



## Minutes

### Public Council of Governors meeting 9 June 2021

**Chair:** Ms Susan Symington

#### Public Governors:

Mrs Margaret Jackson, City of York; Mr Michael Reakes, City of York; Dr Rukmal Abeysekera, City of York; Mrs Helen Fields, City of York; Ms Sally Light, Public Governor, City of York; Mrs Jeanette Anness, Ryedale and East Yorkshire; Mr Keith Dawson, Selby; Mr Doug Calvert, Selby; Mr Stephen Hinchliffe, Whitby

#### Appointed Governors

Mr Paul Johnson, YTHFM; Mr Gerry Richardson, University of York; Ms Dawn Clements, Hospices; Cllr Chris Pearson, Appointed Governor, NYCC

#### Staff Governors

Mrs Helen Noble, Scarborough/Bridlington; Mrs Maya Liversidge, Scarborough/Bridlington; Mrs Sharon Hurst, Community

#### Attendance

Mr Simon Morritt, Chief Executive; Mrs Lynne Mellor, NED; Stephen Holmberg, NED; Ms Jill Hall, Interim FT Secretary; Mrs Tracy Astley, Assistant to FT Secretary

#### Observers

2 members of the public

#### Apologies for Absence:

Mrs Josie Walker, Bridlington; Mrs Liz Black, Scarborough; Mr Andrew Butler, Ryedale & East Yorkshire; Mrs Angela Walker, Bridlington; Mrs Catherine Thompson, Hambleton; Dr Ian Mackay Holland, Scarborough; Mrs Sheila Miller, Ryedale & East Yorkshire; Mrs Vanessa Muna, York; Dr Gerry Robins, York; Ms Jo Holloway-Green, MIND; Mrs Jenny McAleese, NED; Mr Jim Dillon; Dr Lorraine Boyd, NED; Mr Matt Morgan, NED; Mr Dylan Roberts, Chief Digital Information Officer; Mrs Wendy Scott, Chief Operating Officer; Mrs Heather McNair, Chief Nurse; Ms Polly McMeekin, Director of Workforce

## **21/18 Chair's Introduction and Welcome**

Ms Symington welcomed everybody and declared the meeting quorate.

## **21/19 Declarations of Interest (DOI)**

The Council acknowledged there were no changes to the DOI.

## **21/20 Minutes of the meeting held on the 16 March 2021**

The minutes of the meeting held on the 16 March 2021 were agreed as a correct record.

## **21/21 Matters arising from the minutes**

There were no matters arising from the minutes.

## **21/22 Chief Executive's Update**

Mr Morrith gave an overview of his paper and discussed the following: -

- Covid-19 update – the Trust's current position was very positive with only two patients testing positive for Covid-19. There has been a rise in some community areas but this has not translated into hospital admissions. IPC arrangements across all sites were continuing and will do so for some time.
- Performance & Recovery - The Chief Operating Officer gave an in-depth presentation at the recent Board to CoG meeting. The HCV Recovery Plan has now been submitted on behalf of the Trust. Mr Morrith will make it available to the Council. Performance and recovery continue to be very positive with the Trust outperforming its target for April and May, and was on track to continue to outperform during the first six months of the year.

The financial allocation has now been received for the first half of 2021/22 and the Board will monitor progress throughout the financial year.

- Workforce Recovery – there was a whole suite of activities taking place to support the health and wellbeing of staff as well as initiatives in place to thank staff for their contribution throughout the last 18 months.
- New Values & Behaviours – these have now been launched and a programme of work is now being undertaken to ensure these are embedded throughout the Trust. Values ambassadors will also be appointed.
- East Coast Update – this was discussed in detail at the recent Governor Forum and the Board to CoG meeting.
- Healthy Bridlington Conversation – this was now underway and the governors, particularly those representing Bridlington, the East Coast, and East Yorkshire were encouraged to contribute to the conversation during the next couple of weeks.

- Data on Stroke Services – this showed an improvement across the board in key measures. There was still work to be undertaken but it was encouraging to note that the Trust outperformed the national average in a number of areas. With regard to accessing the Hyper-acute Stroke Unit (HASU), the CQC was comfortable with the arrangements across the Trust and was very comfortable with the changes in the quality of services that the Trust had made around the pathway. Mr Morrith will share the latest data with the Council once it had been validated.
- ICS – the latest edition of “Designing ICSs in England” has currently been released and Mr Morrith will share this with the governors.

Mr Reakes enquired about access to diagnostic tests and asked what the priorities were for improvement of diagnostic tests on the East Coast. Mr Morrith replied that there was a huge national campaign for access to diagnostic tests that was ongoing as it was seen as something that was holding back recovery. A programme of providing diagnostics outside of a hospital setting in the community was being discussed together with how this could be achieved. Mr Holmberg stated that the Quality Committee had discussed this and although community hubs can be established and kitted out with the necessary equipment, there was a staffing issue.

Mrs Anness asked if the Council could be assured that patients on these long waiting lists were receiving information about the time they would have to wait as waiting for an appointment was very difficult for patients. Mr Morris explained that every patient on the waiting list was being clinical assessed so those with the greatest clinical need was seen first. The Trust has been communicating directly with all patients. It will continue to do so and was committed to getting the waiting lists down. Mr Holmberg referred to the waiting time for diagnostic tests as this was an unselected group and it was unknown which patients were at risk. Although the diagnostic target was quite poor, the additional waiting time beyond the six weeks waiting time was not very large.

Mr Morrith spoke about the challenges of returning to normality in urgent pathways for the Trust and highlighted the high number of attendances in the Emergency Department, specifically paediatrics. The Trust was engaging in system conversations to discuss the best way forward. Mr Holmberg added that there had been a national trend for parents to present at A&E with a sick child as there had been a slower pace for GPs to return to face-to-face appointments. Breaking the trend was going to be difficult and planning for the management of acutely sick children was going to be required going forward.

#### **The Council:**

- **Received the report and thanked Mr Morrith for his time at the meeting.**

#### **Action:**

- **Mr Morrith to send the Recovery Plan to the governors.**
- **Mr Morrith to share the latest Stroke data with the governors once validated.**
- **Mr Morrith to share latest edition of “Designing ICSs in England”.**

#### **21/23 Quality Committee update**

Mr Holmberg gave a summary of topics that the Committee had discussed and added that the Committee had been particularly focused on the pandemic and the Recovery Plan.

- Growing waiting list – Mr Morrith had already alluded to the work being done around this in his report. The Committee had yet to see obvious harm in significant numbers of people waiting and this was encouraging. A lot of work was being led by Mrs Scott, Chief Operating Officer, which was focused on the Trust's recovery and the Trust had been outperforming on both the Trust's targets and its neighbouring Trusts which was encouraging.
- Staffing – whilst getting through patient backlog the Trust needed to be mindful that in some areas staff were tired and suffering burn out. The Committee and the Board were aware of plans to improve staffing over the next 1-3 years. There was also concern about medical staffing numbers in different areas of the hospital and work was ongoing to ensure that medical resources were being optimally used throughout the Trust.
- CQC – The Trust has been notified that 5 of the 7 conditions associated with registration will be removed. Written notification is awaited from the CQC following their internal processes. Two conditions remain relating to mental health which requires work across the system to get those lifted in due course.
- Clinical Governance – a lot of work was ongoing and some positive improvements have been made.
- Ockenden Report on Maternity Services – work was ongoing to ensure the Trust was compliant with the recommendations from the report.

Mr Reakes commented that the provision of changing areas for staff when they arrive and leave work was a top priority request from staff. He asked how this was being handled. Ms Symington replied that a lot of space has had to be utilised to provide services, including staff rooms and breakout areas, but it has been acknowledged that there was a need to provide more space for staff and find other ways of delivering services. There was a lot of work currently ongoing around this issue.

Mr Reakes asked if the Park and Ride services into York Hospital would be used more by staff if these services were provided from more locations, and free of charge. Ms Symington replied that the service was underwritten by the Charity. The Trust would like the service to develop but there was currently no funding. Mrs Mellor added that staff commuting to/from work was a topic the Resources Committee was focused on, including the lighting of car parks at all sites.

#### **The Council:**

- **Received the report and noted its contents.**

#### **21/24 Resources Committee update**

Mrs Mellor gave a summary of the topics that the Committee had discussed.

- HPV/HSE incident – this has been referred to the Group Audit Committee in relation to policy and procedures.
- Use of Resources Committee – this has been set up and will be chaired by the Trust's Finance Director, Andrew Bertram.

- Covid 19 – the vaccination programme was going well and the Trust is encouraging all staff to get vaccinated.
- Digital – £2m spend has been allocated to fund IT and network infrastructure. The Chief Digital Information Officer (CDIO) has pursued a number of avenues to obtain funds for the Trust. Work was progressing with the Trust’s Integrated Care Program. The Committee has asked the CDIO for assurance on the Trust’s cyber security and a paper will be presented at the next meeting on this.
- Finance – The finance team prepared a detailed and thorough analysis of COVID-related spend and the Committee were assured that only 3 areas related to Covid. The Committee applauded the quality of financial controls that have operated through the COVID crisis.
- Workforce – a lengthy detailed people plan was presented at the last meeting and a synopsis will be carried out to ascertain areas of concern. The results of the Staff Survey were also discussed.

Mrs Jackson asked when the Trust will be moving from Webex to Microsoft Teams. Mrs Mellor replied that the Trust was currently rolling out Microsoft Teams across the Trust to staff and clinicians. Ms Light added that the Governors wanted Microsoft Teams as it was easier to set up a group or individual chats. Mrs Mellor replied that this was something the CDIO would have to look at.

**The Council:**

- **Received the report and noted its contents.**

**21/25 Audit Committee update**

Mr Holmberg gave a summary of the topics that the Committee had discussed.

- LLP – governance becoming much stronger.
- Internal Audit – a lot of audits have now been completed and the Trust will receive a favourable Head of Internal Audit Opinion.

**The Council:**

- **Received the report and noted its contents.**

**21/26 Governors’ Reports**

- Lead Governor Report incl. PESG - Mrs Jackson gave an overview of her report including the presentation from Sal Katib on Community Paediatrics.
- Governor Forum – Mrs Jackson summarised the discussions that took place at the Governor Forum including an update from Mr Morrill on the East Coast Review. She also shared feedback on the Chair’s appraisal and stated that she would be sending out a summary of this in due course.

- Out of Hospital Care - Mrs Jackson highlighted that many of the governors on this group would be finishing in September and it was crucial that a public governor from each constituency was represented.
- Transport Group – Cllr Pearson summarised the discussions that took place at the meeting including the effect Covid has had on the Minibus service, and the current location of the pool cars.

Ms Light referred to the East Coast Review discussion at the recent Governor Forum where it was suggested that the governors might be given a few key messages around the services, etc., in case the public asked. Mr Morrith explained that this was something he was working on with the Communications Team but to date they have not received anything. Ms Symington said that she will chase this up.

**The Council:**

- **Received the report and noted its contents.**

**Action: Ms Symington to chase up East Coast key messages with Mr Morrith/Comms Team and distribute to the governors.**

**21/27 The Patient Experience Agenda**

Mrs Rhodes explained the use of the Friends & Family Test (FFT) and how it was used in the Trust, both the paper version and electronically. She explained why responses were currently low due to the pandemic situation and how this should improve over the coming months. She stated that from responses received, patients on the whole had received a positive experience with lots of comments praising staff.

In addition, the PALs service had continued to run as normal throughout the pandemic, there was now a feedback form on the Trust’s website, and the team continued to link in with Healthwatch. Relevant actions were being carried out from feedback received.

Mr Reakes asked what the percentage was of FFT text messages being sent out over a 3-month period. Mrs Rhodes replied that she was unsure as it was a random selection of text messages which was cheaper than the paper version. Every patient cannot be contacted as it would be too expensive. Mrs Hurst added that in the Community her team do the survey over the telephone with patients as many of them cannot leave their home.

Mr Reakes referred to the Patient Choice option and asked if the Patient Experience Group review data showed how many patients chose the Trust and how many chose other Trusts. Mrs Rhodes replied that patients should have a choice and it is encouraged. One of the ways the Trust benchmarks in this respect was through the National Inpatients Surveys which was a mandated service that all NHS Trusts have to take part in.

Mr Richardson referred to the current emphasis on equality, diversity and inclusivity and asked what the sampling of the data looked like and whether it was representative of the BAME population. He also asked whether there was a difference in responder groups. Mrs Rhodes replied that there was a particular group of people responding who were usually older, white and female. In North Yorkshire only 2.5% of the population was non-white British and it was important that their voices were also heard. The Trust does have a Lead for Equality & Diversity, Nichola Greenwood, who was passionate about this agenda.



Ms Clements asked what was classed as a formal complaint and those that were classed as a concern. Mrs Rhodes explained the various classification of complaints, which team dealt with each, and the processes involved.

#### **The Council:**

- **Thanked Mrs Rhodes for an informative presentation.**

#### **21/28 CQC Update**

Mr McKenna gave an update on the CQC and commented on the following: -

- CQC action plan – has developed over a period of time and consistently monitored to strengthen the quality of care. Seven actions were currently outstanding, six were due for delivery this month, so hopefully by the end of the month the action plan will have been completed.
- Conditions – the Trust has been notified that five of the seven conditions were going to be removed. The two remaining conditions were around how the Emergency Departments in York and Scarborough managed the level of risk associated with mental health presentations. CQC acknowledged the progress being made but would like to see the continuation of those improvements embedded into daily practice before they remove the conditions, which should be within the next few months if sustainable improvements were evidenced as business as usual in both departments.
- Next steps – once the action plan is closed regular monitoring will be undertaken through the assurance meetings. Quality assurance deep dives/benchmarking exercises will be carried out on a continuous basis.

Ms Symington asked if he thought the Trust was anticipating a CQC visit any time soon. Mr McKenna replied that the CQC had recommenced full scale inspections across the country and focusing on organisations that were rated inadequate or required improvement of which the Trust was one of them. There were no plans for the CQC to visit yet but were keen to become involved in as many Trust meetings as possible to gain a little more intelligence to ascertain whether they would need to visit the Trust or leave it a little while longer. In addition, they have removed some of the conditions and they do like to visit and inspect after such a move.

Mrs Fields asked whether the CQC were adjusting in any way their criteria to take account of Covid and the recovery plan from Covid. Mr McKenna replied that they had not adjusted the way they measured Trusts at the moment. However, they have recently released their new Strategy which was very much a different approach to regulation whereby instead of having a one-off inspection they build up a portfolio of intelligence throughout the year to shape their decision-making.

#### **The Council:**

- **Received the report and noted its contents.**
- **Thanked Mr McKenna for his information update.**

#### **21/29 Governor Working Groups**

### Membership Development Group Terms of Reference (ToR)

Ms Hall gave an overview of the changes made to the ToR and asked for the Council's approval. The Council approved the changes subject to the following being amended: -

- Change the Lead Governor chairing meetings to any public governor of the group to chair a meeting.
- Review the ToR on an annual basis and not 3 yearly.

### Constitution Review Group Terms of Reference (ToR)

Ms Hall gave an overview of the changes made to the ToR and asked for the Council's approval. The Council approved the changes subject to the following being amended: -

- Change the Lead Governor chairing meetings to any public governor of the group to chair a meeting.

#### **The Council:**

- Approved the changes to the MDG ToR and CRG ToR subject to the amendments listed.

**Action: Ms Hall to make the approved amendments to the Membership Development Group ToR and the Constitution Review Group ToR.**

### **21/30 Compliance Manual**

Ms Hall gave an overview of the proposed changes to the Compliance Manual as follows: -

- Appointment of External Auditors – no change.
- Protocol for Governors to hold NEDs to account – two minor changes.
- Governors Code of Conduct – highlighted with track changes.
- NED Appointments – no changes.

#### **The Council:**

- **Approved the changes to the Compliance Manual.**

**Action: Ms Hall to make the approved changes to the Compliance Manual.**

### **21/31 Governor Development**

Mrs Hall gave an update on the action plan created from feedback at the Governor Forum/Governor Development Day last year. She explained how a governor requests to attend a course and also how a governor feeds back to the rest of the Council. She will share all the courses provided by NHS Providers in due course.

Ms Symington stated that governors will be included in the Patient Safety Walkrounds in their constituency. These will be face to face and governors will be invited to attend over the course of the next few months.



## 21/32 FT Secretary Report

Ms Hall gave an overview of her report including:

- governor elections – Civica will be running the elections and the timetable has been agreed.
- changes to the constitution – the Constitution Review Group recommend the following changes to the Council for approval: -
  - To create an out of area constitution for the rest of Yorkshire to be included in the next governor elections.
  - To include the Deputy Lead Governor post in the Constitution.
- governor working groups – to encourage governors to put their names forward for the committees/groups that have vacancies.

Mr Hinchliffe referred to the conversation around grouping together the Whitby, Scarborough and Bridlington governors to form a group of East Coast Governors. Ms Hall replied that she was in discussions with Civica on how we do this as we would need to create a new constituency but with the same number of governors serving that area.

Mrs Fields referred to the Deputy Lead Governor post and asked what the rationale was for having a 12-month term of office. Ms Hall replied that it gave a number of governors experience of that role and it was good for Lead Governor succession.

### **The Council:**

- **noted the update on the governor elections.**
- **agreed to the changes to the constitution.**
- **noted the request for governors to join the governor working groups where there were vacancies.**

## 21/33 Future Meetings

Ms Symington proposed that the quarterly Council of Governors meetings be held face to face and all other meetings be held virtually and asked the opinion of the Council. After a lengthy discussion it was agreed that:

- The quarterly Council of Governors meetings be held face to face with a venue to be arranged.
- The Board to CoG to be held face to face.
- All other meetings to be held virtually.

## 21/34 Items to Note

The Council noted the following items:

- Membership Development Group Report
- Constitution Review Group Report
- Attendance Register

No comments were made.

### 21/35 Questions received in advance from the Public

Ms Symington referred to the report showing the questions received in advance from the public together with their responses.

Mr Reakes commented that from reading these questions it left the impression that some views needed more acknowledgement from Governors. One mechanism for Governors to obtain views of members and the public was an online feedback survey, and the Membership Development Group has proposed a survey that asks three essential questions: (1) what is working well in your area; (2) what is not working so well in your area; and (3) what issues would you like to pass via the Governors? He asked if the Trust would commit to implementing this survey as soon as practical. Ms Hall replied that the Communications Team needed to be involved to ensure that the Trust received meaningful responses.

### 21/36 Reflections on the meeting

- The CQC update was good but could not read the action plan as font too small.
- Well chaired with really high-quality discussions.
- Good to have public meeting first.
- There should be an opportunity for observers to give their feedback to Governors in a controlled and limited way at some point before the meeting, after the meeting, or during a break in this meeting.
- Thank you to Mrs Mellor/Mr Holmberg for standing in for their absent colleagues and giving excellent reports.

### 21/37 Any Other Business

Mrs Jackson asked how the NEDs sought assurance from the Board and what happened when they did not receive assurance. Ms Symington replied that she will discuss this with the NED team and report back in September.

The Committee asked when the new Associate Director of Governance was starting in post. Ms Symington replied that discussions were ongoing.

Mrs Anness referred to the courses provided by NHS Providers and asked if a synopsis could be included on the content of each course. Ms Hall replied that this will be done so the Governors have a training package.

No further business was discussed.

**Action: Ms Symington/NEDs to discuss how they sought assurance from the Board and the process when not receiving sufficient assurance and report back at next meeting.**

**Action: Ms Hall/Mrs Astley to create a training package of NHS Providers courses.**

### 21/38 Time and Date of the next meeting

The next meeting will be held on **14 September 2021, 10.00am, Sandburn Hall**. Details TBC.

## ACTION LOG

No.	Date of Meeting	Action	Responsible Officer	Due Date	Comments
21/13	16.03.21	Discuss attendance of governors to the Mental Health Steering Group and Quality Improvement Group.	Mrs Astley Ms Hall Mrs Johnson	June 21	
21/22	09.06.21	Send the Recovery Plan to the governors.	Mr Morritt	July 21	
21/22	09.06.21	Share the latest Stroke data with the governors once validated.	Mr Morritt	Aug 21	
21/22	09.06.21	Share latest edition of "Designing ICSs in England" with the governors.	Mr Morritt	July 21	
21/26	09.06.21	Chase up East Coast key messages with Mr Morritt/Comms Team and distribute to the governors.	Ms Symington	Aug 21	
21/29	09.06.21	Make the approved amendments to the Membership Development Group ToR and the Constitution Review Group ToR.	Ms Hall	July 21	
21/30	09.06.21	Make the approved changes to the Compliance Manual.	Ms Hall	July 21	
21/37		Discuss how they sought assurance from the Board and the process when not receiving sufficient assurance and report back at next meeting.	Ms Symington NEDs	Sep 21	
21/37		Create a training package of NHS Providers courses.	Ms Hall Mrs Astley	Sep 21	