

Agenda

Council of Governors (Public Meeting)

3 September 2019
Malton Rugby Club at 1.30pm



COUNCIL OF GOVERNORS MEETING

The programme for the next meeting of the Council of Governors will take place:

On: 3 September 2019

In: Malton Rugby Club, Old Malton Road, Malton, YO17 7EY

TIME	MEETING	LOCATION	ATTENDEES
10.00am – 11.00am	Nomination & Remuneration Committee	Malton Rugby Club	Nomination & Remuneration Committee Members Only
11.00am – 12.30pm	Private Council of Governors	Malton Rugby Club	Council of Governors
1.00pm – 1.30pm	Governors meet Public	Malton Rugby Club	Council of Governors
1.30pm – 3.00pm	Public Council of Governors	Malton Rugby Club	Council of Governors



Council of Governors (Public) Agenda

SUBJECT	LEAD	PAPER	PAGE	TIME
<p>1. Apologies for absence and quorum</p> <p>To receive any apologies for absence.</p>	Chair	Verbal		1.30 – 1.35
<p>2. Declaration of Interests</p> <p>To receive any changes to the register of Directors' declarations of interest, pursuant to section 6 of Standing Orders.</p>	Chair	A	07	
<p>3. Minutes of the meeting held on 12 June 2019</p> <p>To receive and approve the minutes from the meeting held on 12 June 2019</p>	Chair	B	11	
<p>4. Matters arising from the minutes and any outstanding actions</p> <p>To discuss any matters or actions arising from the minutes.</p>	Chair	C	19	
<p>5. Update from the Private Meeting held earlier</p> <p>To receive an update from the Chair on the topics and decisions of the business discussed in the private meeting held prior to the meeting in public.</p>	Chair	Verbal		1.35 – 1.40

Strategic Goal: To deliver safe and high quality patient care



SUBJECT	LEAD	PAPER	PAGE	TIME
<p>6. Governors Reports</p> <p>To receive the reports from governors on their activities from:</p> <ul style="list-style-type: none"> • Lead Governor incl. PESG • Transport Group • Fairness Forum • Out of Hospital Care • Charity Fundraising Committee 	Governors	D	21	1.40 – 1.50
<p>7. Committee Updates</p> <p>7.1 Quality Committee 7.2 Resources Committee</p>	Committee Chairs	Verbal		1.50 – 2.15
<p>8 Audit Committee Annual Report</p> <p>To receive a report from the Chair</p>	Committee Chair	E	29	2.15 – 2.25
<p>9 Themes from Patient Safety Walkrounds</p> <p>To discuss themes highlighted from the recent Patient Safety Walkrounds</p>	Clinical Governance Lead	F	39	2.25 – 2.35
<p>10 Questions received in advance from the public.</p> <ul style="list-style-type: none"> • Questions • Questions Protocol 	Chair	G	41	2.35 – 2.50
Strategic Goal: To ensure financial stability				
Strategic Goal: To support an engaged, healthy and resilient workforce				
<p>11 Membership Development Group Update</p> <p>To receive an update from the Membership Development Group</p>	FT Secretary	H	43	2.50– 2.55



SUBJECT	LEAD	PAPER	PAGE	TIME
Governance				
12 Governor Elections	FT Secretary	↓	45	2.55 – 3.00
To receive an update paper on the election process for Governors				
13 Any other business	Chair	Verbal		3.00
To consider any other items of business.				
<ul style="list-style-type: none"> • Reflections on the meeting • Open Day-AMM-AGM 				
14 Time and Date of next meeting				
The next Council of Governors meeting will be held on 11 December 2019 at Malton Rugby Club, Old Malton Road, Malton, YO17 7EY				



Blank page

Register of Governors' interests
September 2019

Additions: None

A

Governor	Relevant and material interests					
	Directorships including non-executive directorships held in private companies or PLCs (with the exception of those of dormant companies).	Ownership part-ownership or directorship of private companies likely or possibly seeking to do business with the NHS.	Majority or controlling share holdings in organisations likely or possibly seeking to do business with the NHS.	A position of authority in a charity or voluntary organisation in the field of health and social care.	Any connection with a voluntary or other organisation contracting for NHS services or commissioning NHS services	Any connection with an organisation, entity or company considering entering into or having entered into a financial arrangement with the NHS foundation trust including but not limited to, lenders or banks
Jeanette Anness (Public: Ryedale and East Yorkshire)	Nil	Nil	Nil	Nil	Member, Derwent Practice Representative Grp Member, NY Health watch Member, SRCCG Patient Representative Grp	Nil
Andrew Bennett (Appointed: YTHFM LLP)	Nil	Nil	Nil	Nil	Head of Capital Projects for YTHFM LLP.	Head of Capital Projects for YTHFM LLP.
Elizabeth Black (Public: Scarborough)						
Andrew Butler (Public: Ryedale and East Yorkshire)	Nil	Nil	Nil	Nil	Nil	Nil
Roland Chilvers (Public: Selby)	Nil	Nil	Nil	Trustee — Hemingbrough Institute and Playing Fields Association	Councillor — Hemingbrough Parish Council	Councillor — Hemingbrough Parish Council
Dawn Clements (Appointed: Hospices)	Nil	Nil	Nil	Director of Income Generation —St Leonards Hospice York	Director of Income Generation —St Leonards Hospice York	Nil
Helen Fields (Public York)	Nil	Nil	Nil	Nil	Nil	Nil

Governor	Relevant and material interests					
	Directorships including non-executive directorships held in private companies or PLCs (with the exception of those of dormant companies).	Ownership part-ownership or directorship of private companies business or consultancies likely or possibly seeking to do business with the NHS.	Majority or controlling share holdings in organisations likely or possibly seeking to do business with the NHS.	A position of authority in a charity or voluntary organisation in the field of health and social care.	Any connection with a voluntary or other organisation contracting for NHS services or commissioning NHS services	Any connection with an organisation, entity or company considering entering into or having entered into a financial arrangement with the NHS foundation trust including but not limited to, lenders or banks
Stephen Hinchliffe (Public: Whitby)	Nil	Nil	Nil	Nil	Nil	Nil
Sharon Hurst (Staff: Community Staff)	Nil	Nil	Nil	Nil	Nil	Nil
Margaret Jackson (Public: York)	Nil	Nil	Nil	Nil	Chair of VIP Steering Group at York University.	Nil
Mick Lee Staff York	Nil	Nil	Nil	Nil	Nil	Nil
Sally Light (Public: York)	CEO Motor Neurone Disease Assoc. (reg. Charity) and MND Assoc. Sales Company Director	MND Assoc. contracts with NHS Care & Research Assocs. To fund MND roles & private research grants	Nil	CEO Motor Neurone Disease Assoc. Vice Chair & Trustee —The Neurological Alliance	Nil	MND Assoc. contracts with NHS Care & Research Assocs. To fund MND roles & private research grants
Sheila Miller (Public: Ryedale and East Yorkshire)	Nil	Nil	Nil	Member —Derwent and SRCCG Patients Groups Member —Health Watch North Yorkshire (non-voting)	Nil	Nil
Clive Neale (Public: Bridlington)	Nil	Nil	Nil	Member of Healthwatch East Riding.	Nil	Nil
Helen Noble (Staff: Scarborough)	Nil	Nil	Nil	Nil	Nil	Nil

Governor	Relevant and material interests					
	Directorships including non-executive directorships held in private companies or PLCs (with the exception of those of dormant companies).	Ownership part-ownership or directorship of private companies business or consultancies likely or possibly seeking to do business with the NHS.	Majority or controlling share holdings in organisations likely or possibly seeking to do business with the NHS.	A position of authority in a charity or voluntary organisation in the field of health and social care.	Any connection with a voluntary or other organisation contracting for NHS services or commissioning NHS services	Any connection with an organisation, entity or company considering entering into or having entered into a financial arrangement with the NHS foundation trust including but not limited to, lenders or banks
Cllr Chris Pearson (North Yorkshire County Council)	Nil	Nil	Nil	Nil	Councillor —North Yorkshire County Council	Councillor —North Yorkshire County Council
Karen Porter (Project Choice)	Nil	Nil	Nil	Nil	Nil	Nil
Gerry Richardson (University of York)	Nil	Nil	Nil	Nil	Nil	Employed by Uni. of York—Centre for Health Economics
Michael Reakes (Public: City of York)	Nil	Nil	Nil	Nil	Nil	Nil
Jill Sykes (Staff: York)	Nil	Nil	Nil	Nil	Nil	Nil
Richard Thompson (Public::Scarborough)	Nil	Nil	Nil	Nil	Local Councillor - Newby/Scalby Parish Council.	Nil
Catherine Thompson (Public: Hambleton)	Nil	Nil	Nil	Nil	Nil	Employed by West Yorkshire & Harrogate Health Partnership
Robert Wright (Public: City of York)	Nil	Nil	Nil	Volunteer for York Healthwatch	Employee—NHS Leadership Academy	Nil

Council of Governors (Public) Minutes – 12 June 2019

Chair:

Ms Susan Symington

Public Governors:

Mrs Jeanette Anness, Ryedale and East Yorkshire
Mr Andrew Butler, Ryedale & East Yorkshire
Mrs Helen Fields, City of York
Mrs Margaret Jackson, City of York
Ms Sally Light, City of York
Mrs Sheila Miller, Ryedale & East Yorkshire
Mr Michael Reakes, City of York
Mrs Liz Black, Public Governor Scarborough
Mr Clive Neale, Public Governor Bridlington
Mr Richard Thompson, Public Governor Scarborough

Appointed Governors

Ms Dawn Clements, Hospices

Staff Governors

Dr Andrew Bennett, Scarborough/Bridlington
Mrs Helen Noble, Scarborough/Bridlington
Mrs Sharon Hurst, Community
Mr Mick Lee, York
Mrs Jill Sykes, York

Attendance

Mrs Becky Hoskins, Deputy Director of Patient Safety, Medical Governance
Mr Steve Reed, Head of Strategy for Out of Hospital Services
Ms Catherine Rhodes, Lead for Patient Experience
Mr David Thomas, Care Group Manager, A&E and Elderly Medicine, SGH
Mr Neil Wilson, Head of Partnerships & Alliances
Mrs Jenny McAleese, NED
Ms Jennie Adams, NED
Ms Lorraine Boyd, NED
Ms Lynne Mellor, NED
Mrs Lucy Brown, Interim Director of Communications
Mrs Lynda Provins, Foundation Trust Secretary

Mrs Tracy Astley, Assistant to Foundation Trust Secretary

Observers

1 member of the public

Apologies for Absence:

Cllr Chris Pearson, NYCC
Mrs Karen Porter, Project Choice
Mr Gerry Richardson, University of York
Mrs Catherine Thompson, Hambleton
Mr Robert Wright, York
Mr Roland Chilvers, Public Governor Selby
Mr Stephen Hinchliffe, Whitby
Mr Mike Keaney, NED

19/14 Chair's Introduction and Welcome

Ms Symington welcomed everybody and declared the meeting quorate. She introduced Mr Reed, Mrs Hoskins, Ms Rhodes, Mr Thomas and Mr Wilson to the Committee. She gave apologies on behalf of the Executive Team as they had a prior engagement with NHSI.

19/15 Declarations of Interest

There were no updates to the declarations of interest.

19/16 Minutes of the meeting held on the 13 March 2019

The minutes of the meeting held on the 13 March 2019 were agreed as a correct record subject to the following amendments: -

- Add apologies for Mrs McAleese.
- Add action "Simon Morrill to attend September Council of Governors meeting".
- Page13 – 19/06 replace medical with nursing.

19/17 Matters arising from the minutes

The Committee asked for an update on the Oncology situation. Ms Symington replied that Mrs Scott, Chief Operating Officer, was leading on this work. Mr Wilson added that discussions have been taking place over the past 3 months with 3 other Trusts (Harrogate, Leeds, Hull) to collectively provide a breast oncology service across the region. It was a temporary solution. It will feed into the overall service work plan that has been developed across all Trusts.

Action: Update on Oncology situation required at September meeting.

Action Log

There were no matters arising from the action log.

19/18 Update from the Private Meeting held earlier

Ms Symington updated the committee on the topics discussed in the private meeting held earlier. These included: -

- The Chair's quarterly report to the Council of Governors.
- NED feedback on the first year at York Trust from Ms Mellor and Dr Boyd.
- The recommendation that Mr Keaney and Mrs Adams serve another year as Non-executive Directors.
- Interim Workforce Plans produced by NHSI.

19/19 Governors Reports

- Lead Governor Report - Mrs Jackson gave an overview of her report. She explained that she had attended the Patient Experience Steering Group and although it was not quorate due to operational pressures, she had some useful discussions with colleagues.
- Transport Group - Mrs Miller commended the team on transport who had promoted the use of pool cars and hire cars which had saved money for the Trust. She also mentioned the start of the Park & Ride from Rawcliffe to the Hospital and how successful the first week had been.
- Fairness Forum - Mrs Anness commented how impressed she was with the work of Stephen Clark on the LGBT project.
- Out of Hospital Care - Mr Reed referred to the minutes from the recent meeting and informed that he will ask a representative from Humber City Health Care to attend the next meeting to report on their work. The Committee noted the minutes and no further comments were made.
- Charity Fundraising Committee - AB reported that he was impressed with the caring side and in awe of the things members of staff and supporters do to raise funds. It was a genuinely wonderful committee to be on. Ms Symington will be joining them for the next meeting.

19/20 Chief Executive's Update

Ms Symington stated that she would give an update on Mr Proctor's behalf and referred to the Chief Executive's report.

- System finance – this was an extensive piece of work focused on how the Trust will account for its money as part of a system with Vale of York CCG and Scarborough & Ryedale CCG.
- Moving to a care group structure – Ms Symington gave a synopsis of the historical directorate structure and how the Trust will be moving towards having 6 care groups and referred the Committee to page 40 of the report for the configuration of each. A thorough recruitment process had taken place for the posts of Care Group Directors

and Managers. Each care group will be clinically led and will be aligned with a Head of Nursing. The governance was currently being worked through. The care groups will go live at the beginning of 1 August to coincide with the arrival of the new Chief Executive, Simon Morritt.

- Scarborough Acute Service Review – Ms Symington advised that the second stage was now underway and will be completed by end of July. The North West McKinsey team were working closely with the Trust. They have an engaging and challenging but inclusive style and have been welcomed by the clinical teams.

Mr Butler asked if there were a range of models the Trust could put out to consultation. Mr Wilson replied that there should not be too much change to the delivery of services. They were working through the impact of some of the models and once that was completed there may be some consultation in one or two areas of service. Mrs Brown added that this was dependent on how soon care groups produced their models.

Mrs Miller asked if there were any major changes planned at Scarborough Hospital and added that she would challenge the Trust if it did not consult on them. Mrs Brown replied that consultation depended on the level of change.

- CQC Inspection – Ms Symington advised that the CQC Well Led Review had been arranged for the 16-18 July. Usually three weeks prior to this the CQC visit and therefore it was anticipated that the CQC's visit will be imminent.
- Good news stories – Ms Symington referred to page 42 of the report giving an overview of the number of award ceremonies where staff have been recognised. She added that the Executive Directors in the Trust work very hard to celebrate staff and their achievements.

19/21 Patient Safety Walkrounds

Mrs Hoskins gave a presentation on the subject which included slides on: -

- Patient Safety Strategy and driving principles
- Terms of Engagement
- Questions for Staff
- Questions for Patients and their families
- What happens to their feedback

The aim was to make the visits supportive and not an inspection. Mrs Hoskins spoke about the set of questions she would like the Governors to use on their walkrounds. The Governors expressed their opinions of the recent walkrounds that took place across the sites and all felt that these visits were invaluable to triangulate with what was being spoken about at Board.

Mrs Jackson asked if a report could be produced on themes that were coming through. Mrs Hoskins replied that she would do this.

Ms Symington thanked Mrs Hoskins for attending the meeting.

Action: Mrs Hoskins to produce a report on themes that come through on Patient Safety Walkrounds for next meeting.

19/22 Volunteering

Mrs Rhodes advised that there were almost 300 volunteers. They had just ended another cohort of recruitment and it was expected that another 25 volunteers will join the Trust in the next couple of months. Regarding Helpforce, Mrs Rhodes explained that it was an organisation set up by Sir Tom Hughes-Hallett which encouraged volunteering within the NHS.

Ms Symington enquired about the type of things people volunteer for. Mrs Rhodes replied that currently they were looking for dining companions and volunteers in A&E, to keep patients company, keep them calm, and help in little ways. She added that if a department came to them to ask for help with a service then it would be assessed and volunteers would be recruited for specific roles.

Mrs Anness asked if training was provided. Mrs Rhodes outlined the training given by the Dietetics Team to dining companions and how progress could be made through the training levels to enable volunteers to feed the patients.

Ms Symington thanked Mrs Rhodes for attending the meeting.

19/23 Questions received in advance from the public

Two questions were received from the public. See Appendix A and Appendix B.

Ms Symington explained that she was going to read the questions and answers verbatim. After the reading Ms Symington stated that there was an element about this which was really a complaint and not suitable for the Council of Governors but because it was fielded to the Council, she felt it appropriate to share it with them. There will be a formal response to each person from the Trust.

Stroke Pathway

Mr Thomas gave an overview of the Stroke Pathway at Scarborough Hospital. He emphasised it was an efficient service, was constantly tested and had been given an 'A' rating.

Mrs McAleese referred to the letter and asked whether the patient had seen the Hyper-Acute Stroke Nurse as this would give the letter writer some form of assurance.

Mr Reakes queried the delay and questioned whether the department had enough resources to carry out such assessments in a timely manner. Mr Thomas replied that they needed a second CT scanner, and that was in the plan. They had the capacity to provide an out of hours and weekend service. They did not have enough radiologists to report on the scans at Scarborough but they had an arrangement in place with the York Hospital radiologists. The recruitment of middle grade doctors and consultants coupled with the increasing demand for services at Scarborough was proving a real challenge.

Children's Behavioural Service

Mr Wilson explained that late last year the Trust informed the CCG that they were no longer able to provide the service and gave six months' notice to enable the CCG to identify alternative arrangements. Mrs Brown added that the Trust had stopped being the provider of the service at the end of May 2019. However, the CCG had not finalised its plans at that point despite identifying a provider and therefore the Trust agreed to continue a service until the CCG and the new provider agreed the terms.

Mrs McAleese expressed concern that this was a high risk patient and from the letter it seemed the parent had been told from staff at the hospital that there was no longer a service available when she phoned up to make an appointment. Mrs Brown reiterated that the service had not changed and patients who were registered would still be seen. Mr Neale asked about the patients whose appointments still had to be made. Would they still be seen?

Mrs Jackson commented that the letter writers needed to know that the Governors had discussed their concerns and will be putting them forward as complaints to the PALS team. Mrs Rhodes highlighted that it was the choice of the patient to write to PALS with a complaint.

Mr Butler emphasised that it was not right inviting people to ask questions and then it be written off as a complaint. He referred to his report around mental health services and expressed concern that there were parents who were looking after children with all sorts of conditions and it appeared that their support had been taken away and they did not know what was happening. He requested that Ms Symington put in her reply how sorry the Governors were that this had happened.

Ms Symington acknowledged the situation but reiterated that this was the responsibility of the CCG who had not sought alternative arrangements within the six months' timeframe.

Following further discussion it was agreed that Ms Symington and Mrs Rhodes would pick up these issues outside of the meeting.

Action: Ms Symington/Mrs Rhodes to discuss questions received from public outside of meeting.

19/24 Membership Development Group update

Mrs Provins drew the Committee's attention to several actions that had been completed on the Action plan. These were: -

- Publicising dates and times of public Council of Governors meetings in Membership Matters and on social media giving an opportunity for governors to speak to members of the public and encourage membership.
- Publicising Trust membership and benefits via a poster which has been placed in reception of each Trust facility to encourage sign up via the Trust website.
- Using Hospital Radio to encourage Trust membership.
- Producing a press release which has been distributed to the free press. It will also be sent to Patient Groups and Charitable Support Groups.

Ms Rhodes advised that they do email out to all volunteers encouraging membership. It went to around 250 people.

Mrs Provins advised that there was a Member & Public Engagement Seminar on the 19th June by NHS Providers. Mrs Jackson had volunteered to attend and will feedback to the rest of the Committee in due course.

19/25 Constitutional Review Group update

The Committee noted the report and no further comments were made.

19/26 Governor Elections

Mrs Provins referred to the report and advised that these were the proposed election seats coming up this Summer and the proposed timescale. Discussions were still taking place around the detail.

The Committee noted the report and no further comments were made.

19/27 Any Other Business

Mr Reakes asked that the Committee be notified of any questions sent in for the Council of Governors prior to the meeting so they can consider the issues. Mrs Symington replied that she will discuss with Mrs Provins and the Non-executive Directors around the protocol of this.

Action: Ms Symington/Mrs Provins to discuss protocol around sharing with the Governors questions from the public prior to the Council of Governors meeting.

19/28 Time and Date of the next meeting

The next meeting will be held on **3 September 2019, 1.30pm –3.00pm** at Malton Rugby Club, Old Malton Road, Malton YO17 7EY.

ACTION LOG

Date of Meeting	Action	Responsible Officer	Due Date	Comment
12/06/19	Update on Oncology situation required.	Mr Wilson	September 2019	
12/06/19	Produce a report on themes that come through on Patient Safety Walk rounds.	Mrs Hoskins	September 2019	
12/06/19	Discuss questions received from the public to progress.	Ms Symington / Mrs Rhodes	Outside of meeting	
12/06/19	Discuss protocol around sharing with the Governors questions from the public prior to the Council of Governors meeting.	Ms Symington / Mrs Provins	June 2019	

Public Council of Governors

ACTION LOG

Date of Meeting	Action	Responsible Officer	Due Date	Comment
12/06/19	Update on Oncology situation required.	Mr Wilson	September 2019	
12/06/19	Produce a report on themes that come through on Patient Safety Walk rounds.	Mrs Hoskins	September 2019	On agenda
12/06/19	Discuss questions received from the public to progress.	Ms Symington / Mrs Rhodes	Outside of meeting	Completed
12/06/19	Discuss protocol around sharing with the Governors questions from the public prior to the Council of Governors meeting.	Ms Symington / Mrs Provins	June 2019	Completed

Blank page

Council of Governors – 3 September 2019 Governor Activity Reports

Trust Strategic Goals:

- to deliver safe and high quality patient care as part of an integrated system
- to support an engaged, healthy and resilient workforce
- to ensure financial sustainability

Recommendation

For information	<input checked="" type="checkbox"/>	For approval	<input type="checkbox"/>
For discussion	<input checked="" type="checkbox"/>	A regulatory requirement	<input type="checkbox"/>
For assurance	<input type="checkbox"/>		

Purpose of the Report

This paper provides an overview of Governor Activities.

Executive Summary – Key Points

Reports are provided on the following:

- Lead Governor
- Transport Group
- Fairness Forum
- Out of Hospital Care
- Charity Fundraising

Recommendation

The Council of Governors is asked to note the report and the authors will respond to any questions or comments, as appropriate.

Author: Margaret Jackson – Lead Governor
 Sheila Miller – Public Governor (Ryedale & East Yorkshire)
 Jeanette Anness - Public Governor (Ryedale & East Yorkshire)
 Steve Reed – Head of Strategy for Out of Hospital Services
 Andrew Butler – Public Governor (Ryedale & East Yorkshire)

Date: September 2019

1. Lead Governor Report

On the 19th June I attended a membership study day run by NHS Providers and held in Leeds. It was good to meet governors from other trusts and debate the issues around membership and the governor role. What became obvious was that we were all struggling to increase membership numbers and sadly I didn't come away with lots of things we could do to improve our membership numbers. One issue I have asked Sue to do is speak with hospital radio. One of the volunteers is a Head Teacher from Selby and he may be able to put us in contact with a member of the Eastern European Community who lives in the Selby area and we can discuss membership or the governor role with them.

Another member's event was held by Dr David Yates, Consultant in Anaesthetics and Intensive Care Medicine to raise awareness of what happens at surgery. He was supported by one of the specialist nurses. The session in York (it was also held in Scarborough) was very well attended and the presentation used at the session was later made available to the attendees.

I have met with Jenny McAleese to discuss how we plan to undertake the Chair's appraisal next year and what the main issues were that needed to be addressed following the outcome of this year's appraisal. A date is to be set to review the progress in achieving these.

Unfortunately, due to the new Care Group management structure being implemented across the organisation, the Patient Experience Steering Group has been cancelled and will be rescheduled once the new structure is in place.

Mike Proctor was at his last Board meeting on 31st July where a leaving ceremony was held at the end of the meeting. I gave Mike a card on behalf of the Council of Governors and wished him a long and happy retirement from us all. The new Chief Executive, Simon Morrill, has started his work within the trust. The Council of Governors welcome both him and Heather McNair, Chief Nurse, and hope they will be happy here and enjoy working with everyone through very challenging times locally but in the NHS in general. It was also lovely to see and hear Steve Holmberg and Jim Dillon, our 2 newly appointed NEDs, at the recent Board meeting. Welcome to them both and the governors look forward to working with them.

One of Dianne Wilcock's last suggestions was that it might be appropriate for a governor to join York Older People's assembly (YOPA) which she attended. To this end I wrote out to governor colleagues in York and Helen Fields was interested in being involved. I attended the Executive Group meeting on 5th August and will work with Helen to share this work and will share any issues that arise with you all.

I also attended Healthwatch York on 23rd July. Sian Balsom is now back at work and the organisation has been restructured and is run by a staff of 6 and very well supported by a large number of volunteers. It was good to listen to the activity of Healthwatch over the last year and to listen to the views of the local community. There is a Healthwatch York summer 2019 booklet available. Can any of the York Governors let me know if they wish to see this. Health awards were given out at the beginning of this meeting. The staff had been nominated by members of the community and the awards reflected this with staff from many areas, hospital and community receiving awards.

Thank you to those governor colleagues who attended the CQC governor focus group on 16th July. I fed back to Sue the issues that were raised during this meeting.

The Celebration of Achievement is to be held on 17th October at Scarborough Spa and, as last year, governors have been asked to look at the volunteer nominations and agree the first 3. Once again this will be very difficult as the organisation, staff and patients could not manage without the volunteers. Thank you to Sheila, Jeanette and Sharon for assisting me with this on behalf of you all. The night on the 17th October is a great event to meet staff and hear about all that is being done to ensure the patients have the best experience possible. Do come if you are able to.

Margaret Jackson
Lead Governor

2. Transport Group Report (16.8.19)

The Travel & Transport summary of Governance has now been finalised and approved.

There are no changes to Staff Benefits. The Park & Ride continues to improve, a comparison from Week 5 where a total of 637 people used the service with an income of £468.70 to week 18 with 924 people using the service with an income of £682.00. Most users are Pensioners and an effort is being made to encourage more staff to use the service; following consultation some changes to the times of the busses and running a later service are being discussed; there will also be a problem when the new Vascular Imaging Unit is being built which will temporarily remove 150 staff car parking spaces, and when completed there will only be 50 staff parking spaces so it is essential to encourage more staff; discussions are on-going to try and resolve this.

Leaflets are being prepared to enclose with Outpatient letters to encourage the people of York to use the service, mail shot to all York surgeries, posters in the multi storey car park, internal mail shots within the Hospital and an interview with Dan Braidley on York Radio are some of the ways to make this service well known. There is to be a stand at the Open Day at Scarborough; efforts being made to encourage Scarborough Borough Council to improve cycle lanes as these are very limited.

One piece of good news is that there will be parking spaces allocated to the Trust when the work at the Sports Facility in Monks Cross is ready for use; there will be 60 car park spaces of which most will be for staff working in the services which are going to be provided there but also some spaces for the patients.

The Pool and Hire Car system continues to be more widely used and following a recent accident it was agreed to have a First Aid Kit in every car; sadly some cars are returned with a lot of rubbish in them! So the cars will be checked before going out and staff using them reminded to take their rubbish with them! Work is being done on some new technology by Enterprise country wide which should make things easier and more efficient for booking Pool and Car hire.

An Apprentice Travel Proposal is being worked on to help young people to learn how to ride bicycles and use ones provided by the Trust with the opportunity to buy them at reduced prices. This will be a 3-week cycle try-out programme.

Dan Braidley attended a meeting in July about the possible A64 upgrade organised by Highways England which would involve upgrading the Hopgrove Roundabout and dualling the A64 between Barton Hill and Thirsk and Malton; everyone present was very keen to progress this but the cost is somewhere in the region of £250m.

Sheila Miller
Public Governor (Ryedale & East Yorkshire)

3. Fairness Forum Report (July 2019)

Nichola Greenwood, the newly appointed Lead for Patient Equality, joined the meeting for the first time. Her role includes looking at patient pathways through the Trust. She and Dave Biggins will continue to assess facilities for dog waste from Assistance dogs - these are now acceptable in most areas and the concern regarding infection risks in the renal Unit have been resolved. Pets for therapy are used on the ward for patients who have dementia.

Transgender DBS checks query is resolved - the DBS department has a facility for this. An individual would need to ring them.

Anna Nelson from `Accessable` gave a presentation on the work of this company. It is a limited not for profit company which arose from the personal experience of a newly paralysed man using a wheel chair. They produce detailed access guides for public spaces based on user feedback plus from the surveyors they employ. They have worked with several universities and 60 Hospital Trusts including Sheffield, Newcastle, Bradford, Barnsley and South Yorkshire. In hospital the guides they can offer would look at distances from car parks to ward etc. accessible toilets – do they have shelves for people to put necessary appliances on, is the wheel chair transfer accessible from one side only. It was a very informative presentation much of which would be very beneficial for our patients with disabilities. The cost of the service seemed very reasonable i.e. £15-16,00.00 for the Scarborough site. Polly MacMeekin will check with our new Director of Nursing to see if she can add to it as she was at Barnsley prior to York. Currently the Trust website produces no results when `disabled access` is put in the search box.

The new LGBT badges have arrived. Staff asking to have one have to agree to the principle behind them – that it is a sign to patient and staff members that they are willing to talk to them about a LGBT issue.

The design queries for the Ritual Washing Scheme in York have been resolved and a business case prepared.

Rachel Bailes, Chaplain, sent an update. She has concerns that a large percentage of patients are not being asked about their faith on admission. Nichola Greenwood said that she was sure the written paper was completed but the problem probably was that the information was not transferred to computer records.

The group received a report from the Arts team. Their excellent work to enhance the environment for patients, visitors and staff continues at pace. In Scarborough a six week project with a dance therapist working with OTs is in progress. In York professional health

care musicians, Bright Musicians, have been playing on the stroke and dementia wards. This has been very well received by patient and visitors.

Jeanette Anness
Public Governor (Ryedale & East Yorkshire)

4. Out of Hospital Care Group (28.6.19)

Attendees:

Steve Reed (Chair), Jeanette Anness, Margaret Jackson, Richard Thompson, Catherine Thompson, Lorraine Boyd.

In attendance:

Rishi Sookraj, Humber Foundation Trust; Neil Wilson, Head of Partnerships and Alliances

Apologies:

Andrew Bennett, Vicky Mulvana-Tuohy

Summary of topics discussed

Matters arising:

It was noted that the actions from the previous meeting were progressing. Rishi was invited to join the meeting as a regular attendee representing Humber.

An update on the Community Response Team will be included on the September agenda.

The ongoing challenge to establish the 24hr ECG monitoring in Malton was discussed.

The need to explore more accessible meeting arrangements was discussed along with the potential use of Webex. Noted that the current venue in Malton doesn't support video conferencing but agreed that we need to find a way to trial this.

Humber:

Rishi Sookraj attended and delivered a presentation setting out the work undertaken by Humber FT since taking over the Scarborough and Ryedale community contract and their plans for the coming year. He described the challenges that they have faced and some of the successes they have had. Their model is to deliver a core hub wrapped around primary care and linked to external partners for three areas – Scarborough North, Scarborough South and Ryedale. They are now adjusting this in response to the formation of Primary Care Networks with different geographical boundaries.

They have seen an increased number of contacts since the contract started and improved engagement with NYCC regarding delayed patients in community units.

Year Two will see Continuing Health Care assessment provided by Humber together with an elderly medicine service (consultant clinics and pharmacists supporting care homes)

and the previous primary care frailty service. A Partnership Board has been established to oversee the work.

Scarborough Acute Services Review:

Neil Wilson attended and led a discussion outlining the progress with the review. Phase 1 completed in January 2019, with a case for change document published in March. McKinsey supported clinical reference groups (made up of hospital doctors and GPs) acting as a critical friend and bringing expertise from elsewhere. They focused on three areas (Surgery, Critical Care, Maternity and Child Health) and built up a consensus view from clinical teams.

The second phase commenced in April with further development of potential clinical models including external stakeholders (e.g. Royal Colleges); detailed financial modelling and building a robust understanding of the structural financial deficit associated with Scarborough Hospital. They are also exploring how this all integrates with out of hospital care. Links are being made nationally with the establishment of a network of similar hospitals.

Phase 2 is expected to conclude in late summer and will determine what level of engagement is required. The group discussed the approach to engagement and suggestions were made about things that could be done locally including the accessibility of published documents.

Neil described the development of a new model for delivering general surgery that will maintain the service on the Scarborough site. He set out the process of options appraisal and engagement with the teams involved and the successful recruitment to four new posts to give a sustainable rota.

The aim is for the phase 2 report to be shared with the September Council of Governors and for Neil to return to the Out of Hospital group in December.

General update:

Paper previously presented to Board of Directors shared for information and discussion about the formation of Primary Care Networks and the potential impact this will have for the delivery of integrated services in the community.

Forward plan agenda:

The group have identified the following forward plan agenda topics for 2019/20:

- Sept – Community Response Team update, TEWV update, East Coast Pain Management update, Home IV update
- Dec – Primary Care Home, Community Nursing Update, Phase 2 Scarborough Acute Services report

Actions Agreed

- Invite Rishi to join group as permanent member (Steve Reed, July 19);

To be a valued and trusted partner within our care system delivering safe effective care to the population we serve.



- Test webex functionality and consider changing venue to accommodate (Steve Reed, September 19).

Future Meetings

The next meeting would not be quorate on the agreed date – the group have suggested 18 October as an alternative (subject to venue being confirmed).

5. Charity Fundraising Committee (July 2019)

The Charity Fundraising Committee met in July. There were many new faces at this meeting, including Sue. At this meeting the Charity Staff provided further updates on the Dementia and Butterfly Appeals, as well as providing a draft budget for the year ahead. £5,127 was raised for the Dementia appeal at the Chamber of Commerce Annual Dinner on 4th April. Our Charity is the Chamber's Charity of the Year.

Thus far the funds raised for the Dementia Appeal have been spent on:

- Reminiscence boxes across all hospital sites.
- Calendar clocks across all hospital sites.
- 4 x My Dementia Systems, which patients can use to play music, games and view family photos.
- Specialist chairs which are now in use by the Occupational Therapists.
- Traffic Light water jugs to help decrease cases of dehydration among patients with Dementia.
- New furniture for the day room in the Johnson Ward at Bridlington Hospital.
- 8 Sorrento Chairs – comfy reclining chairs which put the focus on early day rehabilitation and recovery. The chairs help keep people moving and get out of bed.
- 5 x PAC trainers – training has been undertaken by 5 members of staff on a 2-day course. The training focuses on dementia education and asks how we as care givers are supporting someone with dementia. The training also looks at age processes in the brain, helping to differentiate between 'normal' ageing and ageing as part of dementia.

The Butterfly Appeal was launched in February 2019 with the aim of raising £250,000 over the next 12 months for a maternity bereavement suite, like the one in Scarborough following the Snowdrop Appeal. The appeal has now raised £162,000. Future events for the Butterfly appeal include A Prosecco Afternoon Tea, followed by a talk from Helen Butters of the Yorkshire Rows at the Hospitium on 26th September 12-3pm. Plans are afoot for a Grand Christmas Raffle with prizes donated by many wonderful businesses from around our area.

I was extremely happy to be the lead judge for the Charity Supporter of the Year category at this year's Celebration of Achievement awards. This award recognises the wonderful contribution that our charity supporters make. They raise hundreds of thousands of pounds for the Trust, via the York Teaching Hospital Charity, which makes a huge difference to the working lives of staff and patient care. This award is given to an individual or team who has demonstrated their commitment to raising funds, encouraging others to get involved and building awareness of the charity. The level of dedication and support

our Charity receives never ceases to amaze me. I shall not give anything away except to say that the judging for this was incredibly hard!

As I may have mentioned once or twice already, myself and some colleagues from my employer, NiteSite, will be running the Marathon Du Malton on the 25th August in order to raise around £400 for the Trust's Butterfly appeal - If we get to £400 raised, all the NiteSite team (including myself) will be doing the run in "Food and Drink" related fancy dress - So if you'd like to see me run around Malton dressed as a banana, please consider sending a few pounds to <https://www.justgiving.com/fundraising/nitesiterun> - Do remember to check the gift aid option to add 25% to your donation.

Finally, the staff at the charity are very keen for volunteers to collect and replace the charity boxes which local businesses have kindly hosted - as you can imagine these are quite widely dispersed around North Yorkshire. It would be of great help if anyone could volunteer to collect a few on your way to a meeting, if it's at all possible? This will free up the staff at the Charity to spend more time on fundraising (and less time driving around Yorkshire!).

If anyone is able to assist, please E-mail Rachel, Maya and Emma on charity.fundraising@york.nhs.uk or give them a call on 01904 724521 and they'll work with you to find some convenient options.

Andrew Butler
Public Governor (Ryedale & East Yorkshire)



E

Annual Report of the Audit Committee
covering the period from 1 April 2018 to
31 March 2019



Introduction

In accordance with best practice and the NHS Audit Committee Handbook, this report has been prepared to provide the Council of Governors and the Board of Directors with a summary of the work of the Audit Committee during the period April 2018– March 2019, and in particular how it has discharged its responsibilities as set out in its Terms of Reference.

The Trust has been through the most challenging year to date in respect of both finances and operational performance. The priority has been to consolidate the position and arrest wherever possible any deterioration in financial and operational performance.

Overview of the year 2018/19

Non-executive Directors make up the membership of the Audit Committee as follows:

- Mrs Jenny McAleese (JMcA) Chair from September 2017
- Mr Michael Keaney (MK)
- Mrs Jennie Adams (JA) from March 2018

Table 1: Audit Committee Attendance

	Meeting Dates					
	08/5/18	25/5/18 Year End	03/07/18 Time Out	11/9/18	04/12/18	05/3/19
JMcA	✓	✓	✓	✓		
MK	✓	✓	✓		✓	✓
JA	✓	✓	✓	✓	✓Chair	✓Chair

The Audit Committee met on six occasions during 2018/19 and all meetings were quorate. Members of the Committee also attended relevant Audit Committee training events during the course of the year.

The Committee is supported at all of its meetings by:

- Finance Director
- Head of Corporate Finance and Resource Management
- Foundation Trust Secretary
- External Audit (Engagement Lead and Engagement Manager)
- Internal Audit (Head of Internal Audit and Internal Audit Manager)
- Local Counter Fraud Specialist

Other staff were requested to attend the meeting for specific items:

- Chief Executive (for the Annual Governance Statement)
- Medical Director (for Consent and Duty of Candour)

- Chief Nurse (for Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS))
- Deputy Director of Healthcare Governance (for Clinical Audit Plan/Policy and Clinical Effectiveness)
- Head of IT Infrastructure (for Dionach Cyber Essentials Report)
- Freedom to Speak Up/Safer Working Guardian (to provide an annual report)

The Committee received secretarial and administrative support from the Foundation Trust Secretary. There was a documented work programme which scheduled the key tasks to be undertaken by the Committee over the year. This is reviewed on an annual basis. Detailed minutes were taken of all Audit Committee meetings and were reported to the Board of Directors. The Committee escalates those matters that it considers should be drawn to the attention of the Board and now does this by means of a short written report.

Separately, private sessions were held with Internal Audit and External Audit prior to the year-end meeting. Internal Audit and External Audit are encouraged to discuss any concerns they may have with the Audit Committee on an ad hoc basis.

Duties of the Committee

Following a review of the Audit Committee's Terms of Reference in September 2018, the key duties of the Audit Committee are as follows:

Governance, Risk Management & Internal Control

The Committee shall review the establishment and maintenance of an effective system of integrated governance, risk management and internal control, across the whole of the Trust's activities (both clinical and non-clinical) that supports the achievement of the Trust's objectives. In particular, the Committee will review the adequacy and effectiveness of:

- All risk and control related disclosure statements in particular the Annual Governance Statement, together with any accompanying Head of Internal Audit Statement, External Audit Opinion or other appropriate independent assurances, prior to submission to the Board.
- The underlying assurance processes that indicate the degree of the achievement of the Trust's objectives, the effectiveness of the management of principal risks and the appropriateness of the above disclosure statements.
- The policies for ensuring compliance with relevant regulatory, legal and code of conduct requirements and any related reporting and self-certifications.
- The policies and procedures for all work related to counter fraud, bribery and corruption as required by NHSFA.
- In carrying out this work the committee will primarily utilise the work of Internal Audit, External Audit and other assurance functions, but will not be limited to these sources functions. It will also seek reports and assurances from directors and managers as appropriate, concentrating on the over-arching systems of integrated governance, risk management and internal control, together with indicators of their effectiveness.
- This will be evidenced through the use of an effective Assurance Framework to guide its work and the audit and assurance functions that

report to it.

- The Committee will have effective relations with other key committees so that it understands processes and linkages. However, these other Committees must not usurp the Committee's role.

Financial Reporting

The Committee will:

- Monitor the integrity of the financial statements of the organisation and any formal announcements relating to its financial performance
- Ensure that the systems for financial reporting to the Board of Directors and the Council of Governors including those of budgetary control, are subject to review as to the completeness and accuracy of the information provided
- Review the Annual Report and financial statements before submission to the Board, focusing particularly on:
 - the wording in the Annual Governance Statement and other disclosures relevant to these Terms of Reference
 - changes in, and compliance with, accounting policies and practices and estimation techniques
 - unadjusted misstatements in the financial statements
 - Significant judgements in preparation for the financial statements
 - Significant adjustments resulting from the audit
 - Letter of representation
 - Explanations for significant variances
- Consider the Trust's in year financial position as appropriate.
- Review the Trust's annual financial plan.
- Approve changes to Accounting policies and practice.

Internal Audit & Counter-Fraud Service

The Committee shall ensure there is an effective Internal Audit function established that meets the Public Sector Internal Audit Standards and provides appropriate independent assurance to the Committee, Chief Executive (Accounting Officer) and Board of Directors. This will be achieved by:

- Considering the provision of the Internal Audit service and the costs involved. The Committee should review the performance of the Internal Audit service on an annual basis.
- Reviewing and approving the annual Internal Audit Plan and more detailed programme of work, ensuring that this is consistent with the audit needs of the Trust as identified in the Assurance Framework.
- Consider the major findings of Internal Audit work and management response and ensuring co-ordination between the Internal and External Auditors to optimise the use of audit resources.
- Review the annual report of the Internal Auditors.
- Receive the Head of Internal Audit Statement on the effectiveness of Internal Controls.
- Ensuring that the Internal Audit function is adequately resourced and has appropriate standing within the Trust.
- Discuss problems and reservations arising from Internal Auditor's work and any matters Internal Audit wishes to discuss (in the absence of Executive Directors and other management where necessary).

- Monitoring the effectiveness of the Internal Audit and carrying out an annual review.

External Audit

The Committee shall review and monitor External Auditors' independence and objectivity and the effectiveness of the audit process. In particular, the Committee will review the work and finds of the External Auditors and consider the implications and management's responses to their work. This will be achieved by:

- Considering the appointment and performance of the External Auditors, as far as the rules governing the appointment permit (and make recommendations to the Board when appropriate).
- Providing support to the Council of Governors in order that they can appoint External Auditors when necessary.
- Reviewing all External Audit reports including the report to those charged with governance (before its submission to the Board) and any work undertaken outside the annual audit plan, together with the appropriateness of management responses, including agreement of the annual audit plan.
- Discussing the nature and scope of the External Audit plan with the External Auditor prior to commencement of the audit and agree the extent of reliance to be placed on Internal Audit. Where the timing of the Committee meetings makes this impractical, work may proceed with the approval of the Executive Director of Finance which will be subject to later consideration for approval by the next Committee.
- Discussing with External Auditors their evaluation of audit risks and assessment of the Trust and how the Audit plan addresses these risks together with the impact on the audit fee.
- Discussing issues and reservations arising from External Auditor's work and any matters External Audit wish to discuss (in the absence of Executive Directors, Internal Auditors and other management where necessary).
- Keeping the performance of External Audit under regular review and raise any concerns with them in the first place. Any serious concerns should be drawn to the attention of the Council of Governors.
- Ensuring that there is in place a clear policy for the engagement of External Auditors to supply non-audit services.

Other Assurance Functions

The Committee shall review the findings of other significant assurance functions, both internal and external to the Trust, and consider the implications for the governance of the Trust:

- These will include, but will not be limited to, any reviews by Department of Health Arm's Length Bodies or Regulators/Inspectors (e.g. Care Quality Commission, NHS Resolution etc.), professional bodies with responsibility for the performance of staff or functions (e.g. Royal Colleges, accreditation bodies, etc.).
- In reviewing the work of the other Committees and work groups whose

work can provide relevant assurance to the Audit Committee's own areas of responsibility. In particular, this will include any clinical governance risk management or quality committees that are established and will satisfy itself on the assurance that can be gained from the clinical audit function.

- The Committee shall review the effectiveness of the arrangements in place for allowing staff to raise (in confidence) concerns about possible improprieties in financial, clinical or safety matters and ensure that any such concerns are investigated proportionately and independently.

Work of the Committee

The Committee currently organises its work under seven headings: Corporate Committee Work (*Work Groups*), *Internal Audit*, *External Audit*, *Finance Issues and Governance Issues*, *Counter Fraud*, *York Teaching Hospital Facilities Management (YTHFT)*.

The Chair of the Audit Committee attends the Trust's Corporate Risk Committee, where strategic and operational risks are considered by the Chair and Chief Executive, and Executive Directors are asked to attend to discuss corporate risks. This enables the Audit Committee Chair to observe, test and report back to the Audit Committee on the Trust's approach to risk management and the culture around risk in the Trust.

Data Quality Group - The Audit Committee has a working group reporting directly to it, formed in 2010. This group consists of some members of the Audit Committee and tests the quality of data used within the organisation.

The Data Quality Group has received presentations on workforce data, including sickness, appraisals and ESR, finance data quality, including the general ledger (recording of spend), the FRAC Team (valuing income to charge commissioners) and the capital asset register. Updates were provided verbally at a number of Audit Committee meetings.

Internal Audit - Internal Audit and Counter Fraud Services are provided by Audit Yorkshire. The Chair of the Audit Committee and the Director of Finance sit on the Board of Audit Yorkshire, which meets quarterly.

The conclusions, including the assurance level and the corporate importance and corporate risk ratings, all findings and recommendations of finalised Internal Audit reports are reviewed by the Audit Committee. The Committee can, and does, challenge Internal Audit on assurances provided, and requests additional information, clarification or follow-up work if considered necessary. All Internal Audit reports are discussed individually by the Audit Committee.

Internal Audit uses an inclusive risk-based approach to building its Internal Audit plans, with senior management identifying areas of risk or concerns which may then be included. Whilst this approach identifies current weaknesses and leads to activities which improve control, it almost invariably leads to an audit report giving an opinion of "*limited assurance*". All Control Improvement Audits are reported to the Audit Committee. Internal Audit is asked to undertake additional audits and reviews following any concerns raised by senior management. The Audit Committee regularly

reviewed the list of outstanding audit recommendations throughout the year and is pleased to report that these continue to fall.

A system whereby all internal audit recommendations are followed-up on a quarterly basis is in place. Progress towards the implementation of agreed recommendations is reported, including full details of all outstanding recommendations, to the Director Team and the Audit Committee on a quarterly basis. The Chief Executive continues to meet with the Audit Sponsor of all limited assurance audit reports.

The Audit Committee reviewed the Internal Audit Plan for 2018/2019 together with the 3 Year Strategic Plan.

Internal Audit Effectiveness was reviewed during 2018/19.

The Counter Fraud Plan was reviewed and approved by the Audit Committee and the Local Counter-Fraud Specialist (LCFS) presented the Annual Report detailing progress towards achievement of the plan, as well as summaries of investigations undertaken.

External Audit - External Audit services were provided by Grant Thornton for 2018/19. During the 2018/19 financial year the Audit Committee reviewed all External Audit's reports arising from their audit work in relation to the final accounts, the Annual Governance Statement, Value for Money review and Quality Report.

In the 2018/19 audit Grant Thornton paid a great deal of attention to the accounting transactions relating to York Teaching Hospital Facilities Management LLP and were satisfied that these were appropriate.

Mr Gareth Kelly, Engagement Lead, and Mr T De Zoysa, Engagement Manager, have attended the Audit Committee and regularly updated the Committee on progress against their agreed plan, on any issues arising from their work and on any issues or publications of general interest to Audit Committee members.

The Audit Committee reviewed and approved the External Audit Quality Report Engagement Letter in May 2018 and also received a benchmarking report on the Annual Report.

Governance issues - During 2018/19 the Audit Committee reviewed and, where appropriate, approved the following documents prior to submission to the Board of Directors:

- Assurance Framework and Corporate Risk Register in May, September, December 2018 and March 2019;
- Standing Orders, Standing Financial Instructions and Scheme of Delegation in December 2018;
- Compliance with the Code of Governance in March 2019;
- The Annual Governance Statement and the Head of Internal Audit Opinion prior to submission to the Board in March and May 2019.

In relation to the governance of the Audit Committee itself, the Committee undertook the following tasks during 2018/19:

- Review and approval of Audit Committee Terms of Reference and work programme at the meeting held in September 2018.

- Ongoing review and revision of the Audit Committee's timetable.
- Support of the work in relation to the appropriate functioning of the Board Committees and ensuring that, where appropriate limited assurance Internal Audit Reports were received; further scrutiny by the appropriate Board Committee took place.
- Review of effectiveness leading to a verbal review at each meeting.

Following its effectiveness review, the Committee agreed the following objectives for 2019/20:

- Obtain better assurance that we are learning and improving as a result of national clinical audits, Never Events, Serious Incidents, Mortality Reviews, Complaints and Claims.
- Obtain assurance around regulatory reporting.
- Improve interaction with other Committees and improve Board engagement with Audit Committee and the issues it escalates.
- Obtain assurance about the learning and improvement as a result of limited assurance audits.
- Track DoLS, Consent, Child Safeguarding and Duty of Candour.

Clinical Audit – During 2018/19 the Audit Committee received information on the clinical audit plan and process for national clinical audits of patient outcomes. It was confirmed that any risks identified are included on the Directorate Risk Registers and escalated to the Corporate Risk Register if required. Information around Clinical Audit and Effectiveness is also being triangulated with the Quality and Safety Committee to provide greater assurance. This has been made easier since Jennie Adams, Chair of the Quality & Safety Committee, joined the Audit Committee. Following the Board Committee restructure Jenny McAleese will attend the Quality Committee to continue this triangulation.

Financial issues - The Committee oversee and monitor the production of the Trust's financial statements. During the 2018/19 financial year, this included:

- Draft Accounts and Annual Report for the period 1 April 2018 to 31 March 2019;
- Review of the risks identified in external and internal audit reports;
- Issues regarding end of year accounts;
- A Committee meeting on 24 May 2019 to approve the final accounts, Annual Governance Statement and Annual Report for 2018/19 (including the Quality Account) prior to submission to the Board of Directors and NHSI;
- Confirmation of year-end Commissioner Trading Agreement 2018/19;
- Review and approval of Single Tender Actions at the meeting in September 2018 and December 2018;
- Review of the Going Concern Statement in March 2019 and approval of it in May 2019;
- Receipt of a report on Losses and Special Payments in September 2018;
- Approval of amendments to the Accounting Policies in March 2019.

Other Assurance - In July 2018, the Audit Committee received the Clinical Effectiveness Annual Report and agreed a number of actions to enhance the report and process. The Committee also discussed External Audit's Annual Report Benchmarking report together with some Committee fundamentals including the terms of reference, minutes and the pack of papers. .

Meetings for the coming year

The Audit Committee is keen to build on the communication links it has built with other Board Committees and will seek opportunities to link with other Audit Committees outside the Trust and outside the NHS. It will seek ways in which it can influence and improve the links with stakeholders and understand their assurance processes.

The Committee will continue to seek assurance around the development, introduction and maintenance of systems and processes.

Conclusion

The Audit Committee continues to be of significant importance in the context of increasing pressure on the NHS, both in terms of finance and operational performance. The Audit Committee ensures control processes and procedures are fit for purpose and continue to function effectively alongside the drive for ever more cost reductions.

The Committee is conscious of the need to give equal prominence to financial and clinical audit and has been pleased with the progress made this year. The Audit Committee continues to provide an overarching link between the Board Committees to ensure that audit work and risk is covered in the appropriate forum.

Members of the Committee are pleased to note the continued support for audit work from both corporate and clinical directors. This endorsement and support are both extremely important, as is the culture of openness.

Finally, I thank the Board for the strong support it gives to the work of the Audit Committee.

Jenny McAleese, Chair of the Audit Committee
June 2019

Blank page

Council of Governors – 3 September 2019

Patient Safety Walkrounds

Trust Strategic Goals:

- to deliver safe and high quality patient care as part of an integrated system
- to support an engaged, healthy and resilient workforce
- to ensure financial sustainability

Recommendation

- | | | | |
|-----------------|-------------------------------------|--------------------------|--------------------------|
| For information | <input checked="" type="checkbox"/> | For approval | <input type="checkbox"/> |
| For discussion | <input checked="" type="checkbox"/> | A regulatory requirement | <input type="checkbox"/> |
| For assurance | <input type="checkbox"/> | | |

Purpose of the Report

To share a summary of the patient safety walk rounds between May – July 2019.

Executive Summary – Key Points

Patient Safety Walk rounds provide an informal opportunity for the Board of Directors and Governors to talk with front line staff about safety issues in the Trust. Focusing solely on patient safety during these rounds is a successful strategy for promoting a culture of safety.

Between May – July 2019, there were 13 patient safety walk rounds

Recommendation

The Council of Governors is asked to note the findings from the walk rounds.

Author: Rebecca Hoskins, Deputy Director of Patient Safety

Director Sponsor: Mr. James Taylor, Medical Director

Date: August 2019

1. Introduction and Background

Patient Safety Walk rounds provide an informal opportunity for the Board of Directors and Governors to talk with front line staff about safety issues in the Trust. Focusing solely on patient safety during these rounds is a successful strategy for promoting a culture of safety.

2. Walk rounds May – July 2019

Between May – July 2019, there were 13 patient safety walk rounds. The areas visited were:

York Ward 34
 AMB
 ITU
 Radiology
 Ward 29

Scarborough Oak Ward (2 visits)
 Ann Wright
 Cherry
 Holly (2 visits)

Community St Monica's (2 visits)

2.1 Issues

The main issues that were identified during the visits were staffing, IT and Infection prevention & control.

Staffing – Lack of Medical cover out of hours was raised on 1 ward, particularly in relation to weekend cover affecting timely review of patients. ITU identified a requirement to increase critical outreach provision out of hours; this is being addressed via a business case. Nursing vacancies and challenges with recruitment was cited on a number of wards. AHP provision in St Monica's hospital was suggested to be limited.

IT – Lack of interoperability between systems, particularly between the acute hospitals, community and primary care. A lack of EPMA in community hospitals was also raised. Feedback from staff was that IT systems are slow and how this impacts on workload and effectiveness.

IP&C – Good evidence seen of preventative measures, but wearing lanyards during patient contact was observed. The ward layout of Nightingale Wards creates increased risk and this is recorded on the corporate risk register. Staff attitude towards effective hand hygiene was identified on 1 ward.

3. Detailed Recommendation

The Council of Governors is asked to note the findings from the walk rounds.

Protocol for dealing with questions submitted to the Board or Council of Governors

Question is emailed in.

Acknowledge receipt and check that the person is okay for this to be read out in the Board/Council of Governors, especially if there is any personal content.

Identify the type of question and who should be involved:

- Chair – for information
- Chief Executive – for information
- Director of Communications – for information
- Appropriate Director – for response
- Patient Experience Team – is there likely to be a complaint or is the question framed like a complaint

Ensure there is a handout available at Board/Council of Governors detailing both the question and response.

Chair to provide high level overview of complaint and response whilst the handout is circulated. This handout becomes a formal part of the Board/Council of Governors record.

Response directly to the person who submitted the question with the response circulated at the Board/Council of Governors including the wording below if it is deemed appropriate.

Given the nature of the experience you describe, and your clear concerns that the care your relative received was not of the standard you would expect, I would recommend that you contact our patient advice and liaison service (PALS).

If you wish, our PALS advisers can liaise on your behalf with the relevant service to help resolve your concerns and provide you with more detailed answers to your questions.

They can be contacted via email: pals@york.nhs.uk or by phone: 01904 726262.

Blank page

Council of Governors (Public) – 3 September 2019 Membership Development Group Report

Trust Strategic Goals:

- to deliver safe and high quality patient care as part of an integrated system
- to support an engaged, healthy and resilient workforce
- to ensure financial sustainability

Recommendation

For information	<input type="checkbox"/>	For approval	<input checked="" type="checkbox"/>
For discussion	<input checked="" type="checkbox"/>	A regulatory requirement	<input type="checkbox"/>
For assurance	<input type="checkbox"/>		

Purpose of report

The Council of Governors is asked to note the report and the authors will respond to any questions or comments, as appropriate.

Executive Summary – Key Points

This paper provides an overview of the work of the Membership Development Group.

Recommendation

The Council of Governors is asked to note the report from the Membership Development Group.

Author: Lynda Provins, FT Secretary; Tracy Astley, Assistant to FT Secretary

Director Sponsor: Susan Symington, Chair

Date: September 2019

1. Introduction and Background

The Membership Development Group review, monitor and support the development of the Trust's Membership Strategy and a number of areas which fall under this umbrella on behalf of the Council of Governors.

2. Detail of Report and Assurance

The Group met in July 2019 and discussed a number of items of matters arising and then moved onto discussing elements of membership and how the Trust can develop and increase membership and would like to highlight the following items from the meeting:

Membership Report – the membership report was discussed at length. It was highlighted that despite extensive efforts and completion of the action plan the Trust's membership was still declining. It was agreed that TAA made contact with the Membership Teams of Barnsley, Huddersfield and Humber Trusts, who had a strong membership in proportion to the population, to discuss best practice.

Membership Development Strategy Action Plan – this has now been completed and another one is being devised by the Group.

Freshers Week Membership Stand – from the information collected for Freshers Week at the local universities the group decided not to proceed with having a stand at each university due to the expense.

Elections 2019 – The group discussed how to get local people interested in becoming governors, especially in Bridlington and Selby. It was decided that:-

- LB would contact Hospital Radio and Yorkshire Coast Radio.
- Comms would add the public vacancies to the staff weekly bulletin to encourage staff to get their family and friends involved.
- TAA would include the information in the Monday Governor email in case the Governors knew of anybody who was interested in becoming a governor.

Member/Public Engagement - a discussion took place around how governors could develop further member/public engagement. It was agreed to continue to extend the Public CoG by half hour to allow the governors to meet the public informally.

MJ gave an overview of the recent seminar she attended focusing on membership and public engagement. She shared "the engagement cycle" paper she had received together with the booklets from the course. It was agreed to circulate the booklets to the Council of Governors.

Membership Poster – it was brought to light that in some venues Membership Posters were being taken down after a fortnight and therefore the posters needed to be constantly renewed.

3. Detailed Recommendation

The Council of Governors is asked to note the report from the Membership Development Group.



Council of Governors (Public) – 3 September 2019 Governor Elections Update

Trust Strategic Goals:

- to deliver safe and high quality patient care as part of an integrated system
- to support an engaged, healthy and resilient workforce
- to ensure financial sustainability

Recommendation

For information	<input checked="" type="checkbox"/>	For approval	<input type="checkbox"/>
For discussion	<input type="checkbox"/>	A regulatory requirement	<input type="checkbox"/>
For assurance	<input type="checkbox"/>		

Purpose of the Report

To inform the Council of Governors of progress in respect of the 2019 Governor elections.

Executive Summary – Key Points

The Report provides a summary of the election process to date. The election closes on the 26 September and results will be available on the 27 September.

Recommendation

The Council of Governors is asked to note the information included in the report.

Author: Lynda Provins, FT Secretary & Tracy Astley, Assistant to FT Secretary

Executive sponsor: Susan Symington, Chair

Date: August 2019

1. Introduction and Background

At the June meeting, the Council of Governors received a report on the election process. The information below updates the Council of Governors on the progress of the elections.

2. Elections currently being held

The following areas had seats where the term of office of the current governor comes to an end on 30 September 2019 or the Governor has resigned.

- Bridlington (1 seat)
- Hambleton (1 seat)
- Ryedale and East Yorkshire (1 seat)
- Selby (2 seats)
- York (2 seats)
- Community Staff (1 seat)
- Scarborough & Bridlington Staff (1 seat)

The Trust sought nominations in line with the previously published timetable. The nominations closed on 8 August 2019. The Trust has received nominations for all the constituencies except for the Bridlington Public seat and the Scarborough & Bridlington Staff seat. The Selby Public seat and the Community Staff seat received only one nomination so are therefore uncontested.

Currently, voting is underway. The voting packs for the public areas of Ryedale & East Yorkshire, Hambleton and York seats were released on 2 September and members have until 26 September to vote. The results will be provided to the Trust on the 27 September 2019.

3. Detailed Recommendation

The Council of Governors is asked to note the information included in the report.

