

COUNCIL OF GOVERNORS MEETING

6 OCTOBER 2021

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Stockport
NHS Foundation Trust

Meeting of the Council of Governors
Wednesday, 6 October 2021

Held at 3.00pm via Webex
(This meeting is recorded on Webex)

AGENDA

Time			Enc	Presenting
1500	1.	Apologies for Absence		
	2.	Declarations of Interests		
	3.	Minutes of Previous Meeting – 21 July 2021	✓	T Warne
	4.	Action log	✓	T Warne
1510	5.	Community Services Presentation		M Malkin
1530	6.	Chair's Report	✓	T Warne
1540	7.	Chief Executive's Report	✓	J Graham
1550	8.	Non-Executive Directors Report - Highlights from Board Committees	✓	Board Committee Chairs
		GOVERNANCE		
1610	9.	Lead Governor Appointment Process	✓	T Warne
1620	10.	Nominations Committee Report • Non-Executive Director Reappointment	✓	T Warne
	11.	Any Other Business		
	12.	DATE, TIME & VENUE OF NEXT MEETING		
	12.1	Wednesday, 15 December 2021, 3.00pm		

STOCKPORT NHS FOUNDATION TRUST
Minutes of a Council of Governors Meeting
Held on Wednesday 21 July 2021,
Held at 3.00pm via Webex

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Present:

Professor T Warne	Chair
Mrs S Alting	Appointed Governor
Cllr L Dowson	Public Governor
Prof C Galasko	Public Governor
Mr R Greenwood	Lead Governor
Mrs Z Ikram	Public Governor
Mr R King	Public Governor
Mr D Kirk	Appointed Governor
Dr T Kondratowicz	Public Governor
Ms T Leden	Public Governor
Mr J Pantall	Public Governor
Cllr J Wells	Appointed Governor
Mrs L Woodward	Public Governor
Mrs M Slater	Public Governor
Mrs L Woodward	Public Governor
Mr R Rowlands	Public Governor
Dr R Cryer	Public Governor

In attendance:

Mrs C Anderson	Non-Executive Director
Mrs C Barber-Brown	Non-Executive Director
Mr D Hopewell	Non-Executive Director
Mrs K James	Chief Executive
Dr M Logan-Ward	Non-Executive Director
Mrs J McShane	Director of Operations
Mrs M Moore	Non-Executive Director
Mrs C Parnell	Director of Communications and Corporate Affairs
Dr L Sell	Non-Executive Director
Mrs J Newton	Non-Executive Director
Mr A Bell	Non-Executive Director
Mrs M Malkin/Mrs K Ronan	<i>(Agenda Item 5: Discharge to Access Presentation)</i>
Mrs J Wild	Minute taking

ACTION**23/21 Apologies for absence**

Apologies for absence were received from Mr Jammeh, Mrs Wragg, and Ms C Grundy-Glew.

Professor Warne welcomed all Governors and Board members to the meeting, being his first meeting as the Chair.

24/21 Amendments to Declarations of Interests

There were no declarations of interest.

25/21 Minutes of the previous meeting – 24 March 2021

The minutes of the previous meeting held on 24 March 2021 were agreed as a true and accurate record of the meeting.

26/21 Chair's Report (presentation)

Prof. Warne provided a presentation of his observations of his first 80 days in the role of Chair for Stockport NHS Foundation Trust. He noted the enthusiasm of many staff who he found to be both positive and creative in their work during those most demanding times the NHS has had to face.

As an example, Prof. Warne reported that he had lunched with Junior Doctors at their regular forum. Many told him that at the start of the pandemic, it was an anxiety provoking time. However, they were grateful for the excellent PPE they received, saw themselves as being part of a much larger multi professional team, and actually found the experience to eventually be a once in a lifetime learning experience.

The meeting heard that stronger external links with colleagues were continuing to be developed at Tameside & Glossop, East Cheshire and Stockport Metropolitan Borough Council. In relation to the ICS, Prof. Warne advised we should be mindful of colleagues in neighbouring geographical areas, and avoid only focusing upon the GM ICS itself. As partnership working becomes more paramount in the future, there will be a requirement to review fitness for purpose of our existing strategies and communication approaches.

There is a need to change the current narrative so that we increasingly promote our good services (and review where we can improve). In many areas, we are, leading the way nationally. Mrs McShane highlighted a forthcoming Winter Planning Workshop which features PJ Paralysis. Prof. Warne noted this was a fantastic example. Mr Greenwood commented on the changing narrative in order to improve the public perception in an honest and open manner. Prof. Warne noted that communication is key to a positive narrative, suggesting that our colleagues delivering services are often our ambassadors.

Mr Greenwood enquired as to how damaging posts on social media can be dealt with. Prof. Warne advised that we should avoid being confrontational. He said he is a great believer of stories being effective ways of communicating positive news. Mrs Parnell advised that she felt the narrative over the last two years has changed with a distinct shift in positivity but there was more to be done to increase the quantity of positive coverage. She added that her team carefully monitors social media and responds where appropriate.

Prof. Warne shared the outcomes of his discussions with colleagues at Tameside and Glossop NHSFT with regard to Mrs James being appointed on a substantive basis across both Trusts. While the appointment of a Chief Executive is the responsibility of Non-Executive Directors, Governors were reminded that they have a role in approving any appointment and this process will be addressed at a future meeting. .

Prof. Warne noted that we had built an effective Board, with both Non Executive and Executive Directors post almost all being appointed too. However, he suggested more work was required to ensure the Board operated effectively and it's committees provided the right level of assurance to demonstrate a Well Led organisation. He explained that further work was in train to review membership of the committees and their terms of reference, which the new Company Secretary – Rebecca McCarthy would be leading on when she arrive in late August.

C Parnell will ensure information around PJ Paralysis week is on social media.

Approval for the CEO post will be sought at a forthcoming CoG meeting.

Prof. Warne shared six final thoughts to his briefing:

- Build strong relationships/mutual working with external partners
- A reminder that one size won't fit all
- More collaborative working is required within Primary Care
- Use all assets across GM for pathways
- Make use of internal data available in relation to Diagnostics
- Consider innovations which were built in through the pandemic.

The Council of Governors:

- Received and noted the update
- Noted the actions around social media information and the CEO post.

The Council of Governors:

- Received and noted the update

28/21 **Committee Reports:**

Quality Committee

Dr Logan-Ward informed governors that the latest committee report included the second month of the new re-energised governance system, where governance routes are clearly set out. She said the governance system will boost assurance of what information is received and what should be reported to the Board. However, it is very important to utilise new tools and demonstrate more triangulation between the various committees.

Key points from the Quality Committee to note were:

- Mental health care is high on the radar and part of ongoing conversations,.
- A very concise improvement plan is being prepared and Mrs Malkin's role is critical to its implementation,
- Quality Strategy, along with targets for the next three years, will be discussed at the next Quality Committee meeting;
- Four key aims are ready to be signed off and will be refreshed annually.

The Council of Governors were assured of the Trust's ongoing approach to dealing with major issues, where task and finish groups are set up to produce data, plans and assurance. Prof. Warne noted the positive outcome and thanked the team.

Mr Cryer enquired around timescales for progress and Dr Logan-Ward informed governor that feedback will be proved to Board on a monthly basis.

Prof. Galasko enquired as to deteriorations on wait lists being assessed within the COVID crisis. Dr Logan-Ward informed governor that the clinical harm review process for each category has been documented and regularly reported to the committee. Mrs Malkin assured the meeting that the organisation has been very focussed on the issue since last winter and through the second wave. Clinicians are in contact with patients to assess priority and possibly re-prioritise for swifter treatment. All patients are categorised via clinical priority and a reduction in over 52 week waits has been achieved.

The Council of Governors:

- Received and noted the update

People Performance Committee

Mrs Anderson provided an update from the People Performance Committee. In relation to tracking the COVID vaccine of staff, it was noted we had achieved a 80-90% uptake from BAME colleagues. The Trust has been analysing the effect on work attendance of staff coming into contact with others who have received the NHS mobile notification, which has not shown a massive increase. The Department of Health are shortly issuing further information around staff who are contacted by Track and Trace and what risk assessments should take place.

It was noted that the Government have addressed the blockage of international nurses and students being able to enter the country to assist in recruitment. International nurses have undertaken strong mandatory training and an excellent induction process.

The meeting heard that good progress areas were noted within equality, diversity and inclusion with a zero tolerance approach. However, further progress is required.

Mr Rowlands enquired around negative information in relation to DNA Resus Training as part of mandatory training. Mrs Anderson informed governors that a deep dive has been undertaken and assured the Council of the quality of training, noting that resus training is to be offered for each type of clinical group.

Finance and Performance Committee

Mrs Anderson presented an update from the Finance and Performance Committee.

Performance

The meeting heard that the diagnostics position has seen a consistent slow recovery since February 2021. Endoscopy continues to be challenging, however performance has somewhat levelled out. Patients are being offered treatment at Fairfield Hospital, North Manchester, but there are some patients reluctant to travel and communication has been changed to try to encourage uptake.

ED performance reduced during June/July and the cancer two week wait was being achieved. Divisional reviews continue to work well and are having an impact on divisional groups taking ownership and working within financial parameters to improve finance and performance.

Finance

The meeting was provided with an update on finance, noting a break even result in the first half of the year. The second half of the year (H2) will prove more challenging in relation to CIP and restoration. Although, funding is being provided for elective work, CIP targets are being achieved through current trajectories and need to continue through recurring trajectories. There are significant reductions in bank spend.

Mr Rowlands enquired what the percentage of departmental budget was within the Cost Improvement Programme. Mrs Anderson replied that the Trust is looking at 1.5% in the first six months and an increase is expected in H2 nationally. However, it should be noted that the financial envelope

reduced by 3% in H2 and exact figures are unavailable as yet.

29/21 Any Other Business

In response to a query received from Ms Leden around how the partnership with East Cheshire is working, Prof. Warne assured governors that the Trust are continuing to work closely with East Cheshire colleagues. An interim report on the development of a clinical strategy will be discussed by Directors in August.

Prof. Warne informed the meeting that Mr Greenwood had decided not to continue as lead governor following the forthcoming governor elections and a process would be undertaken to identify a replacement.

30/21 Date, time and venue of next meeting

The next meeting of the Council of Governors is scheduled to be held on 6th October 2021 at 3pm.

Council of Governors Action Log

Ref.	Meeting	Minute ref	Subject	Action	Bring Forward	Responsible
01/21	21 Jul 2021	26/21	Chair's Report (presentation)	<u>Promoting our Services</u> Mrs Parnell will ensure information around the PJ Paralysis week is visible on social media.	Closed	C Parnell
02/21	21 Jul 2021	26/21	Chair's Report (presentation)	<u>CEO Post</u> Approval for the CEO post to become more substantive will be sought at a forthcoming Council of Governors meeting.	October 2021	All attendees

On agenda
Not due
Overdue
Closed

Stockport NHS Foundation Trust

Meeting date	6 October 2021	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Chair’s Report					
Lead Director	Trust Chair		Author	Director of Communications & Corporate Affairs		

Recommendations made / Decisions requested

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

This paper relates to the following Corporate Annual Objectives-

1	Deliver safe accessible and personalised services for those we care for
2	Support the health and wellbeing needs of our communities and staff
3	Co-design and provide Integrated Service Models within our locality and across our acute providers
4	Drive service improvement, through high quality research, innovation and transformation
5	Develop a diverse, capable and motivated workforce to meet future service and user needs
6	Utilise our resources in an efficient and effective manner
7	Develop our Estate and IM&T 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 is related to these BAF risks-	PR1	Significant deterioration in standards of safety and care
	PR2	Demand that overwhelms capacity to deliver effective care leading to poorer outcomes for patients and staff
	PR3	Working with others does not fully deliver the required benefits
	PR4	Performance recovery plan is not delivered

		PR5	Critical shortage of skilled workforce with capacity and capability to meet service needs
		PR6	Failure to deliver agreed financial recovery plan
		PR7	A major disruptive event leading to operational instability
		PR8	Estate does not meet national standards or provide sustainable patient environment
		PR9	IM&T infrastructure and digital defences do not protect against cyber attack

Where issues are addressed in the paper-

	Section of paper where covered
Equality, diversity and inclusion impacts	NA
Financial impacts if agreed/ not agreed	NA
Regulatory and legal compliance	All objectives
Sustainability (including environmental impacts)	NA

Executive Summary

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

1. PURPOSE OF THE REPORT

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

2. EXTERNAL PARTNERSHIPS

During the pandemic we have seen the value of effective partnership working, and the drive for greater collaboration is increasing at pace nationally, regionally, and locally.

It is only by collaborating effectively with partners across Stockport and neighbouring areas that we will be able to deliver on our strategic ambitions for the health and wellbeing of the people we serve.

So I was delighted to recently attend my first Stockport Health and Wellbeing Board. It was truly great to be at the same table as our One Stockport partners, providing oversight of the proposed shadow locality boards and executive group. I am optimistic that such a new structure may herald a new era for governance where we not only seek assurance ourselves about the services we provide but also, via shared governance arrangements, receive robust assurance from others.

Recently Karen James, our Chief Executive, and I met with the leader and Chief Officer of Stockport Metropolitan Council. This was an extremely positive meeting that acknowledged the increasingly effective relationship between the two organisations, and the role that Karen has played in strengthening our ongoing collaboration.

Working closely with our neighbours in Tameside and Glossop Integrated Care NHS Foundation Trust we are seeing the benefit of sharing knowledge and expertise, and one example of that is the new executive appointment of a joint Director of Strategy and Partnerships.

It is also good to see the work continue with East Cheshire NHS Trust on the development of a joint clinical strategy. Together we serve a common population and I am excited about the opportunities still to come from working more closely together to meet the needs of local people.

3. TRUST ACTIVITIES

This organisation has always been known for its friendliness and warm welcome to both patients and new staff, so I am really pleased to see the introduction of a refreshed induction process for colleagues joining the "Stockport family."

It is this friendly approach as well as our growing reputation for the improving quality of our services that is continuing to attract high calibre candidates for roles, and I was delighted to be part the interview panel that recently appointed two excellent new consultants for our emergency department.

We also welcome a new company secretary, Rebecca McCarthy, and Nadia Baynham, our new equality, diversity and inclusion lead. These are key appointments with Rebecca helping us on our journey to improve our governance arrangements, and Nadia assisting us in ensuring all staff - whatever their background, race, gender or ability - are treated equally.

While it is great to welcome new colleagues to the organisation, it is also a pleasure to get out and about across the Trust meeting long standing members of staff. Often when we talk about the organisation people think about Stepping Hill Hospital, but our community teams also play a huge role in providing care to local people so it was a privilege recently to join Karen in visiting many of our community based colleagues.

They should all be hugely proud of the work they are doing, and I was particularly impressed by the discharge to assess team. Their work, which is essentially a partnership with the local authority and other agencies, is an example of the positive impact effective collaboration can have on the care we provide.

Another key partnership in the life of the Trust is with our Council of Governors and I have really enjoyed the two informal sessions we have had with our governors over the last two months. We are fortunate to have governors with such an interest in the Trust and our services, who willingly give up their time to support us.

This meeting is our opportunity to say goodbye to some long standing governors, who are reaching the end of their terms of office, before we welcome a number of new governors in October who I am sure will bring equal enthusiasm and interest to their roles.

4. STRENGTHENING BOARD OVERSIGHT

Over the last 18 months there have been lots of changes to the make-up of our Board of Directors so it is important that we devote time to developing as an effective team.

We have had two recent development sessions looking at the Trust's transformation programmes and focusing on what well led looks like. Thank you to everyone who facilitated the two events, and we look forward to a number of interesting and informative developments sessions in the coming months.

5. RECOMMENDATIONS

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

Stockport NHS Foundation Trust

Meeting date	6 October 2021	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Chief Executive's Report					
Lead Director	Chief Executive	Author		Director Communications & Corporate Affairs		

Recommendations made/ Decisions requested

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

This paper relates to the following Corporate Annual Objectives-

x	1	Deliver safe accessible and personalised services for those we care for
x	2	Support the health and wellbeing needs of our communities and staff
	3	Co-design and provide Integrated Service Models within our locality and across our acute providers
	4	Drive service improvement, through high quality research, innovation and transformation
x	5	Develop a diverse, capable and motivated workforce to meet future service and user needs
	6	Utilise our resources in an efficient and effective manner
	7	Develop our Estate and IM&T infrastructure to meet service and user needs

The paper relates to the following CQC domains-

	Safe	x	Effective
	Caring		Responsive
x	Well-Led		Use of Resources

This paper is related to these BAF risks-	PR1	Significant deterioration in standards of safety and care
	PR2	Demand that overwhelms capacity to deliver effective care leading to poorer outcomes for patients and staff
	PR3	Working with others does not fully deliver the required benefits
	PR4	Performance recovery plan is not delivered
	PR5	Critical shortage of skilled workforce with capacity and capability to meet service needs
	PR6	Failure to deliver agreed financial recovery plan

		PR7	A major disruptive event leading to operational instability
		PR8	Estate does not meet national standards or provide sustainable patient environment
		PR9	IM&T infrastructure and digital defences do not protect against cyber attack

Where issues are addressed in the paper-

	Section of paper where covered
Equality, diversity and inclusion impacts	NA
Financial impacts if agreed/ not agreed	NA
Regulatory and legal compliance	NA
Sustainability (including environmental impacts)	NA

Executive Summary

The purpose of this report is to advise the Council of Governors of national and local strategic and operational developments including:

1. PURPOSE OF THE REPORT

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

2. NATIONAL NEWS

2.1 National appointments

Amanda Pritchard has been appointed as the Chief Executive of NHS England after two years as its Chief Operating Officer. The first woman to take on the leading national role, she was appointed to replace Sir Simon Stevens.

Tom Cahill, who has been the Chief Executive of Hertfordshire Partnership University NHS Foundation Trust, has been appointed as National Director for Learning Disabilities and Autism.

Sir Jim Mackey, who is the Chief Executive of Northumbria Healthcare NHS Foundation Trust, has been appointed by NHS England to advise on the national elective recovery programme two days a week.

3. REGIONAL NEWS

3.1 Integration and innovation

As highlighted in my last report to the Board the Government's White Paper, *Integration and Innovation: working together to improve health and social care for all*, is currently going through Parliament with a view that the changes it proposes will be implemented from April 2022.

It will see the creation of Integrated Care Systems (ICS), and each will be made up of two bodies – NHS ICS Boards responsible for NHS planning and allocation decisions as well as the day to day management of the ICS, and ICS Health and Social Care Partnerships, which will bring together NHS, local authority and wider partners to address local health, social care and public health needs.

Stockport is one of ten localities within the Greater Manchester ICS, and in line with other localities Stockport partners, including the Trust, are continuing to work on the development of a locality board, a provider partnership/alliance, and integrated neighbourhoods. Once established these arrangements will support improvements to the health and wellbeing of the local population.

In September the Department of Health and Social Care published the Integrated Care Partnership (ICP) engagement document developed by NHSE/I and the Local

Government Association setting out expectations around the role ICPs will play within statutory arrangements for ICS, including:

- producing an integrated strategy for their area,
- agreeing collective objectives,
- facilitating joint action on health outcomes and the wider determinants of health.

In establishing at least interim ICPs from April 2020 each system is expected to consider what arrangements would work best in their area, including resourcing, membership and priorities.

It will be the roles of the Chair Designates of each Integrated Care Board to ensure that:

- each system creates an ICP in preparation for legislation,
- NHS and local authority leaders agree by October 2021 how the ICP will be established and at least a secretariat resourced during 2021-22,
- statutory partners come together to oversee the ICP set, including engagement with stakeholders, by November 2021.

While the membership of each ICP will be determined locally the engagement document makes it clear that each would be expected to be at least a partnership between the NHS, local authorities and the wider community.

3.2 Operational pressures

Across the country the whole of the NHS is working hard with partners to address the growing demand for care, which can be seen by the increase in ambulance calls and pressure on emergency departments, with the drive to restore services impacted by the pandemic.

Bed occupancy levels are often a good indicator of the pressure on services and across the North it has been consistently above the 85% rate, which is considered to be the optimum for a hospital to operate effectively and safely. Despite great work with our partners to swiftly discharge patients once they no longer need acute hospital care our bed occupancy rate is regularly above 90% as we strive to balance the needs of people requiring elective care and those coming through the doors of our emergency department, often needing admission to hospital.

Prior to the pandemic we rarely saw more than 300 people a day needing emergency care, but now the rate is consistently above that position and recently on one day alone we cared for more than 370 people. Despite the demand – and thanks to the great work of colleagues across our hospital and in our community services – we continue to perform well against the four hour national standard when compared to other departments in Greater Manchester.

For any NHS organisation there is always a fine balance, between elective and non-elective care, particularly as we head into the winter months, but the position is exacerbated by the ongoing need to provide hospital care for patients with Covid-19 in a way that safely protects other patient from the risk of infection.

There are more details about our performance against a range of standards in the integrated performance report.

4. TRUST NEWS

4.1 New Hospitals programme

We have submitted our bid to be one of the 40 new hospitals to be built as part of the Government's £3.7 billion New Hospitals programme.

News of our proposal to build a new hospital in the centre of the town attracted substantial regional and national media coverage, as well as lots of local support via social media from the population we serve.

The New Hospitals programme, which has already announced 32 new build projects, is now looking for a further eight projects. We are hoping to be one of those eight when the remaining successful projects are announced next year.

4.2 Dying at Work Charter

I recently joined to Chair to sign the Dying to Work Charter on behalf of the organisation, pledging our support for the national initiative aimed at providing the best possible support for colleagues with a terminal illness.

We were delighted to join our trade union colleagues in signing the charter set up by the Trade Union Congress to ensure employers respond to need of terminally ill staff, including supporting them to remain safely at work.

4.3 Awards

Congratulations to:

- Moira Gatley, who has been shortlisted for the NHS Procurement Outstanding Contribution Award at this year's NHS in the North Excellence in Supply Awards. A contract manager in our procurement department, Moira has been a key member of the team for more than 32 years, and was nominated for the support she provided during the pandemic in ensuring staff had the PPE and other equipment they needed.

- Charito Tantoy, who was presented with the Employee of the Year by North West branch of the Hospital Caterers' Association at its annual awards. A catering assistant who has worked in our catering team for more than ten years, Charito was nominated for the work she does with wards and department to ensure patients have their nutritional needs met.
- The teams shortlisted for two the prestigious HSJ Patient Safety Awards, which were presented at the recent Patient Safety Congress in Manchester. Our recently established acute frailty service was a finalist in the improving care for older people category for its work in trying to prevent avoidable hospital admissions and reduce the length of hospital stays for the most vulnerable people. In the changing culture category the Discharge 2 Assess team – a joint project between the Trust, Stockport Metropolitan Borough Council and Stockport Clinical Commissioning Group - was a finalist for its work on safely and rapidly discharging patients home from hospital during the pandemic.
- Dr Thomas Walton, who was named as the Acute Pain Consultant of the Year, in the Acute Pain Awards 2021 presented at the recent National Acute Pain Symposium.
- Our catering team, who received the maximum five star rating in the recent annual inspection by the local authority's environment health team. The inspectors assessed our standards of hygiene, associated practice and management assurance in the patient, retail and ward areas. The service was last year named as one of 14 exemplar sites in the country for the quality of our catering.

4.4 Thank you

Our audiology team and some of their patients have given their thanks to the Trust's Charity for funding a device that helps to assess the hearing of babies and other patients with communication difficulties.

Costing almost £27,000 the Eclipse will benefit around 240 patients a year, preventing the need for sedation for the tests, and making diagnosis of potential hearing problems quicker and more reliable.

5. **RECOMMENDATION**

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



Stockport NHS Foundation Trust

Meeting date	6 October 2021	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Non-Executive Directors Reports					
Lead Director	Chairs of Board Committees	Author		Rebecca McCarthy, Trust Secretary		

Recommendations made/ Decisions requested

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

Executive Summary

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

This report highlights key matters for the Council of Governors attention following the Board Committees that took place in September 2021.

1. Finance

- The financial plan for the first half of 2021/22 requires a break even financial position after £40.2m of Greater Manchester system support. The Trust balanced income and expenditure in August 2021.
- All Divisions have made progress towards delivery of their Cost Improvement Programme (CIP) targets, though mainly through non-recurrent measures.

2. Operational Performance

- Emergency Department performance improved in month (76.60%) albeit remains below the 95% standard. Although attendances started to ease a little in August, they still remain at an elevated level compared to earlier in the year. Despite the continued pressures in demand, Stockport NHS FT was the 2nd best performing Trust within Greater Manchester in August.
- There was one 12hr trolley breach reported in August 2021 due to a lack of psychiatry beds nationally. The Trust is working with Pennine Care NHSFT to agree an urgent pathway and escalation process.
- Reducing the cancer and planned care waiting list continues to be challenging and the Trust has not been able to achieve improvement trajectories. The Trust is working with GM Cancer Hub and The Christie to effectively use additional capacity for cancer patients awaiting treatment to support the 62 day cancer standard.
- 18 week performance is driven by the significant number of patients waiting for routine surgery and diagnostics, including endoscopy. Additional 'green site' elective capacity is under review to support the elective backlog clearance.

3. People

- The Trust's overall sickness absence marginally increased up to the end of July 2021 at 5.99% (Covid related 0.68% and non-Covid related 5.31%). The increase in Covid related sickness was not unexpected due to lifting of restrictions nationally. All absences continue to be monitored closely by Divisional and HR colleagues, and support offered including Occupational Health support and counselling. A Consultant Psychologist has recently been appointed to support colleagues.
- Following the pause during the pandemic, appraisals compliance has continued to improve for medical and non-medical staff.
- Despite improvement, turnover of colleagues remains at higher than average levels. Work is underway to identify long term vacancies and ensure plans are in place to either recruit or to redesign team skill mix. Vacancies have increased slightly as turnover has increased in a small number of clinical areas. Further recruitment of 40 international nurses has commenced and a Registered Nurse conversion course has been initiated and internally promoted.
- Progress on delivering the People Integrated Delivery Plan is going well, with only Role Specific Training definition being slightly off track; however this is anticipated to complete in the near future.
- The People Performance Committee is receiving regular assurance from the Freedom to Speak Up Guardian and the Guardian of Safe Working.

4. Quality

- The COVID nosocomial infection rate remains at 5%, with two cases confirmed in August 2021. A recent review of Infection Prevention requirements in Outpatient areas will support additional face to face capacity from September 2021.
- There were three cases of C-Difficile in July; one case has been deemed unavoidable. The Trust is currently over trajectory by two cases and at risk of achieving its internal trajectory.
- There were no reports of moderate or above harm arising from any in-patient falls during August 2021.

- Compliance to timely recognition of sepsis is back on track in August, with compliance to date of 97%. Compliance with antibiotic administration for those patients deemed to have sepsis has fallen this month to 78% (7 out of 9 patients), below the internal stretch target of 95%. Non-compliance continues to be discussed at the Sepsis Steering Group and a new Senior Sepsis Practitioner is now in post.
- The Trust has recently seen a rise in the number of formal complaints being received. However, there has been a significant improvement in timeliness of the Trust's response rate, consistently meeting the target of 95% of complaints responded to within agreed timescales for the last 9 months. The PALS & Complaints Team continues to focus on resolving concerns informally, thereby reducing the number of formal complaints.
- The Trust has developed a Quality Strategy 2021-2024, setting out the Trust's trajectory to go from 'Requires Improvement' to 'Good' and with the aspiration of being an 'Outstanding' Trust. The Trust will focus efforts on a targeted portfolio of projects which will have the most significant impact on quality across the organisation. The Quality Strategy 2021-2024 will be presented to the Board of Directors for approval in October.

5. Audit Committee

- Internal Audit Plan 2021/22 Progress – There has been one internal audit finalised between July-September 2021 - Data Security and Protection Toolkit. The Trust overall assurance level against 10 National Data Guardian standards was rated as: Moderate (8 x Substantial, 2 x Moderate)
- Anti-Fraud Plan 2021/22 Progress – Audit Committee reviewed and confirmed counter fraud work that had taken place during July-September 2021, including the work that had specifically taken place in light of Covid-19.
- External Audit Annual Report – Audit Committee received the final draft of the External Audit Annual Report. The outcome of the External Audit will be included within Stockport NHS Foundation Trust's Annual Report and presented to Council of Governors following the Annual Report & Accounts being laid before Parliament.
- Audit Committee received positive assurance regarding the Rostering improvement journey.
- Audit Committee reviewed the Conflicts of Interest Policy and endorsed the arrangements to support effective management of the declaration process.
- Audit Committee received a summary of matters discussed at the Risk Management Committee and assurance regarding the processes in place in relation to risk management.



Stockport NHS Foundation Trust

Meeting date	6 October 2021	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Lead Governor Appointment Process					
Lead Director	Tony Warne, Chairman	Author		Soile Curtis, Deputy Company Secretary		

Recommendations made / Decisions requested

The Council of Governors is asked to:

Review and confirm the process for appointment of a Lead Governor in light of the current Lead Governor term of office concluding on 6th October.

Interested Governors are asked to submit a Nomination Form for the Lead Governor role to the Deputy Company Secretary by Friday, 29 October 2021.

Executive Summary

The Council of Governors' Lead Governor's term of office expires on 6th October 2021. The current Lead Governor, Mr Roy Greenwood, has confirmed that he is also to stand down as a governor at this time.

This paper describes the process and timetable to enable appointment of a new Lead Governor.

1. INTRODUCTION

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

2. BACKGROUND

- 2.1 The Council of Governors appointed Mr Roy Greenwood as Lead Governor at its meeting held on 21 October 2020. As Mr Greenwood's term of office as a Governor concludes on 6 October 2021, it is necessary for the Council of Governors to appoint a new Lead Governor.
- 2.2 Governors are requested to note that NHS England/Improvement does not specify the scope of the Lead Governor role beyond its requirement for an individual to facilitate direct communication between NHS England/Improvement 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, in particular, where it may not be appropriate to communicate through normal channels.
- 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 1.

3. CURRENT POSITION

- 3.1 Any interested Governors are asked to submit a Nomination Form (Appendix 2) for the role of Lead Governor to Soile Curtis, Deputy Company Secretary (soile.curtis@stockport.nhs.uk) by **Friday, 29 October 2021**. Nominations should include confirmation of two governors supporting the nomination.
- 3.2 The Deputy Company Secretary will keep all governors informed of nominations received throughout the process via the weekly Governor Briefing. Submitted nomination forms will be made available to all Governors prior to the Council of Governors meeting on 15th December 2021.
- 3.3 The appointment process will be completed at the Council of Governors meeting in December 2021. Where there is a single nomination, that nominee will be elected unopposed. Where there are two or more nominations, arrangements for election by secret ballot by the Council of Governors will be put in place. The Council of Governors will formally confirm the nominated Lead Governor at that meeting.

4. RECOMMENDATIONS

- 4.1 The Council of Governors is asked to:
 - Review and confirm the process for appointment of a Lead Governor in light of the current Lead Governor term of office concluding on 6th October.
 - Submit a Nomination Form for the Lead Governor role to the Deputy Company Secretary in writing, together with a supporting statement, by Friday, 29 October 2021.

Appendix 1: Lead Governor Role Description

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/Improvement should the need arise.
- Work with the Chair of the Board of Directors to ensure that the Council of Governors is working effectively. Chair such parts of the meetings of the Council of Governors which cannot be chaired by the Chair or the Deputy Chair of the Trust due to a conflict of interest in relation to the business being discussed.
- 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/Improvement's role, and the basis on which NHS England/Improvement 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).

Appendix 2: Lead Governor Nomination Form

Lead Governor Nomination Form

Full Name		
Position (Please Tick)	Public	
	Staff	
	Appointed	
<p>General Statement (In no more than 100 words)</p> <p>Describe how you believe you have the required values, qualities and ability to represent the Council of Governors as Lead Governor</p>		
Signature	
Date	
Supported by:		
Governor Name:	
Governor Name:	

Stockport NHS Foundation Trust

Meeting date	6 October 2021	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Nominations Committee Report - Reappointment of Non-Executive Director					
Lead Director	Tony Warne, Chairman		Author		Rebecca McCarthy, Company Secretary	

Recommendations made / Decisions requested

The Council of Governors is asked to:

Review and approve the recommendation from the Nominations Committee to reappoint Mrs Catherine Anderson as Non-Executive Director of Stockport NHS Foundation Trust for a further term of office of 1 year, from 1st January 2022 to 31st December 2022.

Executive Summary

The Council of Governors holds statutory responsibility for the appointment and reappointment of the Chairman and other Non-Executive Directors. A Nominations Committee has been established to consider such matters in detail and to make recommendations to the Council of Governors for consideration.

The Nominations Committee met on 23rd September 2021 to review Mrs Catherine Anderson's position as Non-Executive Director of Stockport NHS Foundation Trust in view of her current term of office expiring on 31st December 2021. The meeting was attended by Mr Tony Warne, Chairman, Mr Roy Greenwood, Lead Governor, Mr Tad Kondratowicz, Public Governor and Mr Richard King, Public Governor. Mrs Rebecca McCarthy, Company Secretary supported the meeting.

The Nominations Committee considered the outcome of Mrs Anderson's most recent appraisal and additional guidance from NHS Improvement/England's (formerly Monitor) Code of Governance regarding the re-appointment of Non-Executive Directors.

This paper presents a proposal to reappoint Mrs Catherine Anderson as Non-Executive Director for a further one year term.

1. **Background**

- 1.1 Mrs Anderson was appointed as a Non-Executive Director on 1 January 2016 for a three year term of office. She was reappointed to a second term of office, commencing on 1 January 2019 and ending on 31 December 2021. At this point Mrs Anderson will have served six years as a Non-Executive Director.
- 1.2 Mrs Anderson's appointment was, and is currently, based on her commercial management expertise.
- 1.3 Mrs Anderson is the current Senior Independent Director, Chair of Finance & Performance Committee and a member of Audit Committee. Mrs Anderson also attends the Risk Management Committee.

2. **Basis of Recommendation**

- 2.1 The basis of the recommendation to reappoint Mrs Catherine Anderson, as Non-Executive Director, for a further term of one year, is as follows:
 - Mrs Anderson continues to make a positive contribution to the Board of Directors, as evidenced via most recent appraisal.
 - Mrs Anderson has confirmed that she remains able to commit the required time to fulfil the duties and responsibilities of the role.
 - Mrs Anderson has a detailed understanding of Stockport NHS Foundation Trust. Her reappointment would provide a level of continuity and organisational memory, amidst significant refresh of the Board of Directors in recent years, ongoing challenges and the transformation agenda.
 - Key strategic developments to address suboptimal estate and regeneration of the hospital campus have been initiated; Mrs Anderson's area of expertise in commercial management will support the continuing development of these matters over the forthcoming year.

3. **Recommendation**

The Council of Governors is asked to approve the recommendation from the Nominations Committee to reappoint Mrs Catherine Anderson as Non-Executive Director of Stockport NHS Foundation Trust for a further term of office of 1 year, from 1st January 2022 to 31st December 2022.