



**Report**  
**Council of Governors**  
**14 September 2021**  
**Chair's Report**

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**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 provide the Council of Governors with an overview of the work of the Chair during June, July and August 2021.

**Executive Summary – Key Points**

This paper provides an overview from the Chair.

**Recommendation**

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

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**Director Sponsor:** Sue Symington, Chair

**Date:** September 2021

## **Background**

As usual I have read my report to you for the last quarter, before beginning this report - and as usual I am astonished at the pace at which our world moves on. At the end of May I was commenting on the successful roll out of the vaccine and noted only one Covid patient in the trust: I talked about the trust's recovery programme and the ways in which we will seek to recover from the impact of the pandemic.

Some of the quarter has been as we might have expected - and some of it has not. In truth, the last 3 months have been just as challenging for our trust as the darkest times during the pandemic.

## **Update**

Our emergency departments are incredibly busy, our hospitals are full (beds still have to be socially distanced, as do people, and the strict infection protection controls remain in place), we have significant backlogs of patients to treat, and our population seems to be increasingly unwell and as they struggle to access other parts of our health system, they come to our emergency departments. Staffing levels have been incredibly stretched (sickness, tiredness, pinging Covid apps, holiday season and school summer holidays are all contributory factors, on top of the shortages which already exist). We have reintroduced x2 Covid wards and we face significant challenges in discharging our patients into the wider health system, where colleagues are facing very similar challenges to us. It is almost a perfect storm - and of course, we continue to plan for an uncertain winter in respect of both Covid and flu.

In my last report I shared with you the trusts new values - as designed by our staff through our work with Clever Together. You will remember our values are kindness, openness and excellence. During this quarter I attended a workshop designed to embed these values in the trust. I seek to embody these values in all of my work and engagements with both staff and external contacts.

## **Governors 1-1 Meetings**

The first part of the quarter was dominated by the NED 1-1 Meetings: as ever, I very much enjoy meeting with you individually and catching up with your news and also your views. This year the governors provided me with helpful feedback and some very positive feedback. While we all missed the opportunity to be 'together in real life' many of you were grateful for the introduction of remote meetings, and we will continue to meet using the blended medium of face to face and virtual meetings.

## **Annual One to One Governor Meetings with the Chair**

Every year, once the formal appraisal season is complete, I meet individually with the Council of Governors for a one to one review meeting.

The purpose of these meetings is to continue to develop my relationship with the governors as individuals, to discuss any issues which governors might seek to raise and to seek to continually improve our work together as Council of Governors. This absolutely aligned to the trust values of kindness, openness and excellence.

This year out of a total CoG body of 26 governors I spoke with 20 governors. For a number of reasons not all governors were available.

I am keen to recognise that the governor role is voluntary and am always careful to consider time commitments and what might be reasonable requests. During this very pressured and difficult time I have sought to be flexible with governors in respect of their governor role. It has been a difficult time for many of us, in many ways.

### High level Observations

Governors made a number of observations which were largely shared

1. Generally our Council of Governors enjoy their role - describing it as interesting, helpful, insightful and positive. Many also note the complexity of the NHS!
2. Most governors observed - for different reasons – the challenges which the Covid Pandemic had presented to the CoG. Most recognising that remote meetings had worked well and seeking to think about how to make the most of this in the future, and at the same time, most also observing that they had missed face-to-face meetings. Many of the CoG had loved the flexibility which remote meetings had created.
3. A number of governors observed that starting a governor role during the pandemic had been challenging - and I agreed.
4. Recognition that our CoG is well governed, that communications are generally good and that our clear meetings etiquette is effective.

### Suggestions as we look forward

As always Governors took the opportunity to make suggestions about how we might improve or develop the way in which we work together. I have captured these below.

Agree how we will manage meetings going forward given the ‘success’ of remote meetings - and also desire to meet face-to-face too.	In the year ahead full CoG meetings will be held F2F in the usual way. All other meetings will be undertaken remotely unless specifically requested otherwise.
Arrange a full Induction Day for governors who began with the trust during the pandemic 2020- and also those newly elected in 2021.	The Induction Programme is now in place and arrangements will be communicated as appropriate once our new CoG members are confirmed.
Suggestion that we build a skills register for the CoG identifying specific skills of each governor, in order to leverage expertise as appropriate.	For discussion at a future CoG meeting

Suggestion that we provide observers to board meetings and committee meetings with a guide to Who's Who in each meeting alongside the Terms of Reference for that meeting	Actioned
Request to improve the visibility of the CoG through Staff Matters and Membership Matters.	Once the elections are completed and our new lead governor is appointed we will seek to produce clear communications with pictures for both publications. Likely to be October
Give consideration to when emails are sent to arrange dates for meetings: too early they get lost or forgotten, too late dates may not be practical!	Discussed with Tracy
Give consideration to create opportunities for Governors and NEDs to meet and discuss key issues in small groups.	To ensure that this is included in forthcoming Board to CoG meetings.
Suggestion that retiring governors can opt to continue to receive Staff matters and CEs weekly update.	We will share Staff matters with retiring governors- if they wish
Suggestion that governors find more informal ways to keep in touch with one another between formal meetings	I will discuss with new Lead Governor

## The Great Big Thank You

Simon and I have been very keen to find appropriate ways to thank all of our staff for the contributions to the care of our patients during the pandemic and to recognise the extraordinary commitment they have shown to those we serve. We wanted our Great Big Thankyou to be proportionate and appropriate and chose series of gestures to achieve this.

*(You will all be aware that The National Health Services of the United Kingdom were awarded the George Cross by Her Majesty The Queen. The award comes in recognition of 73 years of dedicated service, including for the courageous efforts of healthcare workers across the country battling the COVID-19 pandemic. The George Cross - the highest civilian gallantry award, equivalent to the Victoria Cross - has only been bestowed collectively twice before, and today marks the second time it has been awarded collectively by Queen Elizabeth II. The George Cross is the UK's highest civilian gallantry award, equivalent to the military Victoria Cross. It sits at the top of the UK's honours system, jointly with the Victoria Cross. It is given for acts of the greatest heroism or of the most conspicuous courage in circumstances of extreme danger. The George Cross was instituted in 1940)*

At the centre of our effort was granting each staff member an additional day of annual leave on their birthday in the year ahead - along with other treats, including a visiting ice cream van! My favourite event was the day I delivered “smartie buns” across all of Scarborough Hospital staff on a cake trolley! The buns were very kindly donated by Cooplands Bakery and I was accompanied by fellow NED Jim Dillon. Staff loved receiving a sweet treat - but they also very much appreciated seeing directors in their own workplace and hearing the special thank you in person.

Simon and I wrote personally to each staff member to say thank you for the commitment and dedication shown - and included with that card was a specially designed pin badge.

## **Out and About**

One of the new freedoms afforded by the reduced numbers of Covid infection and the efficacy of the vaccine has been the opportunity to get out and about and see our staff and the services they provide. I have been proud to visit Critical Care Services in both Scarborough and York: these teams were at the very heart of our Covid response. In addition, I have visited outpatients in York, Head and Neck surgery in Selby, Bridlington Hospital, the Surgical Admissions Unit and SCBU in York. In order to understand better the future of integration across Humber Coast and Vale I also visited Castle Hill Hospital in Hull, and the acute hospitals in Grimsby, Scunthorpe and Goole. And to see integration in action I visited the Jean Bishop Centre in Hull.

As well as focussing attention on our own trust and partners I continue to face outwards too in my role - contributing to the development of our Integrated Care System and, with the support of our CDIO Dylan Roberts, judged the Health Tech Awards.

I continue to network effectively on behalf of the trust with fellow chairs across our geography along with key stakeholders. Often these meetings can be over a coffee these days, which makes relationship building easier!

## **Recruitment**

As you all know our Governor Election process is still ongoing - we will receive the results of the election on 29<sup>th</sup> September.

Working with the CoG NOMCOM, we have run a successful recruitment campaign seeking to appoint to 2 roles.

### A substantive non-executive director (voting)

We identified 3 key priorities for this role

1. A qualified accountant in order to provide support and potential succession to Jenny McAleese, Chair of Audit Committee.
2. A candidate who reflects the diverse population we serve
3. A candidate who has a deep affinity with the NHS and public service

### An Associate non-executive director (non-voting)

The search has created an opportunity to meet candidates who are interested in developing a non-executive career, but who do not yet have enough experience to apply for such roles confidently.

We identified 4 key priorities for this role

1. Potentially a qualified accountant, but if not, appropriate financial skills to join a board with a turnover in excess of £0.5bn.
2. A candidate who does not yet have significant NED experience to make an application for the substantive role, but demonstrates a genuine desire to develop these skills.
3. A candidate who reflects the diverse population we serve
4. A candidate who has a deep affinity with the NHS and public service

At the time of writing the process is completed and the NOMCOM has 2 recommendations to make to the full CoG at the meeting on 14<sup>th</sup> September. In particular the CoG sought to recruit new members of the board who demonstrated protected characteristics, and in this respect the recruitment process has been successful.

My grateful thanks to all the members of the CoG who contributed to this process.

We have welcomed a “visitor” to our NED Team, Ruth Dunlop, who is an aspiring NED and has joined us through a national programme for Aspiring Neds, we are enjoying having her with us (until the end of October) and the insights she is providing.

You may already have had contact with Mike Taylor who joined us at the trust in September as our Associate Director of Corporate Governance - he is Linda’s successor in relation to the governance relating to the board and the CoG . Jill Hall acted as an interim until Mike began and she will now be working with our trust until Christmas on our approach to Well Led in respect of the CQC standards.

I have chaired 3 recruitment panels myself, recruiting consultants to join our Radiology, Paediatric and Renal teams.

### **Goodbyes.....**

It would be impossible to close this report without saying good bye to those governors who leave us this time - as their full terms conclude. Jeanette, Sheila, Steve, Helen and Andrew have all been members of our Council of Governors for the duration of my chair role here at our trust. I have got to know each of them well over these 6 years - and we have built friendships as well as professional relationships. While we have not always agreed (and that is how it should be) the trust has hugely benefited from their knowledge and extraordinary commitment to the trust and to the care we provide for our patients. I have always been extremely grateful to them for their support of me. The CoG will miss them I know, and so will I.

It is also time for our Lead Governor Margaret Jackson to retire from her role after 9 years. Much of my work with Margaret takes place behind the scenes. She has been a confidante

as well as a colleague. I will always be grateful to Margaret for her wise words, her personal support and her bright, positive approach to the challenges we have faced together.

My heartfelt thanks to Margaret.

### **Apologies**

In my calculation I think this is my 26<sup>th</sup> Chairs Report to the Council of Governors. My report has never been late before. Please accept my apologies for the late circulation of this report: it is a reflection of the complex and challenging times in which we work, and not of my commitment to sharing with the CoG the way in which I deliver my responsibilities as chair of our trust. Sorry.