

Minutes of the Council of Governors Meeting held on Wednesday 25th May 2022,

Hybrid – Comet Lecture Hall and MS Team, 6.00pm – 8.00pm

Present:

Public Governors:

Pam Brown, Luton	Linda Grant, Central Bedfordshire
Judi Kingham, Luton	Pat Quartermaine, Central Bedfordshire
Sean Driscoll, Luton	Jacque Farhoud, Bedford Borough
Theresa Driscoll, Luton	Teena Ferguson, Bedford Borough
Wendy Cook, Luton	Yvette King, Bedford Borough
Malcolm Lea, Luton	Chris Williams, Bedford Borough
Helen Lucas, Hertfordshire	Robert Oakley, Bedford Borough
Dilan Joshi, Hertfordshire	Debbie Gardiner, Central Bedfordshire
Jenny Gallucci, Central Bedfordshire	Michael Carter, Central Bedfordshire

Staff Governors:

Janet Graham, Volunteers
Noreen Byrne, Volunteers
Belinda Chik, Nursing, HCA & Midwifery
Malik Farooq, Administration and Clerical
Terence Haynes-Smith, Professional and Technical

Appointed Governors:

Board of Directors:

Simon Linnett, Chair	David Carter, Chief Executive
Steve Hone, NED	Liz Lees, Chief Nurse
Ian Mackie, NED	Paul Tisi, Medical Director
Gordon Johns, NED	Matt Gibbons, Director of Finance
Mark Prior, NED	Catherine Thorne, Director of Quality & Safety
Dr Annet Gamell, NED	Angela Doak, Director of HR
Simon Barton, NED	Fiona MacDonald, Director of Culture
Tansi Harper, NED	Gill Lungley, Digital Director
	Dean Goodrum, Director of Estates

In attendance:

Donna Burnett, Trust Board Secretary (minutes)
Victoria Parsons, Associate Director of Corporate Governance
Anne Thevarajan, FT Membership
Paul Saunders, Director at Grant Thornton UK LLP.

1. Chair's Welcome and Note of Apologies

The Chair welcomed governors to the first hybrid meeting of the Council of Governors meeting.

Apologies were received from Javed Hussain, Sunny Patel, Dimpu Bhagawati, Louise Grant, Matthew Borg, Cathy Jones and Marie-France Capon.

2. Any Urgent Items of Business and Declarations of Interest

There were no declarations of interest or urgent items of business.

3. Minutes of the previous meeting held on 23rd February 2022:

The minutes of the previous meeting held on 23rd February 2022 were APPROVED as a true and accurate record.

4. Action Log

Governors noted the action log and the progress made on many of the actions.

Action 5: To review security plans for each site: M Gibbons reported there had been a number of contractual challenges around the security contract and had hence extended the existing contract to September 2022 with an award of the new contract from October 2022 once the tendering process had been worked through.

5. Chair's Report

The Chair provided an update to governors on key areas of note from the Board which included:

- There had been a very successful medical lecture in the Rufus Centre with around 120 people in attendance, and it had been encouraging to meet in person again;
- A Board Away Day had taken place and there had been positive conversations;
- Staff engagement 'Tent Events' had been planned across the two hospital sites for early summer; all this marked a trend towards physical meetings;
- The Integrated Care Services (ICS) was moving forward with a July 1st date to consider the decision making process for the integrated care partnerships. The CEO had recently been involved in the interview processes for the new executive team of the Integrated Care Board (ICB), sub-committee of the ICS.

6. Chief Executive's Report

The Chief Executive highlighted a number of key areas of activity for governors to note which included:

- As a board member of the Integrated Care Board (ICB), chaired by the Non-Executive of the Bedfordshire Care Alliance (BCA) the key purpose was to focus on the transformation of services across the region. Increasingly ICB board members are being encouraged to engage in partnerships, which although taking up a great deal of time and support, provided opportunities for the Trust;

- T Harper and H Lucas had formed part of a NED group working with other partners to plan a number of development events around the ICS structure, and at the next meeting in early June there would be plans to facilitate virtual workshops to keep governors in touch with regional developments.

L Grant drew attention to a co-production group formed of GP surgeries, care homes and other stakeholders who were looking for volunteers, as training was being set up on understanding the ICS and proposed that governors be involved. S Linnett replied that the Trust was being encouraged in many different directions through cooperative environments to deliver healthcare and that this appeared to be one of those avenues.

- D Carter stated that although the Trust was moving on from the Covid impact, that the emergency pressures still remained significant. Key was to gain traction and make progress but staff absence was still having a significant impact on performance;
- The staff survey had been released and this would give a temperature check on how staff are feeling, which would help the Trust understand what support to provide;

7. Covid-19 Update/ Recovery Plans

P Tisi reported that the regional number of Covid patients had decreased but had now reached a plateau, and in terms of inpatient numbers there were none in urgent care and reduced numbers across both hospital sites.

There had been no confirmed cases of monkey pox at the Trust, but local guidelines had been issued for staff around the actions to be taken in the case that any patients were admitted.

Elective recovery was expected to improve over the next months but staff sickness had hampered performance.

8. Performance Reports:

Quality

L Lees reported that the significant pressures the organisation was under including in emergency care, had resulted in a number of escalation areas being opened. Staff absenteeism remained at high levels which was causing significant challenges. Despite the pressures, teams had worked really well and managed to maintain low harm.

C Thorne stated that the reporting of incidents remained strong which was important for maintaining a robust safety culture; with additional support being provided at the Bedford site to encourage a culture of greater incident reporting. A review of all maternity incidents had already been undertaken and learning lessons and actions shared with teams.

P Tisi reported the mortality rate was tracking higher but this would balance out and reduce as it was still picking up data from the pandemic and usually ran five months in arrears. The SCHIMI index was higher than expected, based on observed mortality and flagged up the importance of getting the coding information right. The Quality Committee continues to maintain oversight of mortality.

L Lees reported that ambulance handovers continued to remain high and a number of additional cubicles had been opened to manage increased patient numbers. N Byrne queried if

the Trust was on par with other organisations. L Lees replied that no Trust was meeting targets and that referrals continued to be much higher, and combined with staff absences, resulted in this being one of the most difficult periods.

J Farhoud queried whether the level of cancer referrals were remaining high or worse due to the significant time wait; and how the Trust was trying to improve the situation from GP referral to appointment. D Carter replied that the higher level of cancer referrals was due to the pandemic and also a greater number of face to face appointments in primary care; and that the Trust was prioritising the position but faced challenges due to staff absences.

D Gardiner pointed out that the delay would result in cancer patients being worse and what plans for treatment did the Trust have. L Lees replied that not all the referrals were cancer and that although some were presenting at a later stage, it remained a key priority and the Trust was doing everything it could.

C Williams drew attention to the 97% maternity feedback rate which was an excellent achievement.

Finance:

M Gibbons reported that the Trust had delivered a surplus of £1.5m despite an overspend in pay, mitigated by the initial settlement for Covid funding and delivery against the elective fund.

The Trust had a £67m capital spend which was positive and it was hoped to achieve that again in the next financial year.

The budget for the next financial year 2022-23 settlement remained challenging and the Trust had submitted a deficit plan in line with all other Trusts. The Trust was also working with the ICS and how that funding would be shared amongst partners. The next submission would be on 20 June when a break even plan could be considered. J Farhoud asked if the Trust had to compete for funding. M Gibbons replied that the funding was issued to the ICS and there would be discussions and negotiations with all partners around that allocation of funding.

Workforce:

A Doak reported that all staff absences were being monitored and that there had been a number of staff who had retired during the pandemic all of which contributed to the staffing challenges.

Mandatory training still remained a challenge and due to the operational pressures it had become clear that new innovative ways to deliver training would need to be looked at. A task and finish group had been established to look at improving compliance rates.

A Doak was pleased to report the fully funded permanent role of a clinical psychologist to support staff. The staff rest areas had been furnished and the charity had contributed funds for equipment. A creative art work event had been set up for staff to attend; and the tent event would run across two weeks in early July.

D Gardiner expressed concern that with staff retiring the public perception may be that less experienced staff were now in place. S Linnett agreed that it was not easy to recruit people; and L Grant pointed out that many staff return. B Chik was pleased that many staff are now allowed to come back for lesser hours as this had not been the case previously.

D Gardiner drew attention to the Restart scheme and how this could support with vacancies. A Doak agreed to look into this with D Gardiner.

T Ferguson queried whether it would be possible to have the workforce report by speciality to provide a 'heat map' of staff. A Doak replied that this would be very high level but would take this away to consider.

10. Lead Governor Report

H Lucas informed governors that Steve Morgan, staff governor, would be retiring and thanked him for his contribution during his time as a governor.

Following attendance at the NHS Providers Conference, H Lucas reported that NHS Providers they were now looking at updating the Code of Governance, last issued in 2014, with the final version to be published in July 2022.

H Lucas had attended a regional lead governors meeting and explained that the Trust were at the forefront in terms of membership and in engagement between NEDs and governors through the NED Led Seminars.

11 Board Secretary Report

The Board Secretary Report had been taken as read.

D Burnett reported that all governor groups were now active and taking place.

12. Report from the Membership and Communications Group

P Brown stated that a lot of activity had been planned for the spring and summer and the new script the Trust had provided would support at forthcoming events.

There had been a strong membership recruitment drive in particular in the Bedford region with 211 members recruited.

A successful medical lecture had been held on Diabetes and there was a further event planned for the autumn on ophthalmology. The Annual Members meeting was now planned for 7th September and would take place at Kings House in Bedford.

The Terms of Reference were presented for approval.

DECISION: The Council of Governors APPROVED the Terms of Reference of the Membership and Communications Group.

13. Report from the Constitutional Working Group

H Lucas reported that the Constitutional Working Group had recommended two amendments to the Constitution: firstly around the eligibility to become a staff governor in line with the Trust's disciplinary policy; and a change to the Code of Conduct flow chart to reflect an improved escalation process of any issues.

H Lucas asked the Council of Governors if they would approve the recommendations of the Constitutional Working Group as outlined in the issued report.

DECISION: The Council of Governors APPROVED the changes to the Constitution as recommended by the CWG around the eligibility to become a governor and the additional step in the flow chart.

14. Report from the CoG Remuneration and Nomination Committee

Y King asked for the Council of Governors approval of the terms of reference which had been presented with the key changes being under section 6 on membership.

DECISION: The Council of Governors APPROVED the Terms of Reference of the CoG Remuneration and Nomination Committee.

Y King informed governors that the committee had been involved in the Chair recruitment process but on this occasion had made the decision not to appoint. Despite strong CVs the candidates had not performed well at interview. M Farooq agreed that candidates had been unable to answer correctly or focus clearly on the questions. S Linnett agreed that it was important to appoint the right person for the role.

Y King thanked all those governors who had spent many hours on the appointment process and those involved in the stakeholder groups. Y King acknowledged the helpful advice provided by M Lamb and R Makarem during the interview process.

A meeting had been planned for the next week and a new timetable for the Chair recruitment would be discussed to enable the process to move forward.

15. Governor Working Group Reports

The Governor working group reports were received and noted.

L Grant expressed concern that the wheelchair cleaning was still not being addressed correctly and a way forward would need to be found; and that the Bedford site was very much in need of more wheelchairs. D Goodrum replied that he would follow this up with the portering team around wheelchair cleaning and agreed that at Bedford space would be found to enable wheelchairs to be established in spaces.

16 Any Other Business

16.1 Governors dialling in virtually pointed out that it was very difficult to hear those in the Comet Lecture Hall whose sound was muffled and it was recognised that more work would need to be undertaken on microphones. G Lungley assured governors that she would investigate how to improve the sound system in the Comet Lecture Hall.

16.2 J Kingham praised P Brown who had been presented with an award at a ceremony for her amazing work in setting up a patient transport service from Leighton Buzzard to the L&D hospital. Pam had worked tirelessly behind the scenes to organise a system of volunteers to run the service for the benefit of patients and the Bedfordshire Hospital NHS FT.

17. Time and Date of Next Meeting:

Council of Governors Meeting: Wednesday 24th August 2022

Close of Meeting: 8.00pm