

Council of Governors

Wed 07 June 2023, 16:00 - 18:00

Pinewood Education Centre, Lecture Theatres



Agenda

16:00 - 16:00 1. Welcome & Opening Remarks
0 min
Tony Warne

16:00 - 16:00 2. Apologies for Absence
0 min
Information Tony Warne

16:00 - 16:00 3. Declarations of Interests
0 min
All

16:00 - 16:00 4. Minutes of Previous Meeting – 22 February 2023
0 min
Tony Warne
04 - Council of Governors Meeting Minutes - February 2023.pdf (6 pages)

16:00 - 16:10 5. Action Log
10 min
Tony Warne
05 - CoG Action Log - June 2023.pdf (1 pages)

16:10 - 16:25 6. Chair’s Report
15 min
Tony Warne
06 - Chairs Report - June 23.pdf (3 pages)

16:25 - 16:45 7. Non-Executive Directors Report
20 min
Non-Executive Directors - Board Committee Chairs
- Including highlights from Board Committees
07 - Non-Executive Directors Highlight Report - June 2023.pdf (3 pages)

16:45 - 16:55 8. Membership Development Group Report
10 min

Howard Austin

- 08a - Membership Development Group Progress Report - June 2023.pdf (3 pages)
- 08b - Membership Action Plan 2022-23.pdf (7 pages)

16:55 - 17:05 **9. National Staff Survey 2022 Report**

10 min

Amanda Bromley

- 09a - Staff Survey Results 2022.pdf (2 pages)
- 09b - Staff Survey Results - June 2023.pdf (19 pages)

17:05 - 17:15 **10. Trust Corporate Objectives 2023-24**

10 min

Tony Warne

- 10 - Trust Corporate Objectives 2023-24.pdf (3 pages)

17:15 - 17:25 **11. Council of Governors – Standards of Business Conduct**

10 min

Rebecca McCarthy

- 11 - Council of Governors Standards of Business Conduct.pdf (7 pages)

17:25 - 17:35 **12. Proposed amendments to Stockport NHS Foundation Trust Constitution**

10 min

Rebecca McCarthy

- 12 - Proposed Amendments to the Trust's Constitution.pdf (12 pages)

17:35 - 17:55 **13. Nominations Committee Reports**

20 min

13.1. Outcome of Chair' Appraisal 2022/23

Louise Sell

Senior Independent Director will lead the meeting for Outcome of Chairs Appraisal. Chair will leave the meeting for this item.

- 13.1 - Outcome of Chairs Appraisal 2022-23.pdf (4 pages)

13.2. Outcomes of Non-Executive Directors Appraisals 2022/23

Tony Warne

Chair will re-join the meeting and present this paper. Non-Executive Directors will leave the meeting for this item.

- 13.2 - Outcome of Non-Executive Directors Appraisals 2022-23.pdf (2 pages)

17:55 - 17:55 **14. Date, Time & Venue of Next Meeting**

0 min

7 September 2023, 2.30pm, Pinewood Education Centre

14.1.

STOCKPORT NHS FOUNDATION TRUST
Minutes of a Council of Governors Meeting
Held on Wednesday 22nd February 2023,
Held at 3pm in the Lecture Theatres, Pinewood Education Centre, Stepping Hill Hospital

Present:

Professor T Warne	Chair
Mrs S Alting	Appointed Governor
Mr H Austin	Public Governor
Mrs V Cottam	Public Governor
Mr M Cunningham	Public Governor
Mrs P Hancock	Staff Governor
Cllr K Holloway	Public Governor
Mr R King	Public Governor
Dr T Kondratowicz	Public Governor
Mr D McAlister	Staff Governor
Mr T Moore	Public Governor
Mr A Nottingham	Public Governor
Mr J Pantall	Public Governor
Mr A Pinder	Staff Governor
Mrs G Roberts	Public Governor
Mrs M Slater	Public Governor
Mrs K Southwick	Staff Governor
Prof. C Summerton	Public Governor
Mrs S Thompson	Public Governor

In attendance:

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

Ref	Item	Action
01/23	<p>Welcome & Apologies for Absence</p> <p>The Chair welcomed everyone to the meeting including new Non-Executive Director, Mrs Beatrice Fraenkel and Associate Non-Executive Director, Mr Meb Vadiya.</p> <p>Apologies for absence were received from David Kirk - Appointed Governor, Lance Dowson - Public Governor, Janet Browning - Public Governor, Thomas Lowe - Public Governor and Muhammad Rahman – Public Governor.</p> <p>Apologies were also received from Marisa Logan-Ward, Non-Executive Director/Deputy Chair and Caroline Parnell, Director of Communications and</p>	

	Corporate Affairs.	
02/23	Amendments to Declaration of Interests There were no declarations of interest.	
03/23	Minutes of Previous Meeting The minutes of the previous meeting held on 14 th December 2022 were agreed as a true and accurate record of the meeting with the following amendment to attendance: Mr Michael Cunningham was noted as attending the meeting, however confirmed he was not in attendance.	Trust Secretary
04/23	Action Log The action log was reviewed and amended accordingly.	
05/23	Chair's Report The Chair presented the Chair's Report providing reflections on recent activities within the Trust and wider health and care system including: <ul style="list-style-type: none"> • External Partnerships • Trust Activities • Strengthening Board Oversight. <p>The Chair specifically highlighted the challenging financial position for the forthcoming year and the importance of collaboration with partner organisations.</p> <p>Cllr. Holloway, Appointed Governor, sought further view regarding the Trusts' understanding and confidence in delivery of the Greater Manchester (GM) Integrated Care System (ICS) strategy, with focus on drivers of population health, including education and training. The Chair confirmed that Board members, alongside Board members from Tameside & Glossop NHS Integrated Care Foundation Trust, had attended a development session to inform the GM ICS strategy. The Director of People and Organisational Development described work taking place across Greater Manchester (GM), and at a locality level to support education and training, highlighting a range of internships, apprenticeships, and cadet schemes as part of the widening participation programme, and joint partnerships with local colleges.</p> <p>In response to a query from Mr Pantall, Public Governor, seeking assurance that the views and priorities of the Trust are reflected within the developing Integrated Care System (ICS) strategy, the Chair described engagement that had taken place, alongside ongoing work with locality partners to consider alternative ways of working and support communities to access the right care, in the right place. The Chief Executive confirmed the Trust continued to work with acute providers across the GM ICS to address operational challenges. Mr Austin, Public Governor, commented that GP surgeries could be utilised in directing the wider community to access to primary care.</p> <p>The Council of Governors received and noted the Chairs' Report.</p>	
06/23	Non-Executive Directors Report The Non-Executive Director Chairs of the Board committees provided updates on high-level metrics and key assurance reports considered at Finance & Performance, People Performance, Quality, and Audit Committees. <u>Finance</u> The Council of Governors noted the Trust's financial plan deficit of £23m for	

	<p>2022-23, which included a cost improvement programme (CIP) target of £18.1m agreed as part of the GM ICS. The Council of Governors were informed that, at month 9, the Trust position was £2m adverse to plan, primarily due to escalation beds remaining open beyond the planned winter period, continued growth in Emergency Department attendances and additional inflationary pressures.</p> <p>The Council of Governors were informed that Trust had commenced activity, workforce and finance planning for 2023/24 as part of the GM ICS, with financial challenges identified in relation to inflation, workforce costs, growth in demand and efficiency savings. In response to a query from Mr Austin, Public Governor, regarding issued opportunity to challenge assumptions in the planning guidance, the Chief Finance Officer confirmed the guidance included a series of assumptions regarding productivity and efficiency savings to be made and activity levels. The Chair confirmed Mr John Graham, Chief Finance Officer, attended regular meetings with other Directors of Finance in GM, with a system wide view then discussed with the regional colleagues, prior to submission of plans.</p> <p><u>Operational Performance</u></p> <p>The Council of Governors were informed the Trust continued to perform below the national target against the core operating standards. It was confirmed that improvement plans were in place for all performance standards, with notable improvement in cancer performance and confidence in achievement of the diagnostic waiting time standard by the end of the fiscal year, with estates work planned for echocardiology and endoscopy.</p> <p><u>People</u></p> <p>The Council of Governors received an update regarding the Trust's preparation for potential industrial action, including establishment of an emergency preparedness & industrial action meeting, to oversee planning and response to industrial action.</p> <p>The Council of Governors noted that sickness absence remained a concern, with a slight increase from September to October, prompting a deep dive of the principal reasons for sickness absence and the Trust's health and wellbeing approach to support colleagues.</p> <p>In response to a query from Mr Pantall, Public Governor, as to how the Trust's staff absence compared to similar organisations and how the Trust would ensure ill health retirements were kept to a minimum, Non-Executive Directors provided contextual information regarding the increase in sickness absence across the NHS post Covid. Furthermore, Non-Executive Directors described work taking place regarding flexible working opportunities, career progression and supporting staff at different stages of their careers. The Council of Governors were informed that the Trust continued to focus on reducing bank and agency costs, with recent medical recruitment fairs and international nurse recruitment.</p> <p>In response to Prof Chris Summerton, Public Governor, seeking confirmation that international nurse recruitment was conducted in an ethical manner, so not impacting negatively on those countries, the Director of People and Organisational Development (OD) confirmed that the Trust was only able to recruit from countries able to withstand this recruitment without negatively impacting their own health systems.</p> <p><u>Quality</u></p> <p>The Council of Governors were informed that the Hospital Standardised Mortality Ratio (HSMR) remained below expected, with further review of UTI related deaths, which remained a significant contributor. Sepsis antibiotic</p>	
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	<p>administration remained below target, with further action to implement a revised sepsis screening assessment tool to improve communication between colleagues caring for patients with suspected sepsis.</p> <p>In response to a query from Dr Kondratowicz, Public Governor, regarding impact of the delay in prescribing for sepsis, the Chair of Quality Committee provided assurance that, where the Trust did not achieve timely administration of antibiotics in line with the standard, there was only a marginal delay, and that there was no evidence of clinical harm in relation to delayed cases.</p> <p><u>Audit Committee</u> The Council of Governors received an update on key matters and reports considered by the Audit Committee. The Chair of Audit Committee confirmed review of finalised internal audits, notably actions and follow up confirmed in response to limited assurance internal audits.</p> <p>The Chair of Audit Committee confirmed Audit Committee had reviewed the policy for Approval of Non-Audit and Additional Services by the Trust's External Auditors and recommended this for approval to the Board of Directors. He confirmed the purpose of the policy was to ensure compliance with ethical standards for auditors.</p> <p>Noting the limited digital internal audits, Mr King, Public Governor, requested assurance that IT and information systems within the Trust were compatible with other Trusts in GM. The Chief Finance Officer confirmed several digital systems in place supported system working. He noted further digital improvements included plans for a new EPR system for Stockport, and that there was a requirement for any system to be compatible with other systems across the ICS.</p> <p>In response to a query from Mrs Alting, Lead Governor, as to whether targets measured by the Trust that were not included in the Integrated Performance Report (IPR) presented to Board were presented to a relevant Committee, the Chair highlighted that the IPR included key quality, operational, workforce and financial metrics in line with national and local standards/objectives and outliers in performance presented to the Board. He confirmed more granular reporting was considered at the appropriate committee/group within the Trust, and risk escalated as appropriate.</p> <p>The Council of Governors received and noted the Non-Executive Directors Report.</p>	
07/23	<p>Membership Development Group Report The Council of Governors received an update from the Membership Development Group (MDG), including discussions from the meeting on 6 December:</p> <ul style="list-style-type: none"> • Government engagement and feedback • Membership and Governors section of the Trust Website • A progress report for the Membership Action Plan, detailing key activities since the last meeting. <p>Further to discussion regarding communication and governors' emails, Mr Austin, Chair of MDG (Public Governor) confirmed he would lead discussion with the Membership Development Group and confirm any further action required to the Council of Governors (ACTION).</p> <p>Mr Austin, Chair of MDG (Public Governor) confirmed there were currently six governors on the MDG and any potential governors who wished to join were welcome.</p>	

	The Council of Governors received and noted the Membership Development Group Report.	
08/23	<p>Trust Planning 2023-24 The Director of Strategy and Partnerships presented the Trust Planning 2023-24 framework and overview of key priorities and plans for the year ahead, to enable delivery of operational activity, finance and workforce plans.</p> <p>In response to a query from Mrs Thompson, Public Governor, around the practicality of achieving the targets within the planning guidance, the Director of Strategy and Partnerships highlighted the intention of the operational targets to support a reduction in waiting lists through increased activity, albeit the current operational demand and context made this a significant challenge. The Chair supported this comment, specifically highlighting the challenges in bed occupancy and no criteria to reside, and importance of alternative ways of working to support timely discharge of patients. In relation to waiting times, the Chief Executive highlighted work taking place within GM, including patients being offered choice of attending another hospital at the beginning of their pathway should wait times at their local hospital be longer. Furthermore, she confirmed discussion at GM to develop common assumptions and formalise a GM position against national targets.</p> <p>In response to a query from Mr Pantall, Public Governor, regarding regional investment and education to increase workforce levels, it was highlighted that the Trust received regional investment from Health Education England.</p> <p>In response to a query from governors around neighbourhood structures, Cllr Holloway, Appointed Governor, described work taking place in Stockport to determine area and neighbourhood structures.</p> <p>The Council of Governors considered the Trust planning process for 2023-24, including areas of focus for the year ahead, in line with national planning guidance.</p>	
09/23	<p>Confirmation of Nominations Committee Membership The Chair presented a report regarding membership of the Nominations Committee. He confirmed the term of office for two members of the Nominations Committee (Dr Tad Kondratowicz, Public Governor and Mr Richard King, Public Governor) expired on 4 December 2022. As per the agreed process, the Chair confirmed nominations had been received from Mrs Sarah Thompson, Public Governor and Mr Richard King, Public Governor, who had consequently commenced as members of the Nominations Committee.</p> <p>The Chair thanked Dr Kondratowicz, Public Governor, for the work he had undertaken within a challenging environment and thanked Mrs Sarah Thompson and Mr King for their support.</p> <p>The Council of Governors reviewed and confirmed Nominations Committee membership.</p>	
10/23	<p>Appraisal Process for Chair and Non-Executive Directors The Council of Governors received a paper setting out the proposed process, including timeline, for the appraisal of the Chair and Non-Executive Directors of Stockport NHS Foundation Trust.</p> <p>The Senior Independent Director confirmed the Corporate Affairs Team</p>	

	<p>would provide support to the Lead Governor to obtain wider views of the Council of Governors, in advance of completing the assessment questionnaire to support the Chair's appraisal.</p> <p>The Council of Governors noted the outcome of the Trust Chair and Non-Executive Director appraisals would be reported to the Nominations Committee and Council of Governors in June 2023.</p> <p>The Council of Governors reviewed and approved the appraisal process for the Chair and Non-Executive Directors.</p>	
11/23	<p>Nominations Committee Report: Annual Review of Non-Executive Directors & Chair Remuneration</p> <p>Non-Executive Directors declared an interest and left the meeting at this point.</p> <p>The Chair declared an interest in this item. As Chair of the Nominations Committee the Chair remained in the Council of Governors meeting.</p> <p>The Council of Governors received a report from the Nominations Committee including outcome of the annual review of remuneration of Non-Executive Directors, including the Chair, and proposed recommendation. The report confirmed that the outcome and recommendation was based on the Nominations Committee consideration of current guidance from NHS England, the Trust's ability to recruit to recent Non-Executive Director positions, and the financial context in which the Trust was operating. The Council of Governors were informed that the Nominations Committee had also considered the current terms and conditions, including travel expenses, for Non-Executive Directors.</p> <p>The Council of Governors approved the recommendation from the Nominations Committee that there would be no increase to Non-Executive Director, including the Chair, remuneration for 2023/24 and that terms and conditions remained as current.</p>	
12/23	<p>Papers for Information</p> <p>The Council of Governors noted the following paper for information:</p> <ul style="list-style-type: none"> NHS Providers Governor Workshops - Feedback 	
13/23	<p>Any Other Business</p> <p><u>Attendance of Council of Governor Meetings</u></p> <p>Mrs Alting, Lead Governor welcomed the increased level of attendance from staff governors at the meeting, acknowledging previous challenges highlighted in attendance at meetings.</p>	
14/23	<p>Date, time and venue of next meeting</p> <p>Wednesday, 7th June 2023, 4pm – 6pm</p> <p>Pinewood Education Centre, Stepping Hill Hospital</p>	

Signed

Date

Council of Governors Action Log

Ref.	Meeting	Minute ref	Subject	Action	Bring Forward	Responsible
100/22	21 Dec 2022	125/22	Non-Executive Directors Highlight Report	Further information regarding planning guidance 2023/24 to be shared with the Council of Governors. Presented to Council of Governors Meeting, February 2023	CLOSED	Director of Strategy & Partnerships
01/23	22 02 2023	03/23	Minutes of Previous Meeting	Mr Cunningham was noted as attending the meeting in December 2022, however confirmed he was not in attendance and apologies have been noted.	CLOSED	Minute Taker
02/23	22 02 2023	07/23	Membership Development Group Report	Further to discussion regarding communication and governors' emails, Chair of MDG (Public Governor) to discuss with the Membership Development Group and confirm any further action required to the Council of Governors. Update: Discussed at MDG, Feb 2023. Advising new governors of the option to have a Trust email address communicated as part of the induction process. Agreed to remind governors of options on an annual basis.	CLOSED	Chair of MDG

On agenda
Not due
Overdue
Closed

Stockport NHS Foundation Trust

Meeting date	7 th June 2023	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Chair’s Report					
Presented by	Chair, Professor Tony Warne		Author	Professor Tony Warne		

Recommendations made / Decisions requested-

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

Executive Summary

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

1. PURPOSE OF THE REPORT

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

2. EXTERNAL PARTNERSHIPS

Sadly, as I write this report the invasion and war in Ukraine continues. As I write this report, the war has been ongoing for over 456 days. It was good to see the solidarity of the G7 Nations support just recently demonstrated in Japan. The symbols of my solidarity with the folk of Ukraine, my blue and yellow clogs have had to be re-soled – I hope that might be the last time. Standing together, love not hate will eventually triumph. Until then we should keep all those caught up in the Ukraine/Russia war and in other conflicts around the world, in our thoughts and prayers.

It has been a strange period since I last reported to the Board. We celebrated Easter, witnessed the coronation of our King, and have enjoyed a multitude of long weekend Bank Holidays. I recognise not all colleagues could take advantage of all these breaks but hope everyone was able to spend some quality time with friends and family. Unusually for me, I also took a two-week holiday over this period, and enjoyed a mini trekking holiday in Peru, including doing the Inca trail up to Machu Picchu. Perhaps the strangest thing of all for me, was being elected a Councillor in the recent local elections. I was a so-called Paper Candidate and had not anticipated winning. Rest assured however, this appointment will in no way impact on my commitment and continued work aimed at ensuring Stockport NHS FT is truly recognised for being an outstanding organisation.

Due to the perfect storm described above, there has been a reduced amount of opportunity to engage in many external activities. One of the events I was able to attend was the Leadership and Governance Workshop, facilitated by Carnall Farrar and the Greater Manchester Integrated Care Board (ICB). This was an opportunity to explore the outcomes of an extensive consultation piece. Carnall Farrar used DAC methodology Direction, Alignment and Commitment to frame their analysis, and presentation. The analysis provided a challenging picture of an ICB not yet fully functional and effective. But, it was recognised that this was perhaps to be expected, the value coming from achieving a shared view of the next steps to be taken. It was also recognised that this was the first time the ICS (Integrated Care System) had met since its launch in July 2022.

I have attended just one NHSE North West Regional System Leaders meetings, where again the focus was on achieving a balanced financial position across the North West. There was, however, an opportunity to also explore the potential for harnessing digital technology in transforming access to health care, the provision of

health care services, and to more effectively support the work of health care providers and commissioners.

I attended the Greater Manchester Chairs meeting and separately have met with Chris Outram (Christie) and Sallie Bridgen (Tameside and Glossop). I also have been able to meet with Aislinn O'Dwyer, the recently appointed Chair for East Cheshire NHS Trust, and feel confident that we can take forward our joint plans for sustainable clinical services at pace now.

I have continued to make an active contribution to the work of the Good Governance Institute and have participated in two webinars since I last reported to the Board. Whilst this is an opportunity to showcase Stockport NHS FT, it is also an opportunity to learn from and with others, about the emergent system-based governance processes.

3. TRUST ACTIVITIES

I was really pleased that finally we have been able to introduce a digital solution to the organisation and administration of the Boards business. So, all meetings, papers, presentations and other information are now available on a system called AdminControl. This is a big step forward in achieving the NHS ambition of ensuring a 'digital first' approach is adopted wherever possible. That said, it may take some of us a little time to get use to the system and not work with piles of meetings papers.

I have chaired two Consultant appointment panels since my last report, and we were able to successfully appoint a Critical Care Consultant and a Consultant in Anaesthetics.

I was privileged to participate in a brief memorial service to remember the 22 people who died in the arena attack six years ago. Stockport NHS FT were one the many Greater Manchester hospitals that provided treatment and care on that devastating evening.

It is the time of year for annual appraisals and these have now all been completed and new objectives set for both Executive and Non Executive Directors. There has been a great deal more scrutiny this year from the NHSE Regional Offices, but as is appropriate, it is our Council of Governors who agree the process and outcomes of these appraisals.

4. STRENGTHENING BOARD OVERSIGHT

We have been able to hold one Board Development event since I last reported to the Board. This was a session that provided us with an opportunity to explore and re-confirm our Risk Appetite in what is a continuing turbulent operating environment.

Stockport NHS Foundation Trust

Meeting date	7 June 2023	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Non-Executive Directors Highlight Report including: Update from Board Committees					
Presented by	Chairs of Board Committees		Author	Rebecca McCarthy, Trust Secretary		

Recommendations made/ Decisions requested

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

Executive Summary

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

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

1. Finance

- The Trust financial position at the end of 2022/23 was a deficit of £3.3m, which was £19.7m favourable to plan, due to additional system funding.
- A balanced financial plan for the Greater Manchester Integrated Care System (GM ICS) has been submitted for 2023/24. The Trust's financial plan, as part of this, is a deficit of £31.5m, with cost improvements (CIP) of £26.2m. For the GM ICS plan to be delivered there are further system efficiencies of £130m required.
- At month 1, the Trust's position is £0.8m, adverse to plan. The key reasons for variance relate to strike action and continued high costs of temporary staffing to support additional demand.
- Delivery of recurrent CIP has been identified as a significant challenge for 2023/24, with the plan circa £1m behind target at month 1. A quality impact assessment process is in place for efficiency schemes to ensure patient safety is not compromised.

2. Operational Performance

- The Trust continues to perform below the national core operating standards for A&E 4-hour standard, Cancer 62-day standard, 18-week Referral to Treatment (RTT) standard, and Diagnostic 6-week wait standard.
- Albeit not achieving the 4-hour Emergency Department standard, we continue to benchmark well across GM. Drivers of the performance continue to be challenges to good patient flow, with high numbers of patients in hospital who no longer need acute care but are waiting for discharge home or to an alternative facility to complete their recovery. This is notable for patients in East Cheshire and North Derbyshire.
- Challenges to achieving cancer standards have been compounded by industrial action, significantly affecting elective capacity. Notwithstanding this, there has been positive performance against the 28-day faster diagnostics standard and the 2-week wait cancer standard.
- Diagnostics performance is still above the target, but showing a much improved position due to outsourcing to support the clearance of the Endoscopy diagnostic backlog.

3. People

- Bank and agency expenditure remains an area of concern. Our nursing, people & finance teams are focussing on recruitment and roster management to support a reduction in agency expenditure, alongside health and wellbeing initiatives to help our people remain in work. All agency requests are considered by leaders on a weekly basis.
- In March 2022, we launched our Equality, Diversity and Inclusion (EDI) Strategy, setting out our ambitions for the next 3 years. The recent Workforce Race Equality Standard (WRES) and Workforce Disability Standard (WDES) Reports showed some 'green shoots' of improvement, particularly in representation of British and Minority Ethnic (BAME) colleagues. However, we know culture change takes time, and that we still have much more to do improve the working lives of BAME and disabled colleagues.
- As part of its widening participation and vocational learning offer, the Trust continues to work well with partners to remove barriers and offer work experience and career opportunities for people in Stockport, in particular, to communities that are underrepresented and areas of deprivation.

4. Quality

- Although the Trust's HSMR (Hospital Standardised Mortality Rate) is still reporting as above expected, it has shown an improving position over the last several months. The SHMI (Summary

Hospital-level Mortality Indicator) however is performing positively and is reporting better than the national median.

- Positive performance has been seen in relation to improvements in incidents, falls and pressure ulcers, all of which are achieving targets set. Infection rates for several infections are above the targets for improvement and a deep dive will take place through Quality Committee next month.
- We continue to see a rise in the number of complaints and complaints response rates continue to be affected by the capacity of clinical staff to undertake administrative work among staff absences and strike action. Where we are not able to provide a response in the agreed timeframe, the complainants are contacted and are kept informed. Communication and clinical treatment are the top themes for formal complaints.

5. Audit Committee

At its meetings in May 2023, Audit Committee reviewed and confirmed the following matters:

- Internal Audit Plan 2022/23 – The below internal audits were finalised and reported to Audit Committee:
 - Payroll Contract Management – Limited Assurance
 - Risk Management Core Controls – Substantial Assurance
 - Clinical Audit – Substantial Assurance
 - Board Assurance Framework (BAF) – The organisation's BAF is structured to meet the NHS requirements; is visibly used by the organisation and reflects the risks discussed by the Board.
 - Managing Conflicts of Interest – Substantial Assurance
- Internal Audit Plan 2023/24 – Approved.
- Internal Audit Charter 2023/24 – Reviewed and Confirmed.
- Head of Internal Audit Opinion – 'Substantial Assurance' that there is a good system of internal control designed to meet the organisation's objectives, and that controls are generally being applied consistently.
- Anti-Fraud Progress Report 2022/23 – Reviewed and confirmed.
- Anti-Fraud Annual Report 2022/23 – Reviewed and confirmed the work completed by the Trust's Anti-Fraud Specialist (AFS) during the period from April 2022 to March 2023.
- Declaration of Interests Annual Review – Reviewed and confirmed compliance with Trust policy and improvement actions to be undertaken.
- Review of Waivers – Reviewed and confirmed.
- Risk Management Committee Key Issues Report - Reviewed and confirmed, including alignment with key risks considered via the respective Board Committees.

Year End Matters

- Review of Accounting Policies – Reviewed and approved accounting policies for preparation of the annual accounts 2022/23.
- Draft Annual Governance Declarations 2022/23 – Reviewed and supported the Trust's position against the annual governance declarations to be presented to the Board of Directors for approval.
- Draft Annual Report 2022/23 – Reviewed and provided comment prior to presentation of the final Annual Report to Audit Committee and Board of Directors in June 2023.
- Draft Annual Governance Statement 2022/23 – Reviewed and supported inclusion of the Annual Governance Statement within the Annual Report.
- Draft Annual Accounts 2022/23 & Key Accounting Issues Report – Reviewed and confirmed the draft annual accounts 2022/23 and noted key issues. Confirmed external audit was underway.
- Going Concern Basis of Preparation – Reviewed and supported the recommendation to be made to the Board of Directors that the Directors should continue to adopt the going concern basis in preparing the accounts for 2022/2023.
- External Audit Strategy Memorandum 2022/23 – Reviewed and confirmed, noting the external audit was underway.

Stockport NHS Foundation Trust

Meeting date	7 June 2023	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Membership Development Group Report					
Presented by	Chair of Membership Development Group		Author	Rebecca McCarthy, Trust Secretary		

Recommendations made / Decisions requested

The Council of Governors is asked to:

- Review the report from the Membership Development Group including the year-end position against the Membership Action Plan 2022/23

Executive Summary

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

The MDG meets quarterly, with the most recent meeting held on 16 May 2023. The following governors were in attendance:

- Howard Austin, Public Governor (Chair of Membership Development Group)
- Adrian Nottingham, Public Governor
- Jamie Hirst, Public Governor
- John Pantall, Public Governor

All governors were invited to the meeting, as there were two matters for consideration on the agenda that related to membership, as included within the Trust's Constitution: the minimum age of members and proposal for public constituencies in line with the changes made to the Stockport electoral ward boundaries. The following governors were consequently in attendance:

- Keith Holloway, Appointed Governor
- Tony Moore, Public Governor

The meeting was supported by the Trust Secretary and Deputy Trust Secretary, and the Divisional Nurse Director, Women & Children's, for the item considering the age limit for membership.

The MDG considered the following items at the meeting:

- Governor Engagement
 - Register of governor contacts
 - Register of governor engagement
 - Engagement with Community Champions
- Membership Action Plan – Progress Report

- Membership Demographic Analysis
- Review of Minimum Age for Membership
- Membership Public Constituencies Review – Impact of Realignment of Stockport Electoral Ward Boundaries

Membership Action Plan Review

Progress against the Membership Action Plan is provided at Appendix 1, which details the year-end position. The MDG acknowledged the significant amount of work that had been undertaken since the approval of the Membership Strategy and Action Plan in July 2022; and since the MDG first met in September 2022.

The membership action plan set an aim to maintain overall membership numbers (+/- 1%). The number of members at end of March 2022 was 10,666. At the end of March 2023, the overall public membership number had decreased to 10,398, a decrease of 2.5%. There were 308 membership leavers during the year, with the decrease primarily due to deceased members (average number of deceased members per month is 20-25, with one month seeing 50 members). 40 new members joined in year. Regarding membership representation, the membership action plan set an aim to increase membership within specific demographic groups by +1%. With regards to ethnicity and age groups, membership numbers have remained largely static.

With regard to methods of communicating and engagement with members and the public, MDG noted the established relationship with the Community Champions Network, and the value of developing this partnership (which includes a variety of community groups/forums including those with protected characteristics) with a continued emphasis on seeking feedback. The onsite seminars and Annual Members Meeting had been positive, alongside an increased Membership and Council of Governors presence on social media.

It was noted that in setting out the Membership Action Plan 2023/24 and agreeing the priorities for the year, consideration should be given to refining the scope of the plan to ensure it is viable and has buy-in from governors to support both recruitment and engagement with members and the public at large. The Membership Action Plan 2023/24 will be developed and presented to the MDG meeting in August 2023, and consequently to the Council of Governors in September 2023.

Membership Demographic Analysis

The MDG considered a membership analysis of the Trust's public constituencies to identify under-represented group/s for targeted recruitment during 2023/24. In conclusion of a discussion, the MDG agreed to focus on the 16-21 age group.

Review of Minimum Age for Membership

The MDG considered a report, which sought a review of the minimum age for the Trust's membership, including the following:

- The existing mechanisms in place that support children and young people's voices to be heard in regard to the provision and development of services
- The viable opportunities to extend membership recruitment and engagement activity to 11-16 year olds.

In conclusion, the MDG agreed to recommend to the Council of Governors that the minimum age for membership be increased from 11 to 16; (see Proposed amendments to the Trust Constitution

Report). The MDG also agreed that it will look into providing some guidance for governors as to how they can best engage with and represent those service users (and/or their advocates) who will be impacted by this change. In doing so, the MDG will take into account all the excellent and ongoing work to establish and strengthen a number of appropriate channels and forums that involve the relevant age group.

Membership Public Constituencies Review – Impact of Realignment of Stockport Electoral Ward Boundaries

The MDG considered a review of the Trust's public constituencies following changes made to the electoral ward boundaries in the Stockport borough. Public constituencies of the Foundation Trust membership, as stated within the Trust's Constitution, are defined by electoral wards, therefore the composition of the four public constituencies relating to the Stockport borough required review to align with these changes.

The MDG reviewed the proposed revisions to the Stockport NHS Foundation Trust Public Constituencies and supported recommendation, to be made to the Board of Directors and Council of Governors, regarding required changes to the Trust Constitution (see Proposed amendments to the Trust Constitution Report).

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

Membership Plan 2022-2023

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
Aim: To maintain a sizeable membership that is representative of the communities the Trust serves				
Recruitment				
Survey governors to identify established links with community groups / forums and opportunity for recruitment of members	Corporate Affairs	August 2022	Maintain overall membership number (+/- 1%)	Governor survey undertaken Aug – Sept 2022. Register of Governor Contacts presented to Membership Development Group (MDG) in Sept 2022. Survey redistributed to governors quarterly thereafter. Standardised email developed and shared with governors that have identified link groups. Public membership number as of March 2023 = 10,398 (a decrease of 2.5% since March 2022)
Establish a register of governor contacts	Corporate Affairs	August 2022	(Total public membership number as of March 2022 = 10,666)	
Presentation/email recruitment promotion to groups/forums identified as opportunities for recruitment	Governors	September - March 2023		
Website Review Governor & Membership section of SFT website and revise content to ensure opportunity to become a member is clear & accessible.	Membership Development Group / Corporate	Governor & Membership content confirmed – December 2022	Maintain overall membership number (+/- 1%)	Draft Membership & Governor Content reviewed at the MDG in December 2022.

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

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
				meetings and promote membership was shared on social media in advance of CoG meetings. Guidance for governors on social media channels utilised to be distributed to governors.
<p>Review membership demographics via Task & Finish Group to identify underrepresented groups for targeted membership recruitment (Age, Ethnicity, Gender, Socio Economic Profile)</p> <p>Targeted recruitment activities to include: Presentation and/or Email recruitment promotion (dependent on most appropriate method) to:</p> <ul style="list-style-type: none"> • Stockport Colleges – Health & Social Care Courses • Stockport Local Authority – Community Champions (forum to be determined) • Stockport Homes • Equality, Diversity & Inclusion (EDI) BAME Forums/Community Groups (as identified in liaison with SFT EDI Lead) <p><i>NB – The number of ‘group/forums’ to be identified must be carefully considered as the relationship must be meaningful for all.</i></p>	<p>Corporate Affairs Team / Task & Finish Group</p> <p>Corporate Affairs Team / Governors / EDI Team</p>	<p>April 2022</p> <p>November 2022 – March 2023</p>	<p>Increase number of members in targeted demographic groups by +1%</p> <p>Membership numbers as of March 2022 (<i>numbers as of March 2023 indicated in blue</i>)</p> <p>Age: 16-21 = 26 (<i>15</i>) 22-29 = 688 (<i>635</i>) 30-39 = 410 (<i>436</i>) 40-49 = 646 (<i>626</i>)</p> <p>BAME: Pakistani = 149 (<i>151</i>) Chinese = 31 (<i>31</i>) Mixed = 85 (<i>85</i>) Black = 97 (<i>98</i>)</p> <p>At least 1 presentation / email campaign per month</p>	<p>Review of membership demographics completed in April 2022 – utilised to develop Action Plan.</p> <p>Underrepresented groups identified for targeted recruitment:</p> <ul style="list-style-type: none"> • Age 16-21, 22-29, 30-39, 40-49 • Black & Minority Ethnic (BAME) <p>MDG considered opportunities for engagement with established community groups and agreed to prioritise engagement with Community Champions. This was endorsed by the Council of Governors. A rota of interested governors compiled to enable 2/3 governors to attend the bi-monthly</p>

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
				Community Champions Network meetings. Governor/member related information to be included in the Sector3 newsletter on rolling basis. Further opportunities to be explored during 2023/24, inc. volunteers.
Aim: To develop an active and engaged membership				
Engagement				
Newsletter Include Governor Section in Stepping Up Newsletter, including: <ul style="list-style-type: none"> - Meet your Council of Governors - Why I became a governor - Governor activity - How to contact your governors - Council of Governors meetings 	Communications / Corporate Affairs / Membership Development Group	Summer 2022 Winter 2022/23	2 x Stepping Up Newsletters including Governor Section	Two Stepping Up Newsletters disseminated to members. Edition – Summer 2022, included: <ul style="list-style-type: none"> - Stand in Governor Elections - Council of Governors Meetings - Your Public Governors Edition – Winter 2022/23, included: <ul style="list-style-type: none"> - ‘Meet Your Governor’ – Lead Governor - Election Results - Upcoming Meetings - Members’ Event - Your Public Governors

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
<p>Member Seminars Align national/local health and well-being campaigns with membership seminars to promote population health - Liaise with Communications Department regarding campaigns.</p> <p>Facilitate 1 x Virtual, 1 x Face to Face (subject to IPC guidance) members seminars</p> <p>Governor attendance at member seminars to promote governors and allow opportunity to seek feedback from members/public/staff</p>	<p>Corporate Affairs / Communications</p> <p>Corporate Affairs / Communications</p> <p>Governors</p>	<p>September 2022</p> <p>December 2022 March 2023</p>	<p>2 x Members Seminars including evaluation</p>	<p>The first face to face member event held on 2 December 2022:</p> <ul style="list-style-type: none"> - New Emergency & Urgent Care Campus <p>The second member event held on 27 March 2023 – Nutrition & Hydration aligned to National Nutrition & Hydration Week. Key feedback from December event incorporated.</p>
<p>Engagement with Community Groups/Forums <i>(as identified as part of recruitment)</i></p> <p>Corporate Affairs to liaise with Board of Directors to identify a key theme which may be used to guide discussion. This may include a key strategic development/future plan or emergent matter from internal data sources.</p> <p>Establish a key link/rota for governor attendance at Community Group/Forums (as identified as part of recruitment initiatives) to seek feedback:</p> <p>Public</p> <ul style="list-style-type: none"> - Community Champions - Stockport Homes - Equality, Diversity & Inclusion BAME Forums <p>Staff</p> <ul style="list-style-type: none"> - Staff Network Groups 	<p>Corporate Affairs / BoD / Membership Development Group</p> <p>Corporate Affairs / Governors</p>	<p>October 2022 – March 2023</p>	<p>Attendance at 1 group/forum per month</p>	<p>See above.</p> <p>Governor Engagement Report presented to MDG:</p> <ul style="list-style-type: none"> - Register of Contacts - Register of Engagement - Community Champions <p>Engagement with Community Champions endorsed as a priority by Council of Governors. A rota of interested governors compiled to enable 2/3 governors to attend the bi-monthly Community Champions Network meetings. 2 governors attended Network meeting on 24</p>

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
<i>NB. In addition established public governor links with community groups / forums will provide opportunity for engagement, alongside appointed governor engagement with appointing organisation and informal networks.</i>				November 2022, 3 governors attended meeting on 19 January 2023 and 2 governors attended meeting on 22 March 2023.
Register of Governor Engagement Develop a register of engagement and process to ensure record of patients, public and staff feedback received by governors, thus providing evidence of governors fulfilling their statutory duty to represent members and public. Register of engagement to be reviewed by Membership Development Group (quarterly) to identify trends and utilised to inform agenda item at subsequent Council of Governors meeting.	Corporate Affairs / Membership Development Group Corporate Affairs / Membership Development Group	October 2022 December 2022 March 2023	Register of Engagement	Register template developed and shared with governors. Disseminated on 25 November 2022 and quarterly thereafter. Messaging to support register to facilitate completion on an on-going basis. Register of Engagement reviewed by MDG at each meeting to identify themes and possible actions.
Other				
Review of minimum age limit for members.*	Membership Development Group	October 2022	Recommendation (and approval of change if required) by Council of Governors	Initial discussion via MDG held in September 2022. MDG agreed to pause any further developments while publication of the model Constitution was awaited. Notwithstanding the above, MDG agreed to consider the following in

Action Required <i>Overview of actions to be taken</i>	Responsible	Target Date	Key Performance Indicator	Progress against KPI (Monitored by Membership Development Group)
				April: young people's engagement; impact of realignment of Stockport electoral ward boundaries on the Trust's existing public constituencies. Separate reports on both of these matters are included on the agenda.

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

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

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

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

Stockport NHS Foundation Trust

Meeting date	7 June 2023	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	2022 NHS National Staff Survey Results					
Presented by	Amanda Bromley, Director of People and OD	Author		Stuart McKenna, Assistant Director of HR (Inclusion and Colleague Experience)		

Recommendations made / Decisions requested

The Council of Governors are asked to note the contents of this report and support the priority areas for action.

Executive Summary

Staff experience sits at the very heart of safe and quality focused patient care and employee engagement has been identified by the NHS 10 year plan and its accompanying People Plan as a key driver to success. The NHS Staff Survey provides an opportunity for organisations to survey their staff in a consistent and systematic way. This makes it possible to build up a picture of staff experience and, with care, to compare and monitor change over time and to identify variations between different staff groups.

The 2022 NHS national staff survey was open from September to November 2022 with 2,481 questionnaires completed, a response rate of 42.4%, compared to 43% in the previous year. There were 3 questions where the scores showed significant improvement from the previous year. There were 9 questions where the scores have significantly declined since the previous survey. 86 questions have shown no significant movements since 2021 or the score remains the same. Our results show that there has been a statistically significant improvement in the People Promise theme: we work flexibly. The remaining six People Promise theme scores have remained the same or slightly changed but these changes are deemed to be statistically not significant.

Based on the findings of the NHS national staff survey our key priorities over the next 6 to 12 months include:

- **Improving culture and behaviours** – we will further embed our employee behaviours and deliver Civility Saves Lives sessions for our workforce. We are currently refreshing our leadership and management development offer which will include designing and implementing a Medical Leadership Development Programme.
- **Strengthening relationships** – we will develop and implement tools and interventions that help strengthen the relationship between employees and their immediate line manager. As well as make improvements to working relationships within teams and across the organisation.

- **Career progression** – we will design and implement targeted interventions that support career progression linked to our Equality, Diversity & Inclusion (EDI) agenda plus introduce a talent management and succession planning approach.
- **Accelerating our workforce EDI programme** – we will deliver a range of key actions aimed at achieving our EDI ambitions.

The Trust's latest staff survey results are a significant achievement against a backdrop of unprecedented operational pressures, staff absence and the cost of living crisis. Our journey is far from over but we are clear on our priorities and we will continue to co-create a better future for our brilliant workforce.



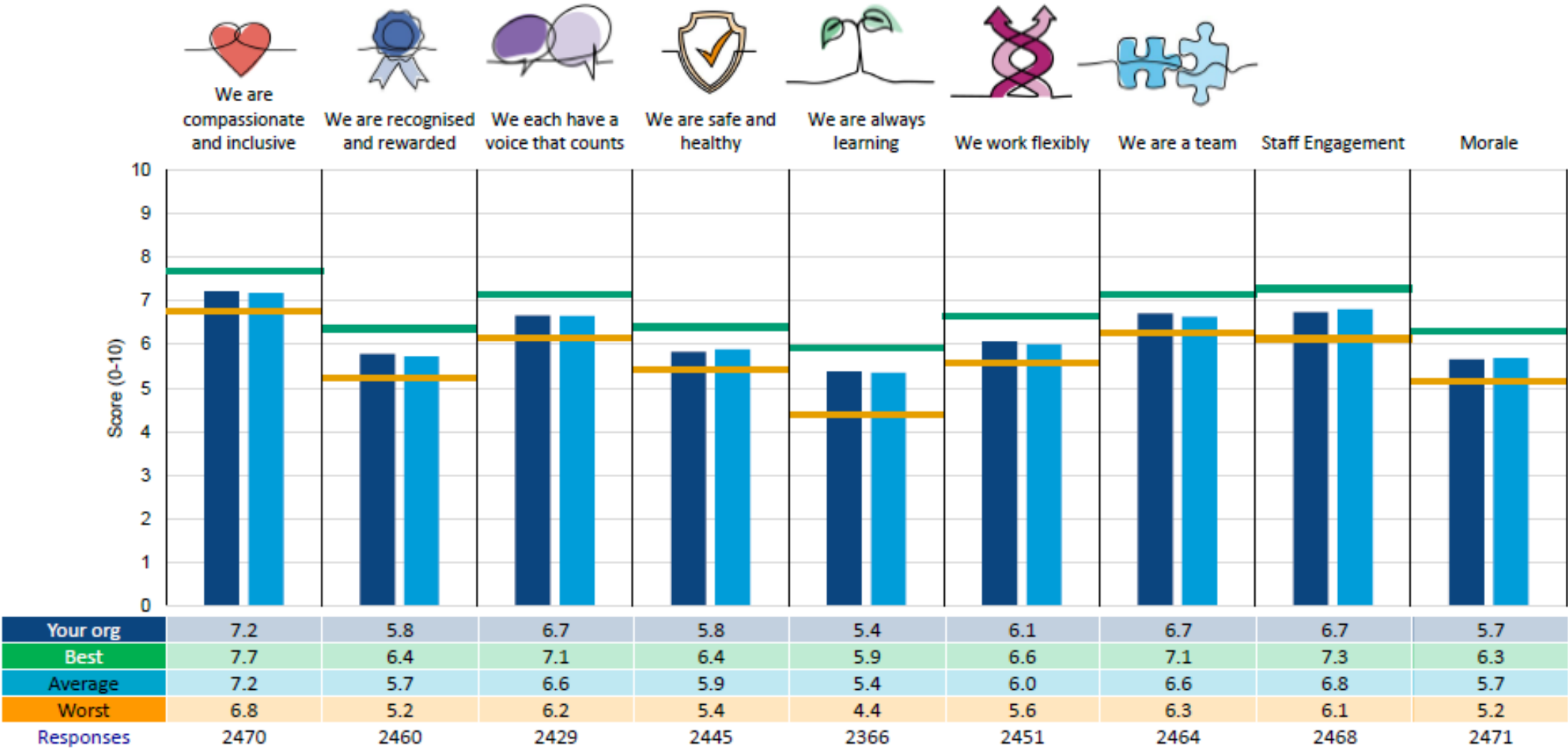
Stockport
NHS Foundation Trust

NHS Staff Survey Results 2022

Introduction

- Questionnaires were sent to 5,906 staff in the organisation.
- After excluding respondents that were later known to be ineligible, a usable sample of 5,855 remained.
- From the usable sample, 2,481 questionnaires were returned yielding a response rate of 42.4%.

People Promise Scores



GM Perspective



Stockport
NHS Foundation Trust

Trust	We are compassionate & inclusive	We are recognised & rewarded	We each have a voice that counts	We are safe & healthy	We are always learning	We work flexibly	We are a team	Staff Engagement	Morale
Bolton NHS FT	7.4	6.0	6.9	6.0	5.6	6.1	6.9	7.0	5.9
Tameside and Glossop IC NHS FT	7.2	5.9	6.7	6.0	5.4	6.2	6.7	6.8	5.8
Stockport NHS FT	7.2	5.8	6.7	5.8	5.4	6.1	6.7	6.7	5.7
Northern Care Alliance	7.2	5.7	6.7	5.9	5.2	6.0	6.6	6.7	5.7
Wrightington, Wigan & Leigh NHS FT	7.2	5.8	6.7	6.1	5.1	6.3	6.7	6.9	6.0
Manchester NHS FT	7.0	5.5	6.4	5.8	5.1	5.6	6.4	6.5	5.4
Overall Acute & Acute and Community Benchmark	7.2	5.7	6.6	5.9	5.4	6.0	6.6	6.8	5.7

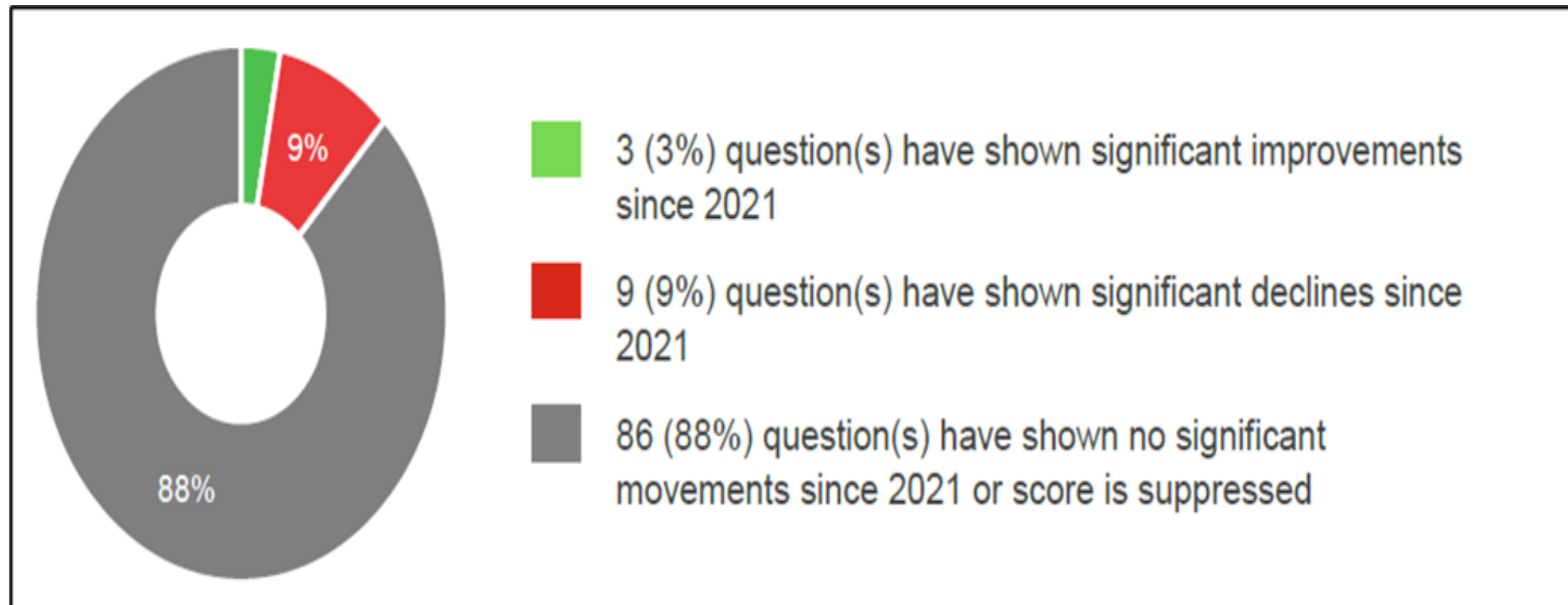
Significance testing

Appendix B: Significance testing – 2021 vs 2022

The table below presents the results of significance testing conducted on the theme scores calculated in both 2021 and 2022*.

People Promise elements	2021 score	2021 respondents	2022 score	2022 respondents	Statistically significant change?
We are compassionate and inclusive	7.3	2256	7.2	2470	Not significant
We are recognised and rewarded	5.8	2304	5.8	2460	Not significant
We each have a voice that counts	6.7	2226	6.7	2429	Not significant
We are safe and healthy	5.9	2248	5.8	2445	Not significant
We are always learning	5.3	2159	5.4	2366	Not significant
We work flexibly	5.9	2289	6.1	2451	Significantly higher
We are a team	6.7	2271	6.7	2464	Not significant
Themes					
Staff Engagement	6.8	2309	6.7	2468	Not significant
Morale	5.7	2303	5.7	2471	Not significant

Question level changes



Statistically Significant Improvement

The table below shows the 3 questions where there has been statistically significant improvement since the previous survey:

Question	2021	2022	Difference
I am satisfied with the opportunities for flexible working patterns.	50.1%	53.0%	2.9%
My organisation is committed to helping me balance my work and home life.	39.3%	43.9%	4.6%
My team has enough freedom in how to do its work.	53.0%	56.3%	3.3%

Statistically Significant Decline

The table below shows the 9 questions where there has been statistically significant decline since the previous survey:

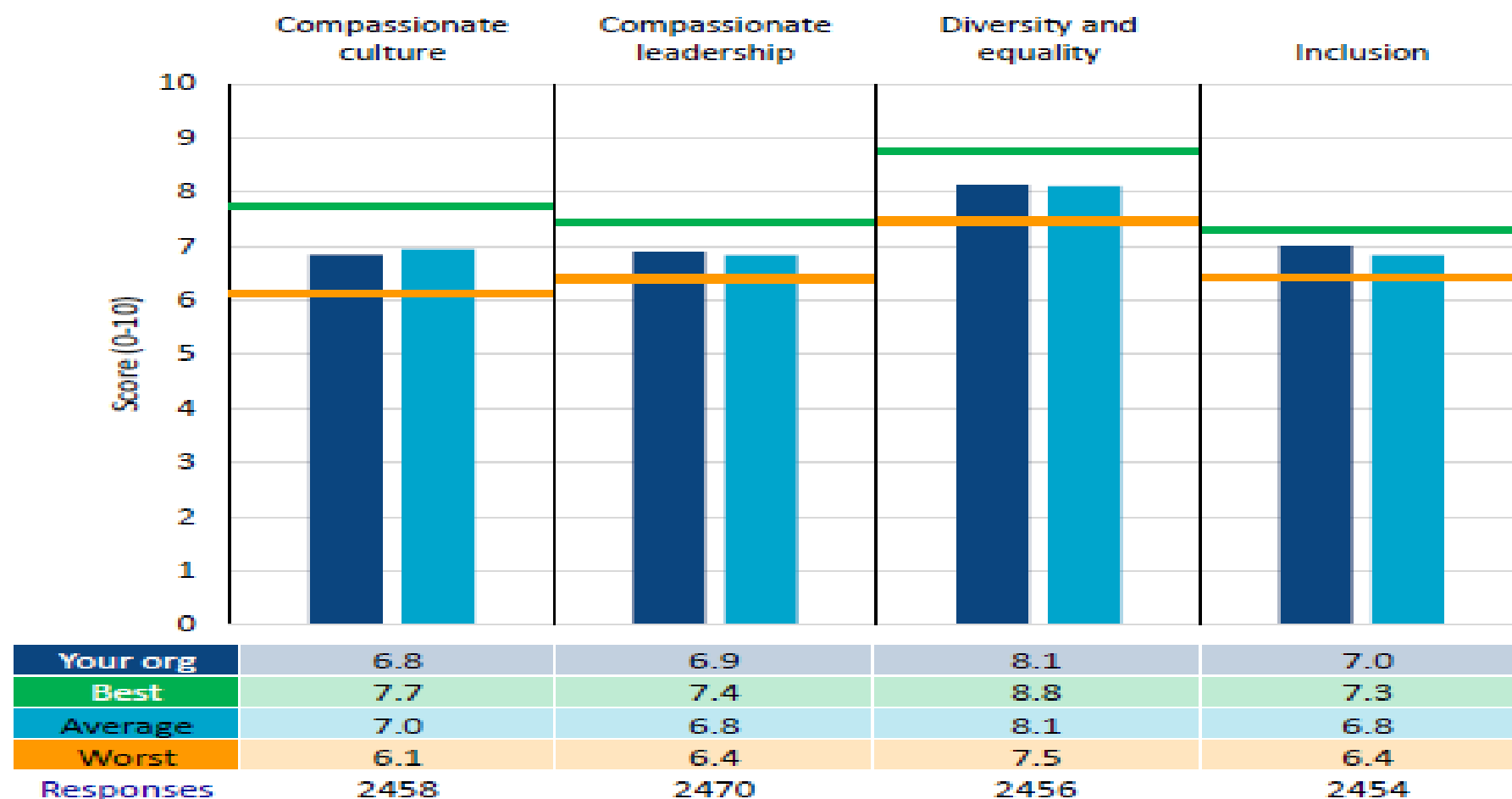
Question	2021	2022	Difference
I am able to make suggestions to improve the work of my team / department.	73.60%	70.80%	-2.80%
I am satisfied with my level of pay.	30.50%	25.20%	-5.30%
I feel a strong personal attachment to my team.	67.50%	64.80%	-2.70%
In the last three months, I have come to work despite not feeling well enough to perform my duties.	52.8%	56.60%	3.80%
In the last 12 months, I have personally experienced harassment, bullying or abuse at work from patients / service users, their relatives or other members of the public.	24.2%	28.30%	4.20%
In the last 12 months, I have personally experienced harassment, bullying or abuse at work from other colleagues.	16.30%	18.60%	2.30%
Experienced discrimination on grounds of ethnic background.	38.1%	46.60%	8.50%
I would feel secure raising concerns about unsafe clinical practice.	75.60%	71.10%	-4.50%
If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation.	60.40%	56.70%	-3.70%

NB Those questions that are colored orange are negatively scored questions, and therefore a higher score (or positive change) reflects a decline.

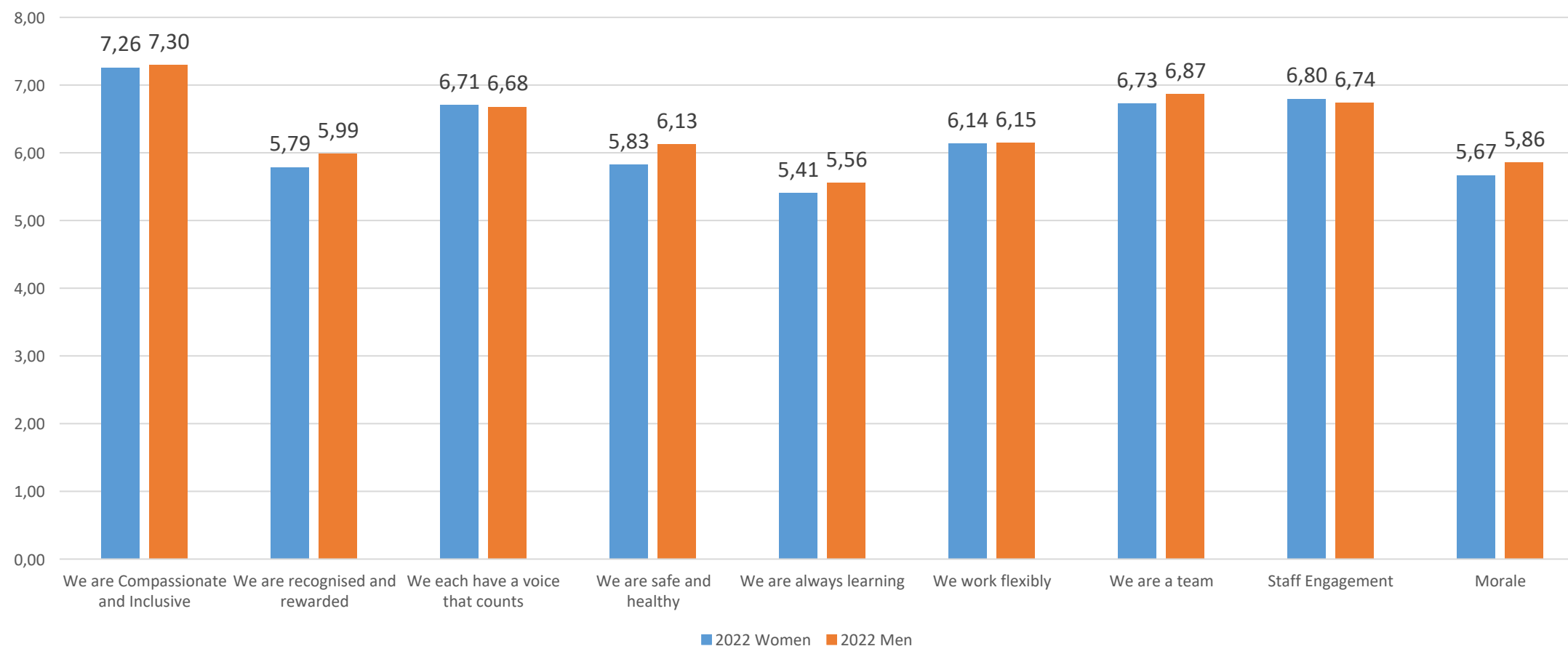
We are compassionate and inclusive



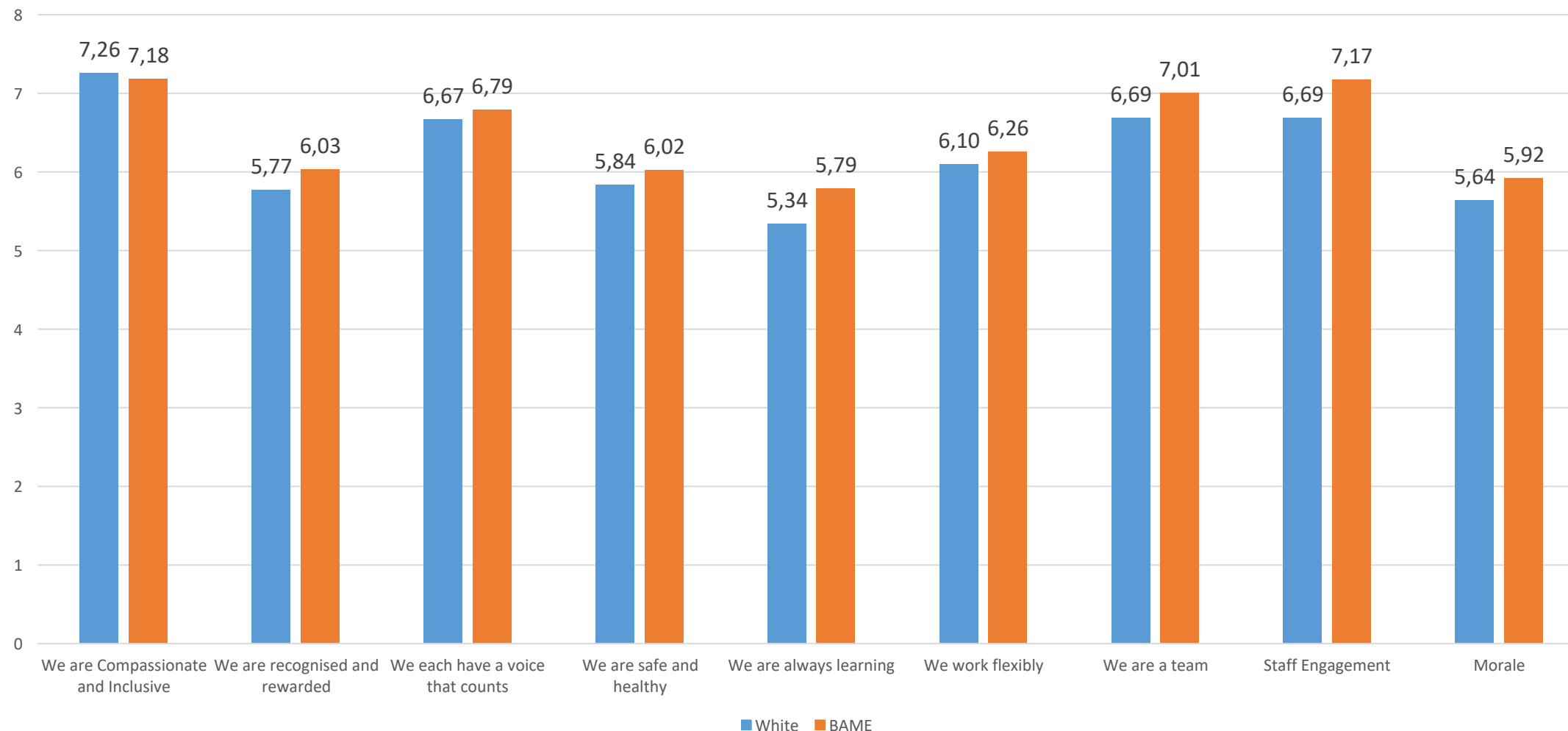
Promise element 1: We are compassionate and inclusive



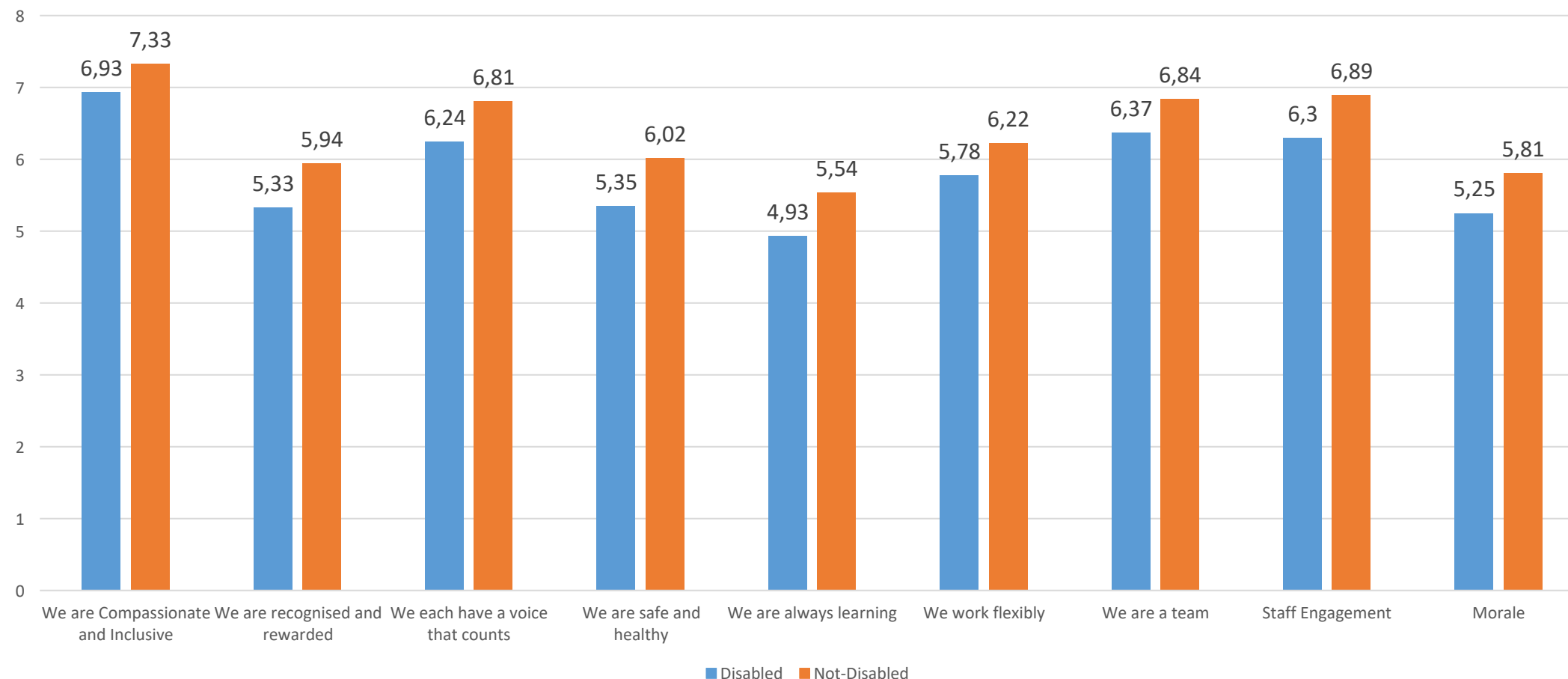
People Promise Gender



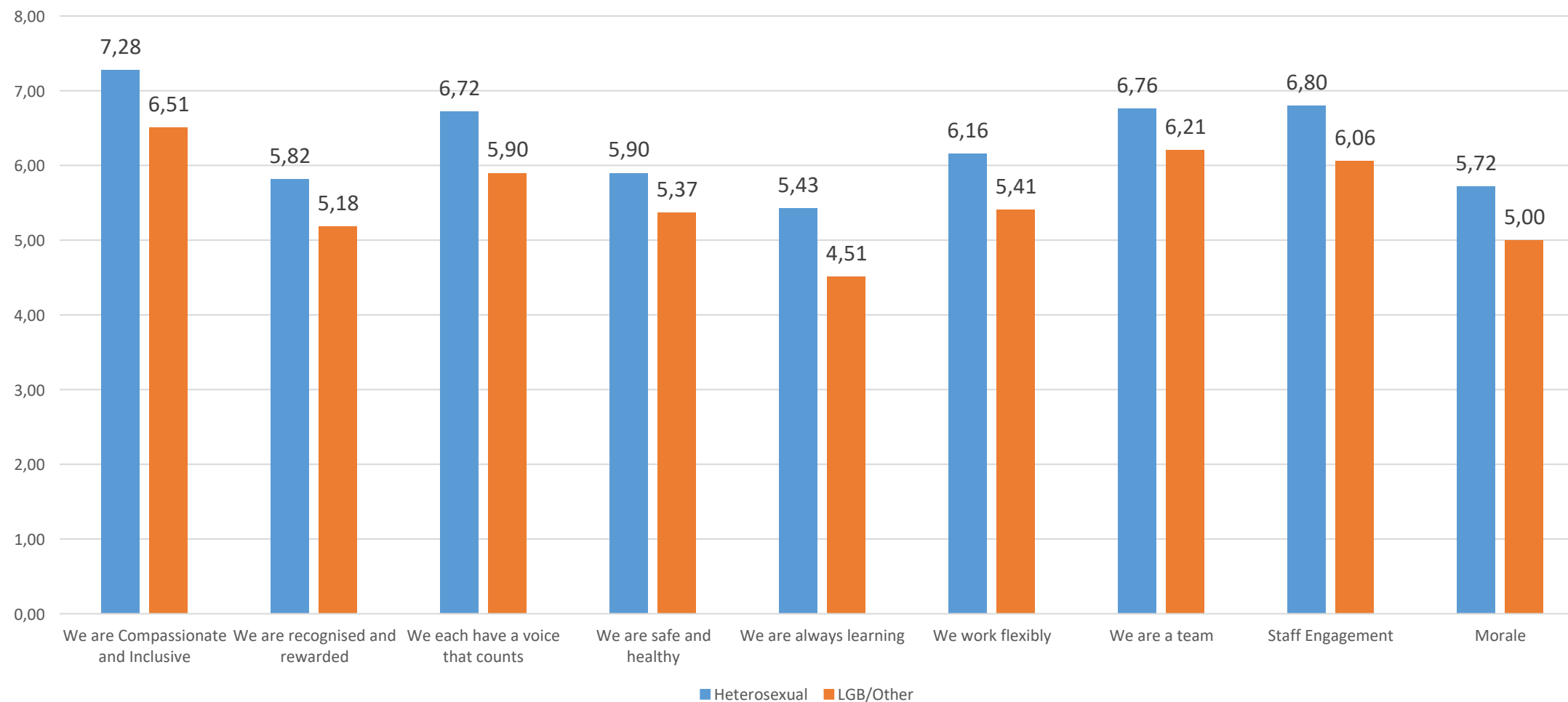
People Promise - Ethnicity



People Promise - Disability

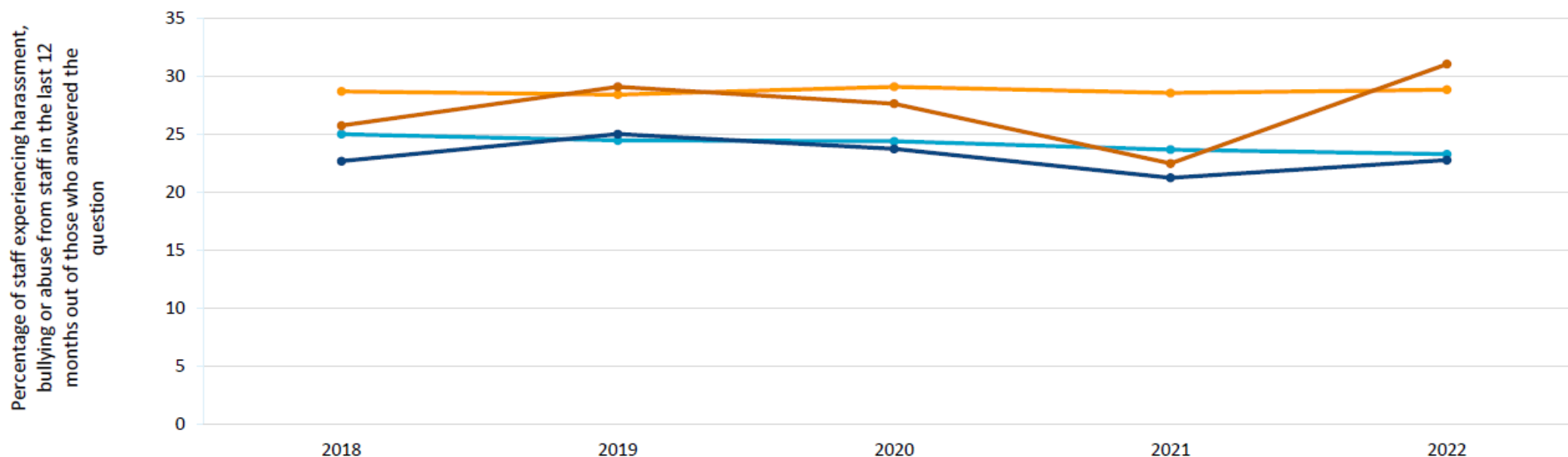


People Promise – Sexual Orientation



Workforce Race Equality Standard (WRES)

Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months



	2018	2019	2020	2021	2022
White staff: Your org	22.7%	25.0%	23.7%	21.2%	22.7%
All other ethnic groups*: Your org	25.7%	29.1%	27.6%	22.5%	31.0%
White staff: Average	25.0%	24.4%	24.4%	23.6%	23.3%
All other ethnic groups*: Average	28.7%	28.4%	29.1%	28.5%	28.8%
White staff: Responses	512	2317	2176	1833	2009
All other ethnic groups*: Responses	70	289	297	285	403

*Staff from all other ethnic groups combined

Average calculated as the median for the benchmark group

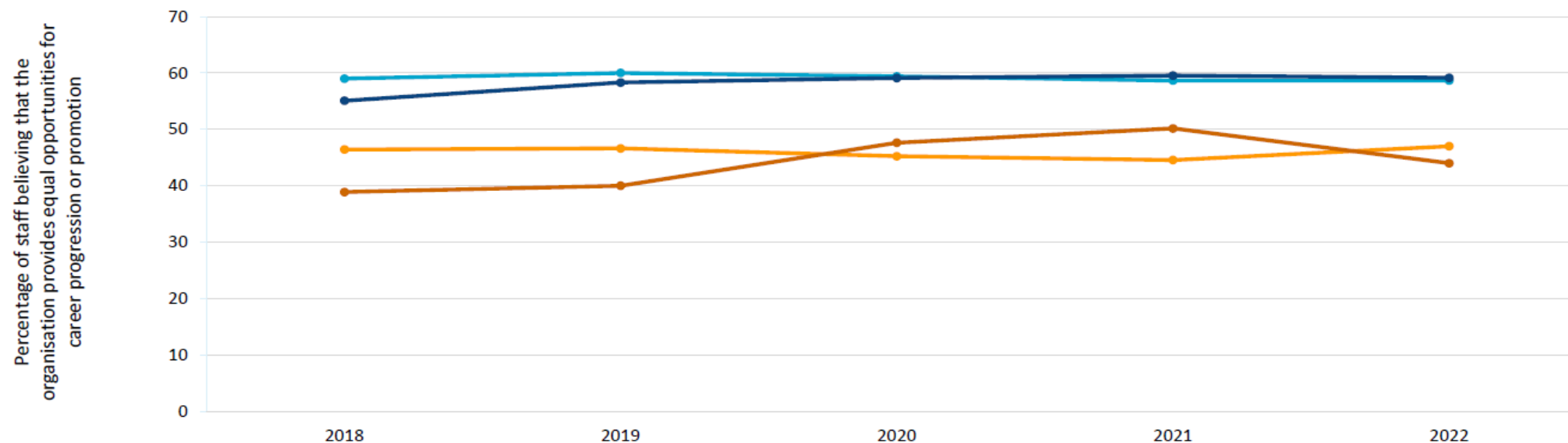
62.4%

Workforce Race Equality Standard (WRES)

Survey
Coordination
Centre



Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion.



	2018	2019	2020	2021	2022
White staff: Your org	55.1%	58.3%	59.1%	59.5%	59.1%
All other ethnic groups*: Your org	38.9%	40.0%	47.6%	50.2%	44.0%
White staff: Average	59.0%	60.0%	59.4%	58.6%	58.6%
All other ethnic groups*: Average	46.4%	46.6%	45.2%	44.6%	47.0%
White staff: Responses	514	2319	2259	1888	2009
All other ethnic groups*: Responses	72	290	315	303	400

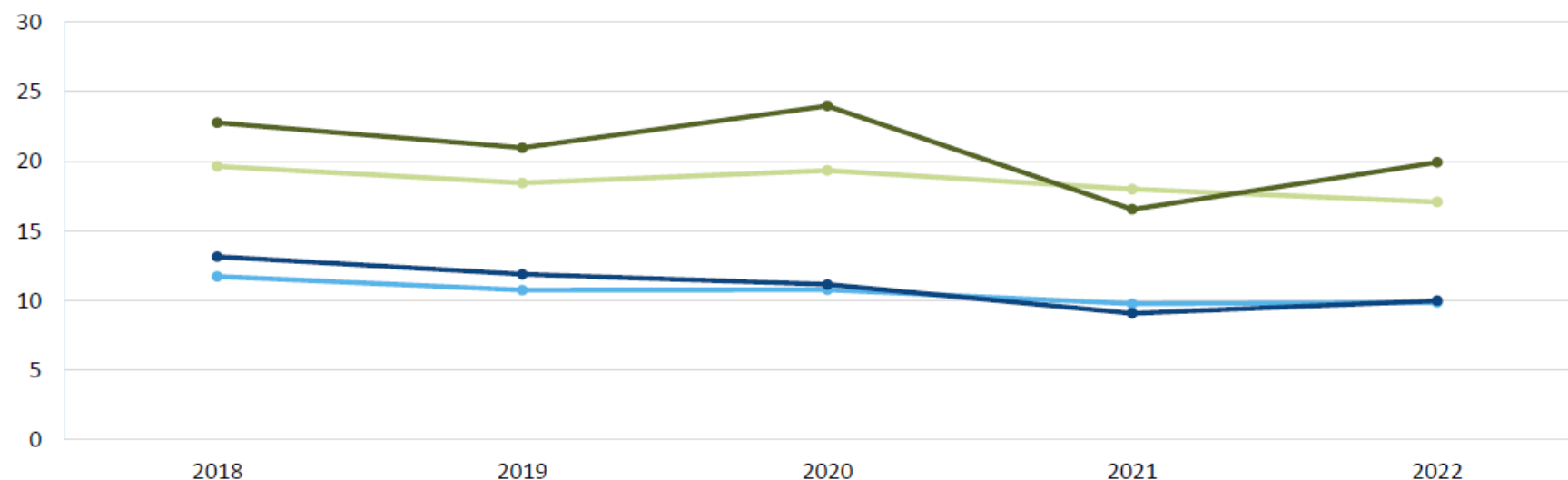
*Staff from all other ethnic groups combined

Average calculated as the median for the benchmark group

118

Percentage of staff experiencing harassment, bullying or abuse from managers in the last 12 months out of those who answered the question

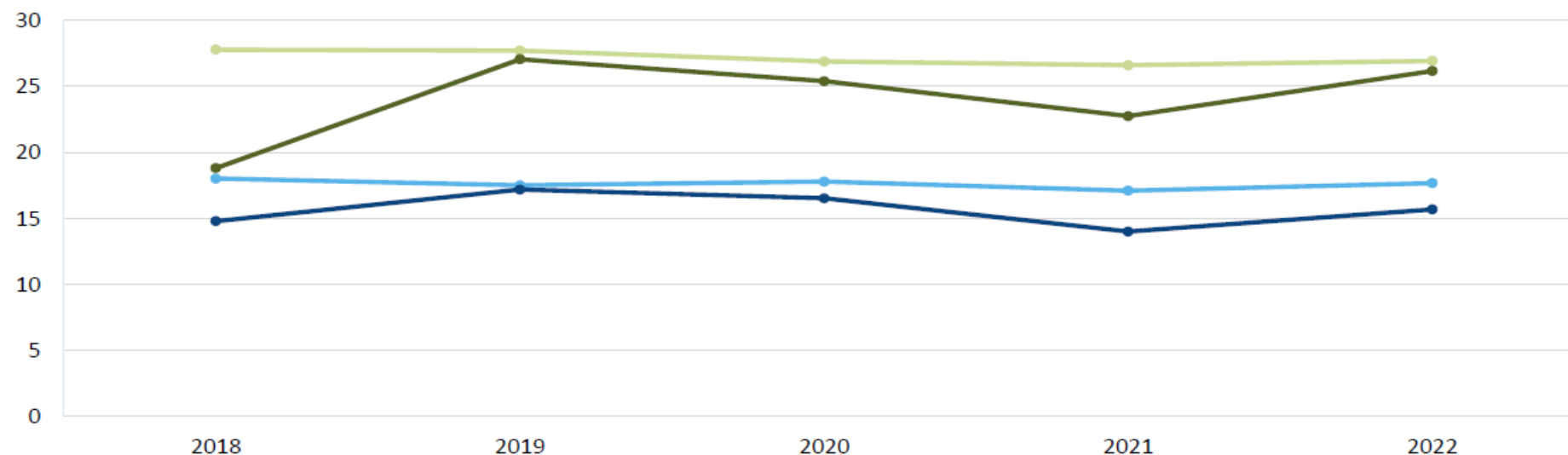
Percentage of staff experiencing harassment, bullying or abuse from managers in the last 12 months.



	2018	2019	2020	2021	2022
Staff with a LTC or illness: Your org	22.8%	21.0%	24.0%	16.6%	19.9%
Staff without a LTC or illness: Your org	13.2%	11.9%	11.2%	9.1%	10.0%
Staff with a LTC or illness: Average	19.6%	18.4%	19.3%	18.0%	17.1%
Staff without a LTC or illness: Average	11.7%	10.8%	10.8%	9.8%	9.9%
Staff with a LTC or illness: Responses	101	453	442	465	572
Staff without a LTC or illness: Responses	479	2178	2051	1661	1840

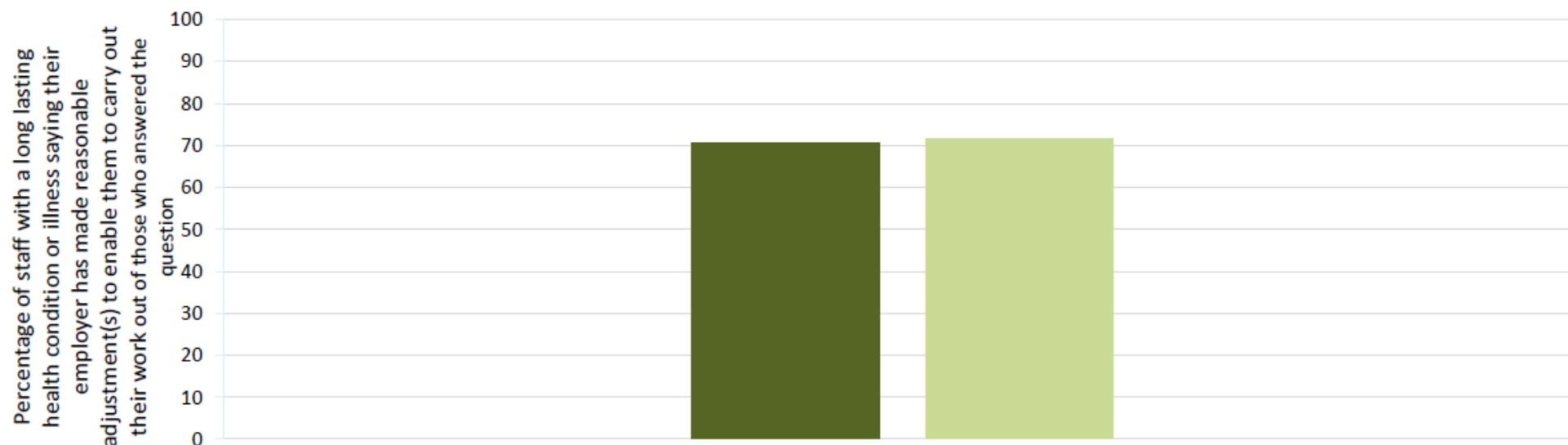
Percentage of staff experiencing harassment, bullying or abuse from other colleagues in the last 12 months out of those who answered the question

Percentage of staff experiencing harassment, bullying or abuse from other colleagues in the last 12 months.



	2018	2019	2020	2021	2022
Staff with a LTC or illness: Your org	18.8%	27.1%	25.4%	22.7%	26.2%
Staff without a LTC or illness: Your org	14.8%	17.2%	16.5%	14.0%	15.7%
Staff with a LTC or illness: Average	27.8%	27.7%	26.9%	26.6%	26.9%
Staff without a LTC or illness: Average	18.0%	17.5%	17.8%	17.1%	17.7%
Staff with a LTC or illness: Responses	101	451	441	466	577
Staff without a LTC or illness: Responses	473	2182	2057	1657	1823

Percentage of staff with a long lasting health condition or illness saying their employer has made reasonable adjustment(s) to enable them to carry out their work.



2022

Staff with a LTC or illness: Your org	70.7%
Staff with a LTC or illness: Average	71.8%
Staff with a LTC or illness: Responses	331



Stockport
NHS Foundation Trust

Any Questions?

Stockport NHS Foundation Trust

Meeting date	7 June 2023	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Stockport NHS Foundation Trust - Corporate Objectives 2023/24					
Presented by	Professor Tony Warne, Chair		Author	Jonathan O'Brien, Director of Strategy and Partnerships		

Recommendations made / Decisions requested:

The Council of Governors is asked to review and note the Stockport NHS Foundation Trust Corporate Objectives 2023/24.

Executive Summary:

The Corporate Objectives for 2023/24 were approved by the board of directors at its meeting on 1 June as follows:

- Deliver Personalised, Safe and Caring Services
- Support the health and wellbeing needs of our community and colleagues
- Develop effective partnerships to address health and wellbeing inequalities
- Develop a diverse, talented and motivated workforce to meet future service and user needs
- Drive service improvement through high quality research, innovation and transformation
- Use our resources efficiently and effectively.
- Develop our Estate and Digital Infrastructure to meet service and user needs.

Key messages:

- Approved Corporate Objectives will form the basis of the annual objective setting process for individuals, starting with the Chief Executive and Executive Team and cascading through the organisation.
- During 2023/24 the NHS nationally and locally will experience significant change, including the continuing development of Integrated Care Systems (ICS) and locality structures and focus on recovery from the COVID-19 pandemic. The proposed objectives and underpinning key outcomes will reflect this changing environment within which the Trust operates.
- The 2023/24 planning round has been completed and the setting of Corporate Objectives and key outcomes reflects the commitments made by the Trust.
- The objectives for 2023/24 have been aligned across Tameside and Glossop Integrated Care NHS Foundation Trust and Stockport NHS Foundation Trust and agreed by the respective Executive Teams. They were approved by Tameside & Glossop ICFT Board on 25th May 2023.

- As is the case annually, the Trust's Board Assurance Framework will reflect the Corporate Objectives.

Key outcome measures have been drafted from national and local requirements and will be finalised during June 2023 pending the outcome of the planning, with onward presentation to the Board of Directors.

Our Objectives for 2023/24

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

Our Vision

To work with partners to improve health and wellbeing outcomes for the communities we serve.

Our Values & Our Mission

We Care

About each other; our patients and their families; the communities we serve; and the environment.

We Respect

Each other; our patients and their families; and our partners.

We Listen

To each other; our patients and their families; and our partners.

Our Mission

Making a difference every day.

Stockport NHS Foundation Trust

Meeting date	7 June 2023	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Council of Governors Standards of Business Conduct - Governor Register of Interest - Fit and Proper Persons - Code of Conduct					
Presented by	Rebecca McCarthy, Trust Secretary		Author		Rebecca McCarthy, Trust Secretary	

Recommendations made / Decisions requested

The Council of Governors is asked to:

- Review and confirm the Register of Interests of the Council of Governors and that, to the best of their knowledge, that governors are eligible to remain a governor in line with the Stockport NHS Foundation Trust Constitution.

Executive Summary

This report presents the Council of Governors Register of Interests for annual review and confirms to the best of the Trust's knowledge, following self-declaration, that all governors are considered a 'fit and proper person' in line with the Trust's Licence. Furthermore, the report confirms all governors have reviewed and signed the Code of Conduct.

1. Introduction

- 1.1 There is a legal requirement for the Trust to maintain a Register of Governors' Interests which should be available to the public. This requirement is incorporated in the Trust's Constitution. Members of the Council of Governors are required to declare any interests they have which are relevant and material to their role.
- 1.2 In addition, Governors must self-certify as part of the election process, that they are a fit and proper person in line with the Stockport NHS Foundation Trusts' (SFT) Licence and Trust Constitution. The Trust should make arrangements that no person who is an 'unfit' person may continue as a governor.

2. Register of Interests

- 2.1 The Register of Governors' Interests is maintained by the Trust Secretary and is updated to reflect any amendments which may from time to time be declared during the normal course of business. In this way, an up to date register is always available. It is considered good practice for the Council to complete a formal review on an annual basis to ensure currency and accuracy of register content.
- 2.2 The current Register of Governors' Interests is included for reference at Appendix 1 to this report.
- 2.3 Governors are requested to review the Register of Interests and confirm that current content is accurate and up to date.

3. Fit & Proper Persons

- 3.1 As part of the governor election process, governors are required to self-certify that they are eligible to become a member of the Council of Governors in line with the Trust's Licence and Constitution and are not:

15.1.1 a person who has been adjudged bankrupt or whose estate has been sequestrated and (in either case) has not been discharged;

15.1.2 a person in relation to whom a moratorium period under a debt relief order applies under Part 7A of the Insolvency Act 1986;

15.1.3 a person who has made a composition or arrangement with, or granted a trust deed for, his/her creditors and has not been discharged in respect of it;

15.1.4 a person who within the preceding five years has been convicted in the British Islands of any offence if a sentence of imprisonment (whether suspended or not) for a period of not less than three months (without the option of a fine) was imposed on him.

(Stockport NHS Foundation Trust - Constitution)

- 3.2 Appendix 1 provides confirmation that all governors have self-declared that they are not an 'unfit' person and eligible to continue as a member of the Council of Governors.

4. Code of Conduct for Stockport NHS Foundation Trust Directors and Governors

- 4.1 A Code of Conduct for Directors and Governors is in place, setting out the standards and behaviours that Stockport NHS Foundation Trust expects from its Directors and Governors (individually and collectively) when acting on behalf of, or representing, the Trust. The Code of Conduct complements the Trust's Constitution.
- 4.2 Appendix 1 provides confirmation that all governors have signed the Code of Conduct and will adhere to the highest standards of conduct in the performance of their duties.

5. Recommendation

The Council of Governors is asked to:

- Review and confirm the Register of Interests of the Council of Governors and that, to the best of their knowledge, that governors are eligible to remain a governor in line with the Stockport NHS Foundation Trust Constitution.

Appendix 1: Council of Governors Register of Interests

Name	Constituency	Declared Interests	Confirmed Eligible to Continue as a Governor	Confirmed signed Code of Conduct
Sue Alting	Appointed – Age UK Stockport	<ul style="list-style-type: none"> • Chair – Age UK Stockport • Chair – Step Out Stockport • Director – Pebble Enterprises Limited • Director – Shelf Company Age Concern Stockport • Member – Healthwatch Stockport • Member – Parochial Church Council of St Martin's Norris Bank • Husband is a volunteer chaplain at the Trust 	Yes	Yes
Howard Austin	Public – Tame Valley & Werneth	<ul style="list-style-type: none"> • Member of the Liberal Democrats 	Yes	Yes
Janet Browning	Public – High Peak & Dales	<ul style="list-style-type: none"> • Nil 	Yes	Yes
Val Cottam	Public – Marple & Stepping Hill	<ul style="list-style-type: none"> • Nil 	Yes	Yes
Michael Cunningham	Public – Marple & Stepping Hill	<ul style="list-style-type: none"> • Nil 	Yes	Yes
Lance Dowson	Public – High Peak & Dales	<ul style="list-style-type: none"> • Member of the Labour Party • Member of the Co-op Party • Member of the Court of the University of Derby • Member of the C21/Better Services Closer to Home working group (Derbyshire CCG) • Member of the East Midlands Ambulance Service Foundation Trust • Member of the Derbyshire Community Health Service Foundation Trust • Founder & Counsellor “Mantalk” • Founder & Counsellor – Cosmetic Surgery Helpline & 	Yes	Yes

Name	Constituency	Declared Interests	Confirmed Eligible to Continue as a Governor	Confirmed signed Code of Conduct
		Advisory Service <ul style="list-style-type: none"> Chairman of the Hayfield branch of the Royal British Legion 		
Paula Hancock	Staff	<ul style="list-style-type: none"> Nil 	Yes	Yes
Jamie Hirst	Public – Heatons & Victoria	<ul style="list-style-type: none"> Director, Hirst Dynamics Ltd Director, H-Dyn Retail Ltd Member of the Liberal Democrats 	Yes	Yes
Keith Holloway	Appointed – Stockport MBC	<ul style="list-style-type: none"> Member of the Liberal Democrats Councillor, Cheadle Hulme South Ward Cabinet member, adult social care and health portfolio Chair, Stockport Health and Well-being Board Member, Greater Manchester Integrated Care Partnership Board Member, governing body, Oak Tree Primary School 	Yes	Yes
Richard King	Public – Marple & Stepping Hill	<ul style="list-style-type: none"> Chairman – Torkington Allotment Association Treasurer – Friends of Torkington Park Treasurer – Cheshire & North Wales Orchid Society Secretary – Stockport Greenspace Forum Administrator – Hazel Grove Carnival Treasurer to the Hazel Grove Carnival Association 	Yes	Yes
David Kirk	Appointed – Stockport Healthwatch	<ul style="list-style-type: none"> Member of Healthwatch Stockport, Operations Team 	Yes	Yes

Name	Constituency	Declared Interests	Confirmed Eligible to Continue as a Governor	Confirmed signed Code of Conduct
Tad Kondratowicz	Public – Heatons & Victoria	<ul style="list-style-type: none"> Nil 	Yes	Yes
Thomas Lowe	Public – High Peak & Dales	<ul style="list-style-type: none"> Member of Labour Party 	Yes	Yes
David McAllister	Staff	<ul style="list-style-type: none"> Unison Member of Labour Party Member of Co-operative Party 	Yes	Yes
Tony Moore	Public – Marple & Stepping Hill	<ul style="list-style-type: none"> Financial Adviser, includes private medical insurance 	Yes	Yes
Adrian Nottingham	Public – Bramhall & Cheadle	<ul style="list-style-type: none"> Community Computers Business Development Manager for Stockport charity, Renewal North West – Engaged in Stockport DigiKnow initiative to address digital exclusion 	Yes	Yes
John Pantall	Public – Bramhall & Cheadle	<ul style="list-style-type: none"> Independent Observer, Greater Manchester Pension Fund Member of the Liberal Democrats 	Yes	Yes
Adam Pinder	Staff	<ul style="list-style-type: none"> Member – Conservative Party 	Yes	Yes
Muhammad Zuheer Rahman	Public – Outer Region	<ul style="list-style-type: none"> Nil 	Yes	Yes
Gillian Roberts	Public – Tame Valley & Werneth	<ul style="list-style-type: none"> Nil 	Yes	Yes
Michelle Slater	Public – Bramhall & Cheadle	<ul style="list-style-type: none"> Governor of Inscape School (Together Trust) Member of Healthwatch Stockport NHS Foundation Trust member of the British Dental Association Member of Motor Neurone Disease Association 	Yes	Yes

Name	Constituency	Declared Interests	Confirmed Eligible to Continue as a Governor	Confirmed signed Code of Conduct
		<ul style="list-style-type: none"> Member of Parkinsons Disease Association 		
Karen Southwick	Staff	<ul style="list-style-type: none"> Nil 	Yes	Yes
Christopher Summerton	Public – Heatons & Victoria	<ul style="list-style-type: none"> Employed as a part time Consultant (Lancashire Teaching Hospitals Trust) Private medical and medico-legal practice at the Alexandra Hospital, Cheadle Shareholder of Hope Citadel Healthcare CIC Memberships and Fellowships: British Association for the Study of the Liver; British Medical Association; British Society of Gastroenterology; Christian Medical Fellowship; Evangelical Alliance; Royal College of Physicians of Edinburgh; Royal College of Physicians of London; St Martin's Church, Stockport 	Yes	Yes
Sarah Thompson	Public – Bramhall & Cheadle	<ul style="list-style-type: none"> Nil 	Yes	Yes

Stockport NHS Foundation Trust

Meeting date	7 June 2023	X	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Proposed Amendments to the Trust’s Constitution					
Presented by	Rebecca McCarthy, Trust Secretary	Author		Rebecca McCarthy, Company Secretary		

Recommendations made / Decisions requested

The Council of Governors is asked to:

- **Review and approve the proposed amendments to the Trust's Constitution.**

Executive Summary

The current version of the Trust Constitution was approved by the Board of Directors and Council of Governors in July 2019. Since this time, the Health and Care Act 2022 has been enacted and a modified NHS Provider Licence and updated code of governance for NHS provider trusts published, which have yet to be incorporated in the Trust Constitution.

The Trust Constitution states that the Trust may make amendments to its Constitution only if:

- More than half of the members of the Council of Governors of the Trust voting approve the amendments; and
- More than half of the members of the Board of Directors of the Trust voting approve the amendments.

Proposed amendments are summarised as:

- Amendments made in line with the Health & Care Act 2022 & modified Provider Licence including provision to enable joint working and delegation, and the Trust's commitment to exercise its functions effectively, efficiently and economically with regard to the wider effects of its decisions.
- Amendments made in line with the Code of Governance for NHS provider trusts including arrangements for appointment and reappointment of non-executive directors.
- Amendments to Membership & Council of Governors including alignment of public constituencies with outcome of the Stockport electoral ward boundary review and increase in minimum age for membership from 11 to 16. In addition, removal of Appointed Governor for Stockport Clinical Commissioning Group (CCG) following disestablishment of CCG's in the 2022 Act.

The Board of Directors reviewed and approved the amendments at its meeting on 1 June 2023. Subject to approval by the Council of Governors, NHS England will be notified of changes and provided with a copy of the approved Constitution, which will also be made available on the Trust's website.

1. Introduction

- 1.1 The purpose of this report is to present proposed amendments to the Trust's Constitution to the Board of Directors for approval.

2. Background & Context

- 2.1 The current version of the Trust Constitution was approved by the Board of Directors and Council of Governors in July 2019. Since this time, the Health and Care Act 2022 has been passed, and subsequently, a modified NHS Provider Licence [setting out the conditions that providers of NHS-funded healthcare services in England must meet] and an updated code of governance for NHS provider trusts [setting out an overarching framework for the corporate governance of trusts] have been published, which have yet to be incorporated in the Trust Constitution.

- 2.2 The Trust Constitution states that:

The Trust may make amendments of its Constitution only if:

- 44.1.1 More than half of the members of the Council of Governors of the Trust voting approve the amendments; and
- 44.1.2 More than half of the members of the Board of Directors of the Trust voting approve the amendments.

- 2.3 This paper sets out several proposed changes for consideration by the Board of Directors, followed by the Council of Governors.

3. Proposed Amendments

- 3.1 A summary of key changes to the Trust's Constitution is provided below, with all amendments listed in Appendix 1. A full version of the Constitution is available from Trust Secretary upon request.

- 3.2 Amendments made in line with Health & Care Act 2022 & Provider Licence:

- All references to NHS Improvement and Monitor replaced by NHS England.
- Provisions for joint working & delegation arrangements to enable system working.
- Trust's commitment to exercise its functions effectively, efficiently and economically with regard to the wider effects of its decisions and climate change.
- Duties relating to Integrated Care System financial controls.
- Confirmation of requirements for Annual Report and Accounts.

- 3.3 Amendments made in line with Code of Governance for NHS provider trusts:

- Additional Provisions Board of Directors – Clarification regarding the number of years a Non-Executive Director may serve.
- Option for the Chair of another Foundation Trust, or another appropriate person, i.e. representative of NHS England or ICB, to act as an independent assessor to the Nominations Committee.
- Trust Secretary to be appointed and removed by the Board of Directors.

- 3.4 Other Amendments – Membership & Council of Governor

- Public Constituencies – Update to Stockport borough public constituencies to bring in line with Stockport electoral ward boundary review. Recommendation supported by the Membership Development Group [of the Council of Governors].

- Minimum age limit for members increased from 11 to 16 years of age. Recommendation supported by the Membership Development Group
- Removal of Council of Governors Referral to the Panel following the Independent Panel for Advising Governors being disbanded in 2017.
- Composition of Council of Governors – Update to include an Appointed Governor from a Greater Manchester University, with current appointment specific to a representative from The University of Manchester or Manchester Metropolitan University and removal of Appointed Governor for Stockport Clinical Commissioning Group following disestablishment of CCGs.
- Standing Orders of Council of Governors – Specific provisions related to ‘Speaking’ within the Council of Governors meetings removed.

3.5 Other Amendments – Board of Directors

- Seal – Attestation of the seal by any two Directors shall be deemed to constitute affixing of the seal under the authority of the Board of Directors in line with the Scheme of Delegation.

4. Next Steps

- 4.1 The Board of Directors reviewed and approved the proposed amendments at its meeting on 1 June 2023.
- 4.2 Subject to approval by the Council of Governors, NHS England will be notified of changes and provided with a copy of approved Constitution, which will also be made available on the Trust’s website.

Text to be deleted from the Constitution has been struck through; additional text is included and underlined.

For avoidance of repetition, replacement of references to 'Monitor' and 'NHS Improvement' with 'NHS England' are not included. Minor grammatical revisions are not included.

1.	Unless otherwise stated, words or expressions contained in this constitution shall bear the same meaning as in the National Health Service Act 2006 as amended by the Health and Social Care Act 2012 Act, the 2022 Act and other amending legislation.
2.	Proof that an envelope containing a notice was properly addressed, prepaid and posted shall be conclusive evidence that the notice was given. A notice shall be treated as delivered 48 hours after the envelope containing it was posted or, in the case of a notice contained in an electronic communication, 48 hours after it was sent.
3.	the 2022 Act is the Health and Social Care Act 2022
4.	Integrated Care Board (ICB) means an ICB established under the 2022 Act
5.	Monitor is the body corporate known as Monitor, as provided by Section 61 of the 2012 Act;
6.	NHS England means the body corporate known as NHS England, established under section 1H of the 2006 Act;
7.	NHS provider licence means the licence number 130114 issued by Monitor granted to the Trust on 1 April 2013;
8.	Statutory transaction means a merger under section 56 of the 2006 Act, an acquisition under section 56A of the 2006 Act, a separation under 56B of the 2006 Act, and dissolution under section 57A of the 2006 Act;
9.	Save as otherwise permitted by law, the Chair shall be the final authority for all purposes on the interpretation of this constitution (on which they should be advised by the Trust Secretary).
10.	<p><u>Commitments</u></p> <p><u>The Trust shall exercise its functions effectively, efficiently, and economically.</u></p> <p><u>Subject to paragraph 5.3 below and having regard to any guidance published by NHS England, in deciding about the exercise of its functions, the Trust shall have regard to all likely effects of the decision in relation to:</u></p> <ul style="list-style-type: none"> <u>i. the health and well being of the people of England;</u> <u>ii. the quality of services provided to individuals be relevant bodies, or in pursuance of arrangements made by relevant bodies, for or in connection with the prevention, diagnosis or treatment of illness, as part of the health service in England; and</u> <u>iii. efficiency and sustainability in relation to the use of resources by relevant bodies for the purposes of the health service in England.</u> <p><u>The requirement to have regard to the wider effect of its decisions set out in paragraph 5.2 shall not apply to decisions about services to be provided to a particular individual for or in connection with the prevention, diagnosis or treatment of illness.</u></p>

	<p><u>In paragraph 5.2 ‘relevant bodies’ has the meaning set out in paragraph 63A (4) of the 2006 Act.</u></p> <p><u>In exercising its functions, the Trust shall have regard to the need to contribute towards compliance with the UK net zero emissions target set out at section 1 of the Climate Change Act 2008 and the environmental targets set out at section 5 of the Environment Act 2021, and to adapt to any current or predicted impacts of climate change identified in the most recent report under section 56 of the Climate Change Act 2008. In doing so, the Trust shall also have regard to guidance published by NHS England.</u></p> <p><u>The Trust may do anything which appears to be necessary or expedient for the purposes of or in connection with its functions.</u></p>
11.	<p><u>Joint working and delegation arrangements</u></p> <p><u>Subject to paragraph 5.7.2 the Trust may arrange in accordance with s65Z5 of the 2006 Act for the joint exercise of functions with any one or more of the following bodies:</u></p> <p><u>a relevant body;</u></p> <p><u>a local authority;</u></p> <p><u>a combined authority</u></p> <p><u>Where the Trust has entered into arrangements for the joint exercise of functions with one or more bodies in accordance with paragraph 5.7.1, it may make arrangements for:</u></p> <p><u>the function to be exercised by a joint committee of theirs</u></p> <p><u>for one or more of them, or a joint committee of them, to establish and maintain a pooled fund.</u></p> <p><u>The Trust must have regard to any guidance published by NHS England under s65Z7.</u></p> <p><u>In this paragraph 5.7.4, the following terms have the following meanings:</u></p> <p><u>‘Relevant body’ has the meaning set out in section 65Z5(2) of the 2006 Act</u></p> <p><u>‘Local authority’ means a local authority within the meaning of section 2B of the 2006 Act</u></p> <p><u>‘Combined authority’ has the meaning set out in s275 of the 2006 Act</u></p> <p><u>‘Pooled fund’ has the meaning set out in s65Z6(3) of the 2006 Act.</u></p>
12.	<p><u>Duties relating to Integrated Care System financial controls</u></p> <p><u>The Trust must seek to achieve financial objectives that apply to under section 223L of the 2006 Act.</u></p> <p><u>The Trust must exercise its functions with a view to ensuring that it complies with its duties:</u></p> <p><u>under s223LA of the 2006 Act to limit expenditure</u></p> <p><u>under s223M and s223N of the 2006 Act to limit local capital resource use and local revenue resource use.</u></p>

13.	An individual must be at least eleven <u>sixteen</u> years old to become a member of the Trust.
14.	A subsequent variation of the Model Election Rules by the Department of Health & Social Care <u>or NHS Providers</u>
15.	Council of Governors – referral to the Panel In this paragraph, “the Panel” means a panel of persons appointed by Monitor to which a governor of the Trust may refer a question as to whether the Trust has failed or is failing: — to act in accordance with its constitution; or — to act in accordance with provision made by or under Chapter 5 of the 2006 Act. <u>A governor may refer a question to the Panel only if more than half of the members of the Council of Governors voting approve the referral.</u>
16.	The seal shall not be affixed except under the authority of the Board of Directors. <u>Attestation by any two directors shall be deemed to constitute affixing the seal under the authority of the Board of Directors.</u>
17.	An elected governor shall cease to hold office if he/she <u>they</u> ceases to be a member of the constituency or class by which he/she was <u>they were</u> elected, <u>or if they are disqualified for any of the reasons set out in this constitution. For the avoidance of doubt, this includes a governor moving their principal residence from one public constituency to another.</u>
18.	An elected governor shall be eligible for re-election at the end of his/her <u>their</u> term. and shall serve no more than three terms of office, resulting in a maximum 9 years tenure <u>An elected governor may not, if re-elected for more than a single term of office hold office for more than nine (9) consecutive years in total.:</u>
19.	An appointed governor may hold office for a period not exceeding three years commencing immediately after the annual members meeting at which their appointment is announced <u>shall be eligible for re-appointment at the end of their term. An appointed governors may not hold office for longer than nine (9) consecutive years.</u>
20.	For the purposes of paragraph 15.3 and 15.4 <u>years of office are consecutive unless there is a break of at least 12 months between them. A these provisions concerning terms of office for Governors,</u> “year” means a period commencing immediately after their election <u>or appointment</u> is announced.
21.	The Chairman of the Trust (i.e. <u>i.e.</u> , the Chairman of the Board of Directors, appointed in accordance with this constitution) or, in his/her absence, the Deputy Chairman (appointed in accordance with the provisions of this constitution), or, in his or her absence, one of the non-executive Directors, shall preside at meetings of the Council of Governors. If the person presiding at any such meeting has a conflict of interest in relation to the business being discussed, the Lead Governor of the Council of Governors will chair that part of the meeting.
22.	Meetings of the Council of Governors shall be open to members of the public save that members of the public may be excluded from a meeting for special reasons, unless the Council of Governors decides otherwise in relation to all or part of a meeting for reasons of commercial confidentiality or for other special reasons. —The Chairman may exclude members of the public from a meeting if they are interfering with or preventing the proper conduct of the meeting or for other special reasons.
23.	The Trust shall establish <u>a committee of non-executive directors to decide the remuneration and allowances, and the other terms and conditions of office, of the Chief Executive and other executive directors.</u> an executive remuneration committee of non-executive Directors to decide the remuneration and allowances, and the other terms and conditions of office, of the Chief Executive, other executive Directors and other senior managers not employed under the national terms and conditions of employment and pay.
24.	The Trust Secretary shall <u>add to the register of members the name of any individual who is accepted as a member of the Trust under the provisions of this constitution. The Trust Secretary shall</u> remove from the register of members the name of any member who ceases to be entitled to be a member

	under the provisions of this constitution
25.	<u>The Trust shall lay a copy of the annual accounts, and any report of the auditor on them, before parliament and once it has done so, send copies of those to NHS England.</u>
26.	<u>The Trust shall lay a copy of the annual accounts, and any report of the auditor on them, before parliament and once it has done so, send copies of those to NHS England.</u>
27.	<p><u>Each Annual Report must, in particular, review the extent to which the Trust has exercised its functions:</u> <u>in accordance with the plans published under:</u> <u>section 14Z52 of the 2006 Act;</u> <u>section 14Z56 of the 2006 Act</u> <u>consistently with NHS England's views set out in the latest statement published under section 13SA(1)</u> <u>Each</u>The <u>Annual Report shall provide:</u> information on any steps taken by the Trust to secure that (taken as a whole) the actual membership of its public constituencies and the classes of the staff constituency is representative of those eligible for such membership; and <u>give information on any occasions in the period to which the report relates on which the Council of Governors exercised its powers under paragraph 33.2 and such other procedures as the Trust has on pay;</u> <u>information on the remuneration of the directors and on the expenses of the governors and the directors; and</u> any other information Monitor NHS England requires.</p>
28.	The seal shall not be affixed except under the authority of the Board of Directors. <u>Attestation by any two directors shall be deemed to constitute affixing the seal under the authority of the Board of Directors.</u>
29.	The Trust may only apply for a merger, acquisition, separation or dissolution <u>Statutory Transaction</u> with the approval of more than half of the members of the Council of Governors.
30.	<p><u>For the avoidance of doubt, for the purposes of paragraph 465.3.1, the term 'transaction' shall not include a contract with a commissioning organisation for the provision of services for the purposes of the health service in England or Wales. A Statutory Transaction under paragraph 46.1 is not a significant transaction for the purposes of paragraph 46.2.</u> If more than half of the members of the Council of Governors voting decline to approve a significant transaction or any part of it, the Council of Governors must approve a written Statement of Reasons for its rejection, to be provided to the Board of Directors.</p>
31.	<p><u>Validity of Actions</u> <u>No defect or deficiency in the appointment or composition of the members or the Council of Governors or the Board of Directors shall affect the validity of any decision or action taken by them.</u></p>
32.	<p>The following areas are public constituencies of the Trust:</p> <ol style="list-style-type: none"> 1) <u>Bramhall and Cheadle</u> – which covers the following electoral wards: - Bramhall North, Bramhall South <u>& Woodford</u>, Cheadle Hulme South, Cheadle West and <u>Gatley</u>, <u>Cheadle East &</u> Cheadle Hulme North and Heald Green 2) <u>Tame Valley and Werneth</u> – which covers the following electoral wards: -

	<p>Brinnington and <u>Stockport</u> Central, Reddish North, Reddish South, Bredbury and & Woodley, Bredbury Green and & Romiley</p> <p>3) <u>The Heatons and Victoria-Stockport West</u> – which covers the following electoral wards: - Heatons North, Heatons South, Davenport and Cale Green, Edgeley and Cheadle Heath, Manor</p> <p>4) <u>Marple and Stepping HillHazel Grove</u> – which covers the following electoral wards: - Marple North, Marple South <u>& High Lane</u>, Hazel Grove, Offerton, Stepping Hill<u>Norbury & Woodsmoor</u></p>
33.	<p>There is one staff class:</p> <p>1) Staff – All individuals who satisfy the criteria for membership of the Staff Constituency in accordance with paragraphs 8.1 – 8.2 of the constitution.</p> <p><u>All individuals who satisfy the criteria for membership of the Staff Constituency in accordance with paragraphs 8.1 – 8.2 of the constitution shall be a member of the Staff Constituency.</u></p> <p><u>The Staff Constituency does not have any classes within it.</u></p> <p>The minimum number of members of each class of the Staff Constituency is to be 100.</p>
34.	<p>The Council of Governors of the Trust is to comprise:</p> <p>Twenty Public Governors, from the following public constituencies:</p> <ol style="list-style-type: none"> 1.1 Bramhall and Cheadle – four Public Governors; 1.2 Tame Valley and Werneth – four Public Governors; 1.3 the Heatons and <u>Victoria-Stockport West</u> – four Public Governors; 1.4 Marple and <u>Stepping HillHazel Grove</u> – four Public Governors; 1.5 High Peak– three Public Governors; and 1.6 Outer region – one Public Governor. <p>Four Staff Governors from the following classes:</p> <p>2. — Staff – All individuals who satisfy the criteria for membership of the Staff Constituency in accordance with paragraphs 8.1 – 8.2 of the Constitution.</p> <p>One Governor to be appointed by Stockport Clinical Commissioning Group – a Partnership Governor.</p> <p>One Governor to be appointed by The University of Manchester or Manchester Metropolitan University <u>Greater Manchester university</u> – a Partnership Governor</p>
35.	<p>Further provisions as to eligibility to be a Governor:</p> <p>A person may not become a Governor of the Trust, and if already holding such office will immediately cease to do so if:</p> <p><u>They are a person who is not a fit and proper person as defined by regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and/or condition G4 of the Trust’s provider licence;</u></p> <p>He/she has previously been removed as a Governor pursuant to the procedure set out in this Annex 5; <u>or removed from being a governor of</u> another Foundation <u>Trust for cause.</u></p>

36.	On the basis of disclosures obtained through an application to the Disclosure and Barring Service, he/she is not considered suitable to become or continue as a Governor following consideration by the Trust's Chairman, Chief Executive and Lead Governor;
37.	The Nominations Committee will comprise the Chairman (or, when a Chairman is being appointed, the Deputy Chairman unless they are standing for appointment, in which case another non-executive Director), Deputy Chairman and five Governors. The Chairman of another Foundation Trust, <u>or another appropriate person</u> , will be invited to act as an independent assessor to the Nominations Committee. The Nominations Committee will consult the Chief Executive.
38.	Any re-appointment of a non-executive Director by the Council of Governors shall be subject to a satisfactory appraisal carried out in accordance with procedures which the Board of Directors has approved. <u>A non-executive Director (including the Chair) may serve on the Board of Directors for longer than six (6) consecutive years, subject to annual appointment. Non-executive Directors (including the Chair) shall not hold office for longer than nine (9) years unless agreed with NHS England.</u>
39.	The Trust Secretary is to be appointed and removed by the Trust Chairman and Chief Executive <u>Board of Directors</u> .
40.	Further provisions as to eligibility to be a Director A person may not become a Director of the Trust, and if already holding such office, will immediately cease to do so if: <u>They are a person who is not a fit and proper person as defined by regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 and/or condition G4 of the Trust's provider licence;</u>
41.	The Board of Directors shall appoint trustees to administer separately charitable funds received by the Trust and for which they are accountable to the Charity Commission <u>As a public benefit corporation the Trust has specific powers to contract in its own name and to act as a corporate trustee. In the latter role it is accountable to the Charity Commission for those funds deemed to be charitable.-</u>
42.	Standing Orders of the Council of Governors: Any expression to which a meaning is given in the 2006, and 2012 <u>and 2022</u> Act shall have the same meaning in this interpretation
43.	Standing Orders of the Council of Governors: The purpose of the Council of Governors' Standing Orders is to ensure that the highest standards of corporate governance and conduct are applied to all meetings of the Council of Governors and associated deliberations. The Council shall at all times seek to comply with the Trust's statement of roles and responsibilities in relation to the Council of Governors <u>and</u> , the Trust's Code of Conduct for <u>Directors & Governors</u> , and the Trust's stewardship standards for Governors
44.	Standing Orders of the Council of Governors: The Trust Secretary shall deliver a schedule of the dates, times and venues of meetings of the Council of Governors for each financial year, six <u>three</u> months in advance of the first meeting of the Council of Governors to be called, duly agreed by the Chair or by an Officer of the Trust authorised by the Chair to sign on his/her behalf, to every Governor, or send such schedule by post to such Governor. Lack of service of the notice on any Governor shall not affect the validity of a meeting, subject to 4.3.4 below.
45.	Standing Orders of the Council of Governors: Setting the Agenda i. <u>The Council of Governors may determine that certain matters shall appear on every agenda for meetings of the Council of Governors and shall be addressed prior to any other business being conducted.</u> ii. <u>The Trust Secretary shall be responsible for producing the agenda for meetings in conjunction with the Chair. The Chair shall determine the order of</u>

	<u>items on the agenda and the expression of such items, including any agenda items requested pursuant to Standing Order 4.4.5 below.</u>
46.	<p>Standing Orders of the Council of Governors: Reports from the executive Directors</p> <p>i. At any meeting, a Governor may ask any question on any report by an Executive Director or another Officer through the Chair without notice, after that report has been received by or while such report is under consideration by the Council of Governors at the meeting.</p> <p>ii. Unless the Chair decides otherwise, no statements will be made by a Governor other than those which are strictly necessary to define or clarify any questions posed pursuant to 4.9.1 and, in any event, no such statement may last longer than three minutes each.</p> <p>iii. A Governor who has asked a question pursuant to 4.9.1 may ask a supplementary question if the supplementary question arises directly out of the reply given to the initial question.</p> <p>iv. The Chair may, in his/her absolute discretion, reject any question from any Governor if, in the opinion of the Chair, the question is substantially the same and relates to the same topic as a question which has already been put to the meeting or a previous meeting.</p> <p>v. At the absolute discretion of the Chair, questions may, at any meeting which is held in public, be asked of the Executive Directors present by members of the Foundation Trust or any other members of the public present at the meeting.</p> <p>b. Speaking</p> <p>This Standing Order applies to all forms of speech/debate by Governors or members of the Trust and public in relation to a motion or question under discussion at a meeting of the Council of Governors.</p> <p>i. Any approval to speak must be given by the Chair.</p> <p>ii. Verbal contributions must be directed to the matter, motion or question under discussion or to a point of order.</p> <p>iii. Unless in the opinion of the Chair it would not be desirable or appropriate to time limit verbal contributions on any topic to be discussed having regard to its nature, complexity or importance, no proposal, verbal contributions nor any reply may exceed three minutes.</p> <p>iv. The Chair may, in his/her absolute discretion, limit the number of replies, questions or verbal contributions which are heard at any one meeting.</p> <p>v.ii. A person who has already spoken on a matter at a meeting may not speak again at that same meeting in respect of that matter unless exercising a right of reply or speaking on a point of order.</p>
47.	Resolution of Disputes with <u>between</u> Council of Governors and Board of Directors
48.	<p>Standing Orders of the Board of Directors: Meetings of the Board of Directors shall be held at least eight <u>six</u> times each year at times and places that the Board of Directors may determine.</p>
49.	<p>Standing Orders of the Board of Directors: The Trust Secretary shall deliver a schedule giving notice of the date, time and venue of all meetings of the Board of Directors planned for the next calendar <u>financial</u> year, signed by the Chair or by an Officer of the Trust authorised by the Chair to sign on his/her behalf to every Director so as to be available to him at least fourteen days before the first meeting and, in any event, before 1 January <u>April</u> of the next calendar <u>financial</u> year. Lack of service of the notice on any Director shall not affect the validity of a meeting, subject to 4.3.4 below.</p>
50.	<p>Standing Orders of the Board of Directors: Arrangements for the Exercise of Functions by Delegation The Board of Directors may make arrangements for the exercise, on behalf of the Trust, of any of its functions by a committee or sub-committee, or by an Executive Director or an Officer of the Trust in each case subject to such restrictions and conditions as the Board of Directors thinks fit.</p>

	<p>Delegation to Officers - Those functions of the Trust which have not been retained as reserved by the Board of Directors or delegated to one of its Committees shall be exercised on behalf of the Board of Directors by the Chief Executive. He/she shall determine which functions he/she will perform personally and shall nominate Officers-Executive Directors to undertake remaining functions but still retain an accountability for these to the Board of Directors.</p> <p>The Board of Directors may appoint committees of the Board of Directors, consisting wholly or partly of Directors of the Trust, or wholly of persons who are not Directors of the Trust.</p> <p>A committee so appointed may appoint advisory sub-committees-groups consisting wholly or partly of members of the committee (whether or not they include Directors of the Trust) or wholly of persons who are not members of the committee (whether or not they include Directors of the Trust).</p> <p>The Board of Directors shall approve the appointments to each of the committees that it has formally constituted. Where the Board of Directors determines that persons, who are neither Directors nor Officers, shall be appointed to a committee, the terms of such appointment shall be determined by the Board of Directors.</p>
51.	<p>Resolution of Disputes with-between Board of Directors and Council of Governors</p> <p>Should a dispute arise between the Board of Directors and the Council of Governors, then the disputes resolution procedure set out below shall be followed<u>set out in Annex 7 of this constitution will be followed.</u></p>
52.	<p>A person may not become a member of the Trust, or where an existing member shall have their membership of the Trust withdrawn if:</p> <p>Under the age of sixteen;</p> <p>Within the last five years he/she has been involved in a serious incident of violence at any of the Trust's hospitals or facilities or against any of the Trust's employees, registered volunteers. They are an individual who:</p> <p>has threatened, harassed, harmed or abused staff, patients and/or visitors of the Trust; or</p> <p>has been a vexatious complainant. For the purposes of this paragraph a vexatious complainant is an individual who is found by the Trust (applying the relevant Trust policy) to have abused or used inappropriately the Trust's complaints procedure.</p>
53.	<p>Notice of a members meeting is to be given:</p> <ul style="list-style-type: none"> - by notice to all members <u>in the agreed membership communications</u>; - by notice prominently displayed at the registered office and at all of the Trust's places of business; and - by notice on the Trust's website, <p>at least 14 clear days before the date of the meeting.</p>
54.	All members' meetings other than annual meetings are called special members' meetings.
55.	The Trust may make arrangements for members to vote by post, or by using electronic communications.
56.	<p>The Chairman of the Trust or in their absence the Deputy Chair shall preside at all members meetings of the Trust. If neither the Chairman nor the Deputy Chair is present, <u>a non-executive director</u> those members of the Council of Governors who are present shall elect one of their number to be Chairman and if there is only one Governor present and willing to act they shall be Chairman. If no Governor is willing to act as Chairman or if no Governor is present within fifteen minutes after the time appointed for holding the meeting, the members present and entitled to vote shall choose one of their number to be Chairman</p>
57.	The Trust shall at all times strive to ensure that taken as a whole its actual membership is representative of those eligible for membership. To this end

	the Trust shall at all times have in place and pursue a membership strategy which shall be approved by the Council of Governors and shall be reviewed by them from time to time, and at least every two <u>three</u> years.
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Stockport NHS Foundation Trust

Meeting date	7 June 2023		Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Nominations Committee Report – Outcome of Chair’s Appraisal 2022/23					
Presented by	Dr Louise Sell, Senior Independent Director		Author		Rebecca McCarthy, Trust Secretary	

Recommendations made / Decisions requested

The Council of Governors is asked to:

- Confirm that the process undertaken for the performance assessment / appraisal for the Chair for 2022/23 was robust and;
- Support the outcome of the Chair’s appraisal process as recommended by Nominations Committee.

Executive Summary

This report outlines the process adopted for the performance assessment and appraisal of the Trust’s Chair for 2022/23. The process was reviewed and approved by the Council of Governors at its meeting on 22nd February 2023.

Correspondence was received in April 2023 from Richard Barker CBE, Regional Director, and in May 2023 from Sir David Behan CBE, Chair, People and Remuneration Committee, NHS England to inform the appraisal process.

A multi-source peer assessment process was subsequently initiated, culminating in a formal one to one appraisal in May 2023 led by the Senior Independent Director. The outcome of the appraisal was considered by the Nominations Committee on 30 May 2023, and this report summarises the outcome to the Council of Governors.

1. Summary

- 1.1 This report outlines the process adopted for the performance assessment and appraisal of the Trust's Chair for 2022/23. The process was reviewed and approved by the Council of Governors at its meeting on 22nd February 2023.
- 1.2 A letter was received by the Senior Independent Director from Richard Barker CBE, Regional Director, on 20th April 2023 in which he explained that he would only become directly involved in Chair's Appraisals by exception. However, the letter set out areas of focus which he expected all appraisals to cover. At a high level, these were: Working in Partnership, Oversight of Performance, Quality and Finance, and Board Ways of Working.
- 1.3 A letter was received from Sir David Behan CBE, Chair, People and Remuneration Committee, NHS England on 16th May 2023 in which he encouraged Chairs of Provider Trusts to share a copy of the completed appraisal with the Non-executive Talent and Appointments team at NHSE (noting this is a requirement for Trust chairs but that Foundation Trust chairs are not obliged so to do). He highlighted the need for inclusion of the Regional Director or ICB Chair in the appraisal process. A revised template was shared which includes sign off requirements for the Regional Director and NHSE CEO or COO. The completed appraisal will be shared as requested.
- 1.4 A multi-source peer assessment process was initiated in March 2023, culminating in a formal one to one appraisal in May 2023.

2. Process Outline

- 2.1 The process adopted for the performance assessment and appraisal of the Trust's Chair comprised the following stages:
 - Pre-meeting to agree appropriate sources of stakeholder feedback, with specific consideration given to ensuring stakeholders within the locality and Greater Manchester Integrated Care System (ICS) would be in a position to provide meaningful feedback.
 - Multi-source stakeholder assessment including:
 - Mrs. Sue Alting, Lead Governor
 - Executive Directors
 - Non-Executive Directors
 - Ms. Maria Kildunne, Chair of Healthwatch, Stockport
 - Cllr Keith Holloway, Cabinet Member for Health and Social Care, Stockport MBC
 - Ms. Evelyn Asante Mensah, Chair of Pennine Care NHS Foundation Trust
 - Mrs. Jane McCall, Chair of Tameside and Glossop Integrated Care NHS Foundation Trust
 - Mr. Mark Jones, Chair of Wrightington Wigan and Leigh NHS Foundation Trust
 - Mr. Andrew Corbett Nolan Director, Good Governance Institute
 - Verbal feedback from Non-Executive Directors and the Chief Executive

- Verbal feedback from the Lead Governor following the opportunity for feedback from all Governors
- Analysis of summarised responses and comments
- One to one performance appraisal discussion.

3. Nominations Committee

At its meeting on 30th May 2023, the Nominations Committee considered the outcome of the above process. This included themes regarding the Chair's strengths and areas in which there maybe opportunities for increasing impact and effectiveness. The Nominations Committee received the objectives for the year ahead.

4. Overall Outcome and Senior Independent Director (SID) Summary

- 4.1 This has been a thorough appraisal process with feedback from Executive Directors, Non-Executive Directors, External Partners and the Lead Governor. It has been achieved through an online assessment questionnaire and verbal feedback (Lead Governor, Non-Executive Directors, External Partners, Chief Executive).
- 4.2 The questions asked in the online stakeholder assessment reflected the NHS Provider Chair competencies framework which has five domains: Strategic, Partnerships, People, Professional Acumen and Outcomes Focus. All completed responses indicated agreement or strong agreement that the Chair demonstrates the competencies required. (In a small percentage of cases the respondent was unable to assess the specific competency.)
- 4.3 The appraisal discussion covered the Chair's self-assessment, the feedback from the online assessment questionnaire including free text comments, the verbal feedback and the requirements of the regional and national letters. It also covered the Chair's reflection on this information.
- 4.4 The outcome the appraisal indicates that Professor Warne has consolidated his performance as an effective Chair of Stockport NHSFT. He is regarded by internal and external colleagues as having all the required competencies to be a Chair. He is identified as performing particularly strongly in the domains of People and Partnerships. The multisource feedback is in line with Professor Warne's self-assessment and his ongoing enjoyment of the role. He was found to perform well in chairing both the Board and the Council of Governors, with an inclusive style which ensures everyone has a voice. He demonstrably remains committed to good outcomes for patients and to staff wellbeing. He demonstrates that he values being visible within the organisation. He has a good relationship with the Lead Governor and with the Chief Executive. His leadership of the Board includes an ability to remain positive within complex and challenging environments and he is aware of the importance of this being balanced with an open culture to address problems.
- 4.5 A consistent theme was Professor Warne's role in the external systems – Stockport, Greater Manchester, and the North-West. Colleagues within the Trust noted that he

consistently reports back his activity in these arenas. This was triangulated with feedback from external colleagues who observed him in the Greater Manchester setting and described positive performance. External feedback also praised his contribution in Stockport. However Professor Warne described a desire to go further with developing external relationships in Stockport and identified this as an area for increased focus in the year ahead. He has been appointed as a local authority councillor in Blackpool and intends to use the insights from this role to further strengthen his ability to be effective in Stockport.

- 4.6 Professor Warne reflected that, in addition to the planned Board development programme, the Board would benefit from some delegation from him to other NEDs, for example the ability to seek triangulated assurance outside of formal Board reporting.
- 4.7 Following discussion, the Chair and SID agreed areas for development and objectives for the year ahead. The objectives cover the continued development of open and constructive communication, further development of external relationships and strengthened triangulated assurance of Performance, Quality and Finance by the Board.
- 4.8 The SID also confirmed the Fit and Proper Person requirements for the Chair.

5. Recommendation

The Council of Governors is asked to:

- Approve the recommendation from the Nominations Committee to confirm the robustness of the process adopted for the 2022/23 performance assessment / appraisal of the Trust's Chair and support the outcome.

Stockport NHS Foundation Trust

Meeting date	7 th June 2023	x	Public		Confidential	Agenda item
Meeting	Council of Governors					
Title	Nominations Committee Report – Outcome of Non-Executive Directors Appraisals 2022-23					
Presented by	Professor Tony Warne, Chair		Author		Rebecca McCarthy, Trust Secretary	

Recommendations made / Decisions requested

The Council of Governors is asked to:

- **Confirm that the process undertaken for the performance appraisal of the Non-Executive Directors for 2022/23 was robust and;**
- **Support the outcome of the Non-Executive Director appraisal process as recommended by Nominations Committee.**

Executive Summary

This report outlines the process adopted for the performance appraisal of the Trust's Non-Executive Directors during 2022/23. The process, including the proposed timescale, was approved by the Council of Governors at its meeting on 22nd February 2023 and was initiated in May 2023.

The Chair led one-to-one appraisals with all Non-Executive Directors during May 2023, focusing on performance and future development needs. The outcome from the one-to-one appraisal discussions was considered by the Nominations Committee on 30th June 2023. This report confirms the collective outcome of the appraisals and that all Non-Executive Directors continue to make an effective contribution to the work of the Board.

1. Introduction

- 1.1 This report outlines the process adopted for the performance appraisal of the Trust's Non-Executive Directors during 2022/23. The process, including the proposed timescale, was approved by the Council of Governors at its meeting on 22nd February 2023 and was initiated in May 2023.
- 1.2 The Chair led one to one appraisal with each Non-Executive Director during May 2023, focusing on performance and future development needs. The outcome from the appraisal discussions was considered by the Nominations Committee on 30th June 2023 and this report summarises the outcome to the Council of Governors.

2. Process Outline

- 2.1 The process adopted comprised three essential elements:
 - A self-assessment of performance for 2022/23 against the core competences of the role
 - A one to one discussion of the self-assessment, leading to a summary of overall performance and a note of professional and personal development activities
 - A set of agreed objectives and a personal development plan for the coming year.

3. Summary Performance Outcome

- 3.1 The Nominations Committee reviewed the outcome of the appraisal process that had been conducted for each Non-Executive Director and comprehensively considered the individual appraisal summaries.
- 3.2 The collective outcome of the Non-Executive Director appraisals confirms that all Non-Executive Directors continue to make an effective contribution to the work of the Board. They have participated fully in the Board development programme as part of our Well Led approach. This has resulted in healthy and appropriate relationships with the Executive Directors which has facilitated an approach of effective challenge being possible.

4. Recommendation

The Council of Governors is asked to:

- Confirm the robustness of the process adopted for the 2022/23 performance assessment / appraisal of the Non-Executive Directors and support the outcome, as recommended by the Nominations Committee.