



## Minutes

### Public Council of Governors meeting 14 September 2021

**Chair:** Ms Susan Symington

#### Public Governors:

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; Mrs Josie Walker, Bridlington; Mr Andrew Butler, Ryedale & East Yorkshire; Mrs Angela Walker, Bridlington; Mrs Catherine Thompson, Hambleton; Mrs Sheila Miller, Ryedale & East Yorkshire

#### Appointed Governors

Mr Paul Johnson, YTHFM; Mr Gerry Richardson, University of York; Cllr Chris Pearson, NYCC

#### Staff Governors

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

#### Attendance

Mr Jim Dillon; Dr Lorraine Boyd, NED; Mrs Lynne Mellor, NED; Mrs Justine Harle, Patient Experience Team Lead; Mrs Catherine Rhodes, Lead for Patient Experience; Mr Mike Taylor, Assoc. Director of Corporate Governance; Mrs Tracy Astley, Assistant to FT Secretary

#### Observers

Livestreamed to the public

#### Apologies for Absence:

Mr Simon Morritt, Chief Executive; Mrs Jenny McAleese, 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; Stephen Holmberg, NED; Mrs Margaret Jackson, Lead Governor; Mr Stephen Hinchliffe, Public Governor - Whitby; Dr Ian Mackay Holland, Public Governor - Scarborough; Ms Dawn Clements, Appointed Governor - Hospices; Mrs Helen Noble, Staff Governor - Scarborough/Bridlington.

### **21/39 Chair's Introduction and Welcome**

Ms Symington welcomed everybody and declared the meeting quorate.

### **21/40 Declarations of Interest (DOI)**

The Council acknowledged there were no changes to the DOI.

### **21/41 Minutes of the meeting held on the 9 June 2021**

The minutes of the meeting held on the 9 June 2021 were agreed as a correct record.

### **21/42 Matters arising from the minutes**

There were no matters arising from the minutes.

### **21/43 Chief Executive's Update**

In the absence of Mr Morritt, Ms Symington gave an overview of the paper and highlighted the following:

#### Covid-19: current position

It was more difficult in the trust now than at the peak of the pandemic. During the pandemic all resources were aimed towards dealing with Covid but 18 months on the trust was expected to carry out pre-pandemic levels of activity which was very difficult to do given that Covid-19 restrictions were still in place.

The Trust currently had 54 Covid-19 positive patients. There were 2 Covid wards at York Hospital.

#### Operational performance and recovery

The Emergency Department was very busy with half of the patients having to wait more than 4 hours from arrival.

It was a difficult time for staffing. Staff absence has been impacted by test and trace / covid-19 isolation requirements and August/school holiday annual leave.

The Trust was down 110 beds overall because of the need to keep social distancing measures. It was working hard to recover the backlog of patients needing planned treatment whilst continuing to treat urgent and acute patients and those with Covid-19.

These issues were coupled with going into winter and the flu season and any Covid mutations, etc. The Trust was currently planning for the months ahead.

#### Humber Coast & Vale ICS update

Ms Symington commented that this was moving at a fast pace now. The Trust was very much involved in the development of the partnership. She gave a summary of the

objectives of the partnership and advised that the region's ICS will be embedded into legislation from April 2022 subject to approval.

### Emergency Departments expansion

York Hospital – challenge was to stay operational whilst trying to build the development.

Scarborough Hospital – this was moving towards a Full Business Case submission in order to progress to the building stage. It was a £47m build and discussions were taking place with construction partner to ensure the build will be delivered within budget. It showed the organisation's commitment to Scarborough to build and develop the hospital for local people and staff.

### Working towards a healthy Bridlington

Feedback from local residents, health and social care partners, has now been collated and analysed and will help inform future planning. A walk about has been arranged for the Bridlington governors to visit Bridlington Hospital and meet staff/patients.

Mrs Thompson referred to staffing issues and commented that in her workplace the situation was exactly the same. Sickness absence was starting to rise because staff have been working under pressure for so long that their resilience, mental health and wellbeing were being affected. Staffing issues was probably the driver of other challenges, ie. Drop off by ambulances at Emergency Department, elective procedures, etc. There was a real need to look after staff as they were under enormous pressure from the regulators.

Mrs Hurst agreed with Mrs Thompson and added that this was system wide. Because the Trust was working in a system then the organisation was affected by its partners.

Mrs Anness asked if the children route through ED had been implemented. The Council was informed that this had been put in place and the results will be available after the summer months.

Mr Reakes asked what opportunities had the Trust explored to improve staff morale? Ms Symington replied that there were lots of things happening within the Trust to help improve staff morale. Mrs Mellor gave a number of examples, including taking part in the "Big Thank you". She added that the Resources Committee was sighted on supporting staff morale, resilience, making sure staff workshops were there, opportunities for staff to talk about their experiences, etc. Mr Dillon added that there were a number of measures being put in place to support staff morale but none of these will be enough under the circumstances. However, saying thank you goes a long way and he enjoyed the experience of pushing a trolley around Scarborough Hospital handing out cakes to staff who really appreciated it. It was a simple way of saying thank you. Dr Boyd added that the message to staff would be how the Trust was helping them do their job the best they can, and a lot of time and effort was currently going into this.

Mr Reakes asked whether using bank agencies was helping with staff issues. Mrs Fields commented that she presumed agency staff and bank staff were in the same situation. Ms Symington replied that bank fills were 70% last year compared to the same time this year of only 11%.

Mrs Thompson referred to patient waiting times and the communication with them. She felt it was an important factor because the lack of communication with people who were waiting was making them seek other ways to access treatment in other parts of the system which was putting tremendous pressure on those who were also struggling. She asked what the Trust was doing to communicate and support people who were waiting 52 weeks or longer as they need support to live well otherwise it will lead to long term conditions. Ms Symington replied that the Board have given serious consideration to this at Board and it is on their radar. Dr Boyd added that the Quality Committee were aware of this issue and a business case has been put forward, and approved, to deal with this issue. She gave assurance that Out of Hospital Care was a key part of this and the Board was looking to support that as much as possible.

**The Council:**

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

### **21/44 Chair's Report**

Ms Symington gave an overview of her report and highlighted the following: -

- Annual Governors 1:1 meetings – these have now been completed and Ms Symington met with 20 out of 26 governors. For a number of reasons not all governors were available. She spoke about the high-level observations and in generally the feedback received from the governors was good. She spoke about areas for development that were highlighted by the governors and Ms Symington gave an update on progress with these.
- NED recruitment – this will be discussed later in the Private CoG where the NomRem Committee will have a recommendation to put to the Committee.
- Governor election process – this was still ongoing. The voting will end on 29 September. The results will be published on the 30 September.
- Goodbyes – this involved the long-standing governors who received a thank you gift and certificate by the Trust to show much appreciation for all their hard work and commitment during their 9 years in tenure.

### **21/45 Quality Committee update**

Dr Boyd gave an overview of the responsibilities of the Quality Committee and commented that the topics discussed at the recent meetings all revolved around patient safety. She also spoke about the cultural change within the organisation and said this was slowly progressing.

**The Council:**

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

### **21/46 Resources Committee update**

Mrs Mellor gave an overview of the responsibilities of the Resources Committee and summarised the topics discussed at the recent meetings:

- Digital - cyber security, information governance, essential services
- Finance – overall financial status of the Trust
- Workforce – staff fatigue and stress, violence against staff, staff morale
- Risk – risk appetite, strategic context, balance of priorities
- LLP – New Start Programme, KPIs, property disposals, backlog maintenance

Mr Dillon referred to the KPIs and how the LLP had performed during the past 18 months. He spoke about the difficulty in recruitment retention and morale of staff within the LLP. He also spoke about income generation for the LLP.

Mr Richardson referred to cyber security and asked if the Trust was an outlier. Mrs Mellor replied that this problem was endemic across all industries. Some trusts had more sophisticated applications that detected issues with cybersecurity. Discussions were ongoing around this topic.

Mr Reakes referred to the Emergency Capital Application and asked if that was focused on various risks like cybersecurity or could it be used for backlog maintenance. Mrs Mellor replied that Mr Bertram, Finance Director, was looking into how the Trust could apply for the capital and, should the Trust receive it, then they will prioritise funds accordingly.

Mrs Thompson referred to the Trust's reports and the system wide reports which made her reflect on the last 10-15 years and surmised that at times of pressure and change things do go wrong and care falls down. She asked to what extent the Board felt assured that processes were in place to prevent vulnerable people being put at risk as the Trust was coming out of the pandemic. Dr Boyd replied that the Quality Committee was focussed on patient safety. She explained how the Quality Committee was seeking assurance from various sources and how it was ensuring that the cultural change within the organisation was happening.

#### **The Council:**

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

#### **21/47 Audit Committee update**

In the absence of Mrs McAleese, Ms Symington read out a statement from her.

The focus of the Audit Committee meetings in May and June was the year-end audit and associated reports. It was Mazars' first year as the Trust's External Auditors and she was pleased to report that the audit went extremely well, both from the Trust's perspective and theirs. As last year, the audit was carried out remotely because of the pandemic and she thanked and payed tribute to all involved.

Mazars gave the Trust a clean audit report, with the exception of the limitation of scope in relation to stock as a result of their being unable to attend any year-end stock take: this was expected and was the case for other NHS Foundation Trusts. The Value for Money (VFM) work has recently been completed and, again as expected, Mazars have reported significant weaknesses because of the remaining outstanding CQC conditions covering patients in ED with mental health needs.

Mrs McAleese has requested that Mazars complete their VFM work earlier next year so that the Trust can hold the AGM in September, rather than having to postpone it as has

happened this year. Mazars has confirmed that this will be the case and that this year's timetable was extended because of the pandemic.

**The Council:**

- **Noted the statement from Mrs McAleese.**

**21/48 NED Review**

Mrs Mellor gave an overview of her career background and her current role within the Trust. She was passionate about IT and worked closely with the Trust's Chief Digital Information Officer, Dylan Roberts, in moving the Trust's Digital Agenda forward. She also spoke about projects she was involved in the wider community which reflected positively on the Trust.

Mr Richardson referred to the Digital Agenda and asked how these issues were prioritised. Mrs Mellor replied that this was agreed at Board level. Plans were drawn up and progress will be monitored through the Resources/Quality Committees.

Mr Butler asked how the Resources Committee was assured of the Trust's balance of risk given the financial climate and that it was not necessarily being too conservative. Mrs Mellor replied the Board had a risk strategy which they review on a regular basis. Ms Symington added that the Trust was sticking to its budget and was not doing anything that could be described as risk taking.

Mrs Fields asked where the Trust sat compared to other trusts with regard to digital. Mrs Mellor replied that there have been a number of programs which the NHS had set up previously with digital exemplars, around 12, which the Chief Digital Information Officer benchmarks the Trust against. There were some really good pockets of progress being made and there were plans to continue this progress throughout the Trust.

Mrs Thompson questioned how the Trust prioritised its digital issues whilst working with the ICS who may have other priorities which the Trust needed to fit in with. Ms Symington replied that this matter was a Board issue and she will get a reply from the Board and feedback to Mrs Thompson.

Mr Reakes asked if the Trust had technology where consultants from SGH could liaise with YH if needed. Ms Symington replied that there was a system in place for clinicians to liaise with each other in relation to patient care.

**The Council:**

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

**Action: Ask Board for reply re Mrs Thompson's question on prioritising digital issues with ICS digital agenda and feedback to Mrs Thompson.**

**21/49 Governors' Reports**

- Transport - Mrs Miller highlighted the poor signage at the Community Stadium as patients did not know where the health services were. Mr Johnson commented that signage to the stadium was not the Trust's responsibility. However, internal signage will be updated within the next couple of weeks.

- Fairness Forum – Mrs Abeysekera gave an update on the ablution facilities on the Trust sites. She also spoke about staff training on EDI. Mrs Anness added that the forum had received 3 examples of patients being let down by lack of interpreters and sign language provisions. It was recognised that patients needed to be fully informed of their rights and a discussion took place on how best to do this. She asked if information could be promoted through Membership Matters. Ms Symington replied that these services were widely communicated around the Trust.
- Out of Hospital Care – Mrs Anness commented that the meeting had been given a presentation around frailty at the front door and frailty scoring in ED. She wondered if this could be considered as the governors’ topic for audit next year. Ms Symington replied that this was a good suggestion and she will make a note of it.

**The Council:**

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

**21/50 Patient Experience Feedback**

Mrs Rhodes and Mrs Harle gave an overview of how they received patient feedback on their experience at the Trust, both through paper versions and electronic versions. They gave a summary of the routes available to collect feedback and how this feedback was used to improve services through the care groups.



Mrs Anness referred to patients’ complaints around communication. Mrs Harle replied that a lot of work was ongoing around this. However, to put things in perspective, from the 100s of patients that were seen each day only around 10 complaints were received each week.

Mrs Rhodes commented that there were lots of ways patients can give feedback and using those methods made it easier for the Trust to benchmark itself against other organisations. Setting up new ways of receiving feedback would not be helpful. It was about signposting people to the various existing methods of giving feedback.



Mr Reakes asked how the Friends & Family test were conducted. Mrs Rhodes replied that the Friends & Family test was intended to give real time feedback. The results were disseminated through to the care groups. The paper versions were mainly used on wards and the electronic version used for outpatients. Mrs Rhodes explained how the electronic version of the Friends & Family test was used where around 10% of patients were randomly selected to give feedback.

Mr Reakes asked how they captured what was a good experience and what needed improving. Mrs Rhodes replied that they use an external agency to collate the response and they report back to the team on a monthly basis. At ward sister level, they receive a report each month showing percentages and comments. They are encouraged to develop an action plan based on the feedback.

Mrs Abeysekera asked what system was in place to capture the views of people whose English was not their first language. Mrs Rhodes replied that there was a system in place and this was being reviewed regularly to ensure everyone had access to a method of giving feedback.

**The Council:**

- **Thanked Mrs Rhodes and Mrs Harle for their time and presentation.**

### **21/51 FT Secretary Report**

Mr Taylor gave a verbal update around the governor elections. He commented that voting was now underway and the results will be available from 30 September. It was expected that all vacancies will be filled.

**The Council:**

- **Noted the update on the governor elections.**

### **21/52 Governor Skills Register**

The Council discussed whether having a Governor Skills Register would be beneficial. The consensus was that it would be a good idea. Ms Symington and Ms Astley will follow this up and feedback in December.

**Action: Ms Symington/Mrs Astley to feedback at December CoG re the implementation of a Governor Skills Register.**

### **21/53 Items to Note**

The Council noted the following items:

- Attendance Register
- Meeting Dates 2022-2023

No comments were made.

### **21/54 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.

She read out the Trust's response around Stroke Services.

The Council spoke about the questions received from Mr Wane, in particular the loss of services he listed. The Council was assured that some of these were still fully functional and therefore questioned the validity of his sources. Mr Butler added that any changes to services were made based on a clinical decision and on resources available at that time. He requested that people work with the Trust in order to understand how decisions are made, etc., so that misinformation is not communicated.

### **21/55 Reflections on the meeting**

- Difficulty in hearing some of the speakers due to the acoustics of the room.
- Very interesting meetings, lots of topics
- LLP newsletter was excellent. Good interesting information.

### **21/56 Any Other Business**

No further business was discussed.

### **21/57 Time and Date of the next meeting**

The next meeting will be held on **8 December 2021 at Malton Rugby Club**. Details TBC.

## Public CoG – 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	Ongoing
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	Completed
21/30	09.06.21	Make the approved changes to the Compliance Manual.	Ms Hall	July 21	Completed
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	Ongoing

21/48	14.09.21	Ask Board for reply re Mrs Thompson's question on prioritising digital issues with ICS digital agenda and feedback to Mrs Thompson.	Mr Taylor	Oct 2021	
21/52	14.09.21	Feedback at December CoG re the implementation of a Governor Skills Register.	Ms Symington / Mrs Astley	Dec 2021	