

Meeting	Venue	Date/Time of Meeting	Number of Attendees
Strategy & Planning Team Session	Pinewood House	23.10.18 14.00 - 15.30	10
Trust Members Annual General Meeting	Edgeley Park	09.10.18 15.00 - 18.30	44
Council of Governors	Lecture Theatre Pinewood House	25.10.18 16.00 - 18.00	20
Information/IT/EPR (Session 1)	EPR Meeting Room	29.10.18 14.00 - 15.00	8
JLNC Meeting	Oak House	09.11.18 16.25	11
Information/IT/EPR (Session 2)	EPR Meeting Room	12.11.18 09.00 - 10.00	9
JCNC	Committee Room Oak House	12.11.18 13.45 - 14.45	10
Surgery, GI & CC BG Assurance Board	Committee Room Oak House	14.11.18 14.00 - 14.45	18
Women, Children & Diagnostics Quality Board	Education Room Maternity	14.11.18 15.00 - 16:00	15
Pharmacy Technical Staff Team Meeting	Pharmacy Tea Room	15.11.18 08:45 - 09:30	29
Palliative Care	David Waterman's Office	15.11.18 11:00 - 12:00	1
Pharmacy Manufacturing and Aseptics Teams	Pharmacy Loading Bay	19 Nov 13.00 - 14.00	32
All staff drop in	Maternity Education Room	20.11.18 12.00 - 13.30	2
Finance Team	Pinewood House	20.11.18 15.00 - 16.00	56
Estates & Facilities Finance & Performance Board	Estates Conference Room	21.11.18 10.00 - 10.45	13
Therapy Board	Pinewood House	21.11.18 11.00 - 12.00	17
Integrated Care Quality Board	Rowan Suite	22.11.18 11.00 - 12.00	14
Medicine Operation Planning and Strategy Workshop	DMOP Conference Room	22.11.18 14.00 - 17.00	17
	1	Total	326

## **ANNEX B -** Consultation Sessions Planned

#### **Sessions Planned**

Meeting	Venue	Date/Time of Meeting
Dhannaaista Taana Maatiaa	Dharmaar	20.11.10
Pharmacists Team Meeting	Pharmacy	28.11.18 08:45 - 09:30
East Cheshire CCG Management Meeting	New Alderley House	28.11.18 1.00pm
HR Directorate Dialogue	Lecture Theatre Pinewood	28.11.18 14.30 - 15.00
QCNW Team Strategy Specific Session	QCNC Main Office	29.11.18 13.00 - 14.00
Viaduct - Senior Management Team	Kingsgate House	29.11.18 16.00 - 17.00
All staff drop in	Pinewood G18	29.11.18 15.30 - 17.00
Associate Nurse Directors Meeting	Alison Lynch Office	30.11.18 11-12
Community drop-in session	Hazel Grove Clinic Room 2	06.12.18 3.30-5pm
Community drop-in session	Kingsgate House	07.12.18 3.30-4.30
All staff drop in	G15 Pinewood House	10.12.18 09.00 - 10.30
Stockport CCG Wider Management Team	Stopford House	10.12.18 1pm - 2pm
Stockport Council Corporate Leadership Team Meeting	Town Hall	11.12.18 09.30 - 11.30
Ward Managers Meeting	Lecture theatre A	12.12.18 09.00 - 10.00
Facilities Staff drop-in	Lecture Theatre B	13.12.18 16.00 - 16.30
Theatres Team Meeting	Theatres	17.12.18 18.00
GM Combined Authority Strategy Session	Piccadilly Place	18.12.18 11am - 12pm
Facilities Staff drop-in	Lecture Theatre B	19.12.18 08.00 - 08.30
Children's Therapies Strategy Meeting	Beckwith House -	20.12.18 14.30 - 15.30
To be confirmed	1	1
NHSI		
North Derbyshire CCG		
Pennine Care		
Health Watch		
All staff drop in - night session		

#### Report of: Les Jenkins

#### Date of Meeting: 5 December 2018

### **Report of the Governance & Membership Committee**

#### 1. Present

<b>Governors Present</b>
Les Jenkins
Eve Brown
Robert Cryer
Tom McGee
Roy Greenwood

Governor Observers Gerry Wright Caroline Mitchell Tony Johnson Terry Morley **Trust Representatives** Paul Buckingham Helen O'Brien Holly Cubitt

#### 2. Meetings held on

A meeting of the Committee was held on 5 November 2018.

#### 3. Agenda Items

- 1. Membership Report
- 2. Membership Strategy
- 3. Governors Tenure Next Steps
- 4. Assessing Collective Performance
- 5. Bramhall & Cheadle Vacancies
- 6. Strategic Updates

## 4. Issues to be brought to the attention of the Council of Governors

## 1. Membership Report

Mrs H O'Brien, Communications Manager, presented a Membership Report which covered the following subject areas:

- Membership Numbers
- Stepping Up November Edition
- Members Health Talk Evaluation
- Annual Members' Meeting Evaluation

The Committee noted positive opening rates for e-mail communication and considered an overview of content for the November 2018 Stepping Up publication. The Committee considered evaluation and lessons learned from the Annual Members' Meeting which was held on 9 October 2018 at Edgeley Park, Stockport. The Committee noted the positives from the event, in relation to effectiveness of the 'Question Time' and round table discussions, but fully endorsed the views set out in the report relating to shortcomings of the venue.

## 2. Membership Strategy

Following a discussion on membership numbers at the previous meeting, the Committee had agreed to include the Membership Strategy as an agenda item for the November meeting. This resulted in a lively and productive discussion with many

suggestions made as to how membership engagement could be developed going forward. The Committee was advised by Mrs H Cubitt, Head of Communications, of work to maintain and enhance engagement with 'hard to reach' groups and Mrs Cubitt's work to develop a comprehensive Communications & Engagement Strategy for the Trust was noted. A recurring theme of suggestions made by those present, was the need for closer work with partner organisations and to seek engagement with a wider audience than the Trust's membership. The Committee agreed that a small working group of Governors should be established to work with Mrs H Cubitt and Mrs H O'Brien to further develop these themes.

## 3. Governors Tenure - Next Steps

The Committee discussed the question of including a maximum tenure for Governors in the Trust's Constitution. This followed consideration of the subject at the Council of Governors meeting held on 25 October 2018. Again, there was a lively debate, during which the Committee discussed the merits and justification both for and against the proposal. While it is clear that there are differing views on this subject, the Committee agreed that the matter needs to be definitively resolved and that, to achieve this, it will be necessary to put a documented and balanced proposal to the Council of Governors for a decision. The Committee further agreed that, before this action is taken, it would be beneficial to take up an offer from the Chair to hold one-to-one discussions with Governors on this subject. Arrangements will be made for this exercise to be completed.

## 4. Collective Performance

The Committee endorsed a template for completion by individual Governors as a means of assessing collective performance of the Council of Governors. Responses will be consolidated by the Director of Corporate Affairs who will prepare a report on outcomes for consideration at the Council of Governors meeting on 5 December 2018.

## 5. Bramhall & Cheadle Vacancies

The Committee considered current vacancies in the Bramhall & Cheadle constituency and noted in particular the proximity of the next constituency election which is scheduled to commence in July 2019. Any process for election in the interim would incur additional cost and, if successful, would result in candidates being elected for a limited period. The Committee agreed that vacancies in the constituency should be held until the next elections in July 2019. Both of the remaining Governors, Dr R Cryer and Mr T Johnson were present at the meeting and endorsed this outcome.

## 6. Strategic Updates

Mr P Buckingham briefed the Committee on the current position for the following subject areas:

- Urgent Care Performance
- CQC Well Led Review
- Development of Refreshed Trust Strategy

#### Report of: Richard King

#### Date of Meeting: 5 December 2018

## **Report of the Quality Standards Committee**

#### 1. Present

Governors Present
Richard King (in the Chair)
Linda Appleton
Ron Catlow
Tony Johnson
Caroline Mitchell

Governor Observers Eve Brown Robert Cryer Les Jenkins Terry Morley **Trust Representatives** Paul Buckingham Soile Curtis Helen Kershaw Emma Rogers

#### 2. Meetings held on

A meeting of the Committee was held on 15 November 2018.

#### 3. Agenda Items

- 1. Quality Improvement Plan Quarter 2
- 2. Patient Safety Walk Rounds Update & Feedback
- 3. Quality Improvement Priorities Quarter 2
- 4. Update on Inpatient Survey Outcomes
- 5. Patient Experience Report Quarter 2
- 6. Overview of CQC Inspections

## 4. Issues to be brought to the attention of the Council of Governors

## 1. Quality Improvement Plan – Quarter 2

Mr P Buckingham presented a report which detailed progress against seven themes from the Quality Improvement Plan as at the end of Quarter 2 2018/19. The Committee noted good progress made during the first two quarters and was advised that the expectation was that any actions rated as 'off track but recoverable' would be achieved by the end of 2018/19.

## 2. Patient Safety Walk Rounds – Update & Feedback

Ms H Kershaw presented a report which provided information on patient safety walk rounds undertaken between October 2017 and September 2018 and thanked Governors for their participation in the walk rounds. The Committee noted themes identified along with associated mitigating actions. Ms H Kershaw advised that the walk rounds had been very well received by staff and patients and that any issues identified had been dealt with in a timely manner.

The Committee was advised that the next set of patient safety walk rounds were scheduled to take place on 14 December 2018 between 1pm and 3pm and that the schedule for 2019 was in the process of being arranged.

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# 3. Quality Improvement Priorities – Quarter 2

Mr P Buckingham presented a report which detailed progress against Quality Improvement Priorities as at the end of Quarter 2 2018/19. He advised that the outcomes of the priorities would be reported in the Quality Account 2018/19. Mr P Buckingham noted that the improvement priorities had been identified following workshops held in January 2018, which had included Governors, staff and other stakeholders. It was noted that Ms A Lynch would be repeating a similar process in January 2019 to identify priorities for 2019/20. The Committee noted good progress made against the priorities.

# 4. Update on Inpatient Survey Outcomes

As the meeting of the Patient Experience Committee did not go ahead in November 2018, the agenda incorporated some patient experience related items. Mrs E Rogers, Matron for Patient Experience, delivered a presentation on Inpatient Survey results as at October 2018. The presentation covered the following subject headings:

- Introduction
- Inpatient Survey: Progress & Plan
- Data
- Question 1: Nutrition
- Question 2: Staffing
- Question 3: Communication
- Question 4a & 4b: Communication
- Question 5a & 5b: Pain
- Question 6: Communication.

## 5. Patient Experience Report – Quarter 2

Mrs E Rogers presented a report which provided information on patient experience and noted that the Trust collected patient feedback from a number of sources, including iPad Inpatient Surveys, Friends & Family Test, Care Opinion and National Surveys. The Committee noted that key themes related to discharge planning, noise at night and communication. Mrs E Rogers provided an overview of mitigating actions and briefed the Committee on the successful launch of Care Opinion in July 2018.

Ms L Appleton presented a report regarding the hospital library service, noting that the issue of hospital library had been raised during a recent patient safety walk round. She commented on issues regarding the current mobile library service to wards, including the inadequate space for storing books and the consequent impact on the ability to rotate the books. The Committee discussed whether there was a need for a hospital library, particularly given the urgent need to reduce the number of 'stranded' patients and bearing in mind that the Trust's patient Wi-Fi system was being upgraded. Ms L Appleton agreed to discuss this matter further with the Volunteer Manager.

## 6. Overview of CQC Inspections

Mr P Buckingham briefed the Committee on the Care Quality Commission (CQC) inspections undertaken during 2018. He advised that the cycle of inspections had commenced in June 2018 when the Trust had received the provider information request from CQC, following which the inspection regime had covered a Use of Resources Assessment on 6 September 2018, followed by an unannounced Core Services Inspection during the week commencing 10 September 2018 and a Well-Led Review on 2-4 October 2018. The Committee was advised that the Trust was expecting to receive the draft report imminently for factual accuracy checking, following which the final report was due to be published in December 2018.