

MINUTES OF THE COUNCIL OF GOVERNORS MEETING

6 December 2023

14:00 – 16:15

Worthing Leisure Centre/MS Teams

Present	
Giles York (GY)	Trust Chair
Lesley Strong (LS)	Non-Executive Director
Mark Swyny (MS)	Non-Executive Director – items 1 to 6 only
Alan Sutton (AS)	Lead Governor and Public Governor for Chichester – via MS Teams
Grainne Saunders (GS)	Deputy Lead Governor and Appointed Governor – Children and Young People
Andrew Baldwin (AB)	Appointed Governor – West Sussex County Council – via MS Teams
Elaine Foster-Page (EFP)	Appointed Governor – Volunteers – via MS Teams
Rob Persey (RP)	Appointed Governor – Brighton and Hove City Council – via MS Teams
Lilian Bold (LB)	Public Governor for Horsham – via MS Teams
Rita Garner (RG)	Public Governor for Worthing
Craig Gershater (CG)	Public Governor for Chichester
Sue Morton (SM)	Public Governor for Horsham
James Roberts (JR)	Public Governor for Arun – via MS Teams
Harriet Clompus (HC)	Staff Governor – Doctors and Dentists – via MS Teams
Ngairé Cox (NC)	Staff Governor – Nurses and Healthcare Assistants – via MS Teams
Shingai Ngwenya (SN)	Staff Governor – Nurses and Healthcare Assistants
Mary Hammerton (MH)	Quality Development Manager – item 7 only via MS Teams
Vasanthan Manoharan (VM)	Quality Development Lead: Assurance – item 7 only via MS Teams
Zoe Smith (ZS)	Trust Secretary
Paul Somerville (PS)	Deputy Trust Secretary
Apologies	
Ann Barlow	Appointed Governor – Volunteers
Gavin Deeble	Appointed Governor – Children and Young People
Julie Fryatt	Appointed Governor – Higher Education
Pennie Ford	Appointed Governor – Integrated Care System (ICS)
Janet Baah	Public Governor for High Weald Lewes Havens
Stella Benson	Public Governor for Brighton & Hove
Dave Collins	Public Governor for Adur
Sandra Daniells	Public Governor for Arun
Imogen Makepeace	Public Governor for High Weald Lewes Havens
Tanya Petherick	Public Governor for Brighton & Hove
Amber Villar	Public Governor for Crawley – via MS Teams
Jessica Poulton	Staff Governor – Allied Health Professionals

Anita Sturdey	Staff Governor – Support Staff
1.	Welcome, apologies, declarations of interest
	Giles York (GY) Trust Chair welcomed everyone to the meeting including Non-Executive Directors (NEDs) Lesley Strong (LS) and Mark Swyny (MS). Apologies for absence are noted on pages one and two of these minutes. No declarations of interest were declared for this meeting.
2.	Minutes of the Previous Meetings 21 June and 25 October 2023
	<p>Paul Somerville (PS) said that Lead Governor Alan Sutton (AS) had attended the meeting on 25 October and the minutes would be amended to reflect this. The minutes of the previous meetings were agreed as a true and accurate record. GY asked that the action relating to service visits from the 15 March meeting be carried forward and to ensure that a service visits summary report would be shared with the Council of Governors (CoG) at its 13 March 2024 meeting. AS said that he had not seen a schedule of service visits and that this would increase visibility.</p> <p>DECISION: The minutes from the meetings on 21 June and 25 October 2023 were approved.</p> <p>ACTION: Service visits summary report to be shared with the CoG at its 13 March 2024 meeting.</p>
3.	Lead and Deputy Lead Governor Update
	<p>Deputy Lead Governor Grainne Saunders (GS) provided the update on behalf of AS. GS said that she and AS had supported at several community engagement events, joining forces with the Sussex Integrated Care System (ICS). These had provided opportunities to seek feedback from the public, recruit new members and to network with other organisations. The role of Research Champions, managed by the Trust's Research team was evolving and both AS and GS had been involved in developing the role description. GS said that she attended the Trust's Leadership Conference in October, the first in four years after the pandemic. Lots of staff attended including Staff Governors. Shingai Ngwenya (SN) gave an inspiration reflection on her experience working for the Trust and several Staff Governors hosted a meet your Staff Governors session during the lunch. The Staff Awards were held in November which recognised achievement and long service. AS and Janet Baah (JB) attended a recent ICS conference at the Brighton and Sussex Medical School and a clinician from the Trust had given a talk. Elaine Barlow (EB), James Roberts (JB) and GS fed into the Trust's Voluntary and Community Development strategy workshop along with staff in October. AS was pleased to have been able to join the Petworth Patient Participation Group (PPG) at his local GP surgery. GS said that she had been involved in a Trust project to improve communication with the Child Development Centre's with support of the Digital team. GS had also joined the latest Trust Disability and Wellbeing Staff Network drop-in and was able to talk to its members.</p> <p>DECISION: The CoG noted the Lead and Deputy Lead Governor update.</p>
4.	Governor Feedback
	SN said that Staff Governors in November held a virtual drop-in event with staff with the Trust Chair and a face-to-face drop-in session at the Leadership Conference to speak with more staff and to obtain their feedback.

	<p>CG said that in June 2024 a slot had been confirmed for him to speak at Talks at Six, a Chichester Forum, about the history of the NHS. PS said that he had supplied CG with a presentation that provides an overview of the Trust including the Council of Governors, and that promotes membership and feedback on the NHS.</p> <p>Sue Morton (SM) said that she had been part of the Patient-Led Assessments of the Care Environment (PLACE) at West Sussex sites where the Trust's provides patient facing services, apart from Zachary Merton. Issues at Horsham Hospital had been resolved immediately and some improvements had been recommended at Arundel and District Community Hospital. SM said that common issues that has been raised were signage/wayfinding, no main receptionist and no sense of ownership at multi-occupied sites including Crawley and Horsham hospitals. GY said that there was something about the experience when people visited patient-facing NHS sites and that people who supported the reception area were normally there to help people. This was something that could be looked with by the Trust and Sussex and Surrey Healthcare NHS Trust who were two of the main providers that operated at Crawley and Horsham hospitals. SM suggested that the Trust should walk round all of its sites to get a sense of first impressions/experience.</p> <p>GY thanked all governors for their work in-between meetings. Lilian Bold (LB) joined the meeting.</p> <p>DECISION: The CoG noted governor feedback.</p>
<p>5.</p>	<p>Trust Strategy – Corporate Objectives Update – Month Six (September 2023)</p> <p>GY introduced the item. The Board reviewed progress against annual corporate objectives on a quarterly basis. GY handed over to Non-Executive Directors (NEDs) Mark Swyny (MS) and Lesley Strong (LS) to present. MS said that good progress had been made as 39 apprenticeships had been recruited to clinical roles against the annual target of 48. SN said that as the attrition rates were a risk to delivery, she asked if the data was regularly being reviewed and what mitigations might had been put in place. MS said that this was a live conversation at People Committee which has reviewed data on new staff who had been employed with the Trust in the last two years. Changes to recruitment and retention processes had started to show an improvement in attrition rates across the Trust. MS said that apprenticeships were really important to get new people in and to stay with the Trust whilst they were developing their careers. LS said that the NEDs sought assurance from Executive Directors on plans to recruit to podiatry apprenticeships as this was the hardest clinical profession to recruit to. LS said that the Trust was looking at other ways to promote apprenticeships and would not just rely on the NHS Jobs recruitment website. Apprentices required a period of study, and the Trust was working with a number of training providers. GY said that the Trust was currently looking at both how its promoted apprenticeships roles and the natural places to reach future apprentices. Ngaire Cox (NC) asked what support was provided to staff who undertook an academic degree course with a training college. LS said that she did not have this detail, but it would be provided outside of the meeting.</p> <p>ACTION: Lesley Strong/People Directorate to provide Ngaire Cox with details of support provided to staff who undertake an academic degree course with a training college.</p>

In relation to Reducing Service Inequities, Rita Garner (RG) asked if NEDs were assured that the Trust was confident that it would be able to carry out equity reviews of nine of its services that managed waiting lists. NEDs confirmed that delivery of this corporate objective was on track. RG inquired about anomalies that had been found. LS said that this was related to the musculoskeletal (MSK) service where 70% of people accessing the service were women which suggested that not enough men were accessing it.

LS said that over recent months there had been an increased focus on quality improvement (QI) across the Trust. 22 case studies had been submitted in quarter two with a shift from improvements in process to outcomes. There had been a significant increase in staff undertaking QI training in 2023. LS said that there were a number of smaller QI programmes that were taking place at a local level. GY said that the Trust was aligned to the national approach to quality via NHS Impact and would be seeking opportunities to join QI programmes where this would also generate income to the Trust. CG asked if Formic included Six Sigma principles in the QI programme. LS said that NEDs challenged the Executive Directors to set a consistent process. The Board was due to go through the DMAIC process (define, measure, analyse, improve and control) to then demonstrate across the Trust the consistent methodology applied to QI. It was suggested that CG may wish to have a conversation with Gillian McTaggart, Associate Director of Quality Improvement about Six Sigma. RG asked for clarity on the focus of the QI projects. LS said these included bed use, bed optimisation, length of stay, community nursing productivity, planned care and workforce to support apprenticeships. GY said that the Board had asked when QI projects should come to the Board for assurance and there were current discussions taking place to review this. This assurance would include that the right projects were being prioritised with demonstrable benefits of the improvement.

MS said that the innovations as part of the Digital Leader corporate objective, including the difference that these made, were looked at the Resources Committee. MS said that the strategy had three-year intent and that the target of 20 innovations successfully evaluated and embedded in a clinical service in 2023-24 was challenging. There was a pipeline of innovations that would make a difference but there was also a consideration of available investment and resource that could be made available to all innovations.

For Sustainability, MS said that the Trust as part of its Green Plan was on target to reduce carbon emissions by 450 tonnes in 2023-24 compared to the March 2023 baseline. Future years would be more challenging based on the Trust's sustainability ambitions. In quarter two heat pumps had been installed at Chailey Clinical Services. At each quarterly update NEDs challenged the ambition with the ability to deliver the change. MS said that sometimes projects might require more resource, however, this needed to be balanced within the financial envelope and broader Trust considerations. GS asked for clarity on term 'grey fleet mileage'. MS said that this was mileage that staff did in their own vehicles to support delivery of Trust services. GS asked if there were any available grants for the NHS to become more sustainable. MS said that these were reducing but the Trust was looking at solar. MS said that mileage and CO2 did not include patient journeys to attend an appointment. LB said that not all virtual care was carbon free. MS said that transparent carbon reduction data was submitted to NHS England. Somethings were out of the Trust's control, however, the Trust had been successful in offering support to other organisations to reduce their carbon footprint.

	<p>RG asked if the NEDs had any concerns with the strategy deliverable status at month six. MS said that potentially Digital Leader corporate objective was currently being under reported, however, the number of clinical apprenticeships recruited was a strength.</p> <p>DECISION: The CoG noted the corporate objectives update at month six September 2023.</p>
<p>6.</p>	<p>Performance Report – Month 6 (September 2023)</p>
	<p>GY introduced the performance report and invited MS to present on finance and workforce, and LS on operational and quality.</p> <p>MS said that there was a clear focus to only use agency staff at times when this was absolutely needed, and this was being closely monitored. Cost Improvement Programmes (CIPs) were challenging as the majority of the shortfall was from stretch target savings, however, the Trust would be vigilant in delivering a break-even position. GS said that the narrative was focused on cost savings and was aware of the extra pressure this would have on the Trust. GY said that due to significant financial challenges across the NHS the Trust was now expected to deliver a surplus in 2023-24. This meant that the Trust would need to do things differently including changes to the opening times of some of its Urgent Treatment Centres and Minor Injuries Units. This was currently being discussed within the Sussex ICS. GY provided assurance that the Trust was in a better position than other Sussex providers. MS said that the spotlight report highlighted that it was very challenging to deliver services with the money the Trust was given, but provided assurance that Mike Jennings, Chief Financial Officer and the Finance team were clear on the current position around opportunities and risks. The Trust had been balancing the budget, had been asked to do more and therefore this would require Sussex system decisions.</p> <p>There was some comment on the data and use of statistical process control (SPC) charts. GY provided assurance that they included the expected range of performance which was reviewed annually based on historical performance.</p> <p>MS said that trends in workforce performance were now in a better position than a few months ago. Success in the number of new apprenticeships had reduced the vacancy rate. GY said that the sickness rate had been of concern and was getting better. RG asked how the recent government announcement on migration may impact the Trust. MS said that it was too early to comment as the announcement was made in the last day, however, there had already been guidance issued to providers stating not to rely too heavily on overseas nurse recruitment.</p> <p>LS said that quality was reviewed at the Quality Improvement Committee (QIC). Quality performance remained good and there was lots of triangulation of data. There was no increase in the number of patient safety incidents being reported where teams were short staffed. Hospital infections including covid were increasing which was expected at this time of year. Hand hygiene rates were good. The number of falls appeared to be increasing. QIC did a deep dive into this and good assurance on work that was being done across its intermediate care units (ICUs) included End PJ Paralysis campaign and that falls were investigated immediately, and lesson learnt were shared. Complaints were being responded to in a timely way and there were many compliments. The Board</p>

had received a recent patient story where they had made a complaint about the Diabetes Care For You service. The patient was housebound and was not offered access to the psychotherapist online. The service reviewed this and had changed their practice to now offer digital consultants. Andrew Baldwin (AB) asked how many complaints the Trust received. LS said that an annual Duty of Candour report was taken to the Board and in 2022-23 it averaged 10 complaints for each quarter. There was no one theme from complaints and assurance had been provided at QIC that all complaints had been dealt with appropriately. Zoe Smith (ZS) also signposted the CoG to the annual Patient Experience Report that went to Board. SM asked about the use of escalated beds and the impact of the temporary closure of Zachary Merton ICU. LS said that the timing of the re-opening of the ICU was not yet clear, and the Executive team had a plan around patient experience. RG said that she had seen posts on social media but these did not include any reasons for the temporary closure. There had been a number of issues including a significant leak in the roof, lack of access to the loft space due to asbestos and an underlying problem about heating which meant that a safe temperature in the ICU could not be maintained. GY said that until the full complexity of the issues were established, the Executive team were not able to give a timeframe for when the ICU was to be re-opened. SN queried if 232 patient safety incidents recorded in September was the correct figure or a year-to-date figure. LS said that the September figure was correct and demonstrated that the Trust had an open and positive culture to raise incidents.

LS moved onto operational performance. Average length of stay in ICUs had reduced as a result of the implementation of the bed optimisation programme. At September 1,860 children were waiting for and undergoing an assessment for neurodevelopment conditions, such as an autism diagnosis. The Trust had increased internal capacity and was to introduce assessments from an external provider. Assurance was sought by NEDs that the Trust was doing everything it could to increase capacity and to ensure that families were kept informed whilst waiting. Virtual ward bed numbers had increased following roll out in Chichester, Crawley and Worthing. All commissioned virtual ward beds were opened in early December. GY considered the current situation of Zachary Merton and the need to provide more virtual beds. RG said it was important that patients were treated in the most appropriate setting based on their individual needs. LS said that the private provider for neurodisability would provide 300 assessments and that this was a short-term solution. GS said that in West Sussex there had been a rise of 2% of the children population, and in the last year alone there had been an 22% increase in the number of children being referred for an assessment. The trend had continued to increase, there was no educational funding and GS suggested whether a different model/pathway was needed to be put in place. GY said that this was a national issue that needed to be resolved between health and education. RG asked if all children needed a diagnosis through a Child Development Centre (CDC) and if the CDCs prioritised children with the biggest need. LS provided assurance that children with the biggest need were prioritised for assessment and there was no differences across West Sussex. GS said that there had been a recent inspection across West Sussex children health and education services, and it would be important to look at the recommendations.

MS left the meeting. MH and VM joined the meeting.

	DECISION: The CoG noted the performance report and sought assurance from the NEDs.
7.	Quality Account Priorities 2024-25
	<p>Mary Hammerton (MH) and Vasanthan Manoharan (VM) gave an update on the work plan of the Quality Account 2023-24 and the process to engage on the quality priorities for 2024-25. There would be a minimum of three improvement priorities that were achievable and measurable, under the key questions of safe, effective and person-centred. LS said that the Quality Account was an important document which required approval on the quality priorities with stakeholders. The QIC looked at current priorities and received in-year updates on their progress. The QIC also fed into discussions about future priorities. For assurance the Board looked at the delivery of the actions against each quality priority.</p> <p>CG asked if the Quality Account had an interface with the DMAIC process. MH said that her team were working with the QI team to apply this to the nationally mandated framework of the Quality Account.</p> <p>The presentation included a timeline with engagement with stakeholders including the CoG. It was agreed with MH and Paul Somerville (PS) that the appropriate time to engagement with the CoG on the draft 2024-25 quality priorities would be toward the end of February via MS Teams.</p> <p>DECISION: The CoG noted the update on the work plan of the Quality Account 2023-24 and that there would be an opportunity for the CoG to engage on the 2024-25 quality priorities in February 2024.</p> <p>MH and VM left the meeting.</p>
8.	Report from the Council of Governors Nomination and Remuneration Committee – Thursday 16 November 2023
	<p>ZS said that the Council of Governors Nominations and Remuneration Committee (CoG NRC) met on 16 November 2023 to consider 2023-24 remuneration for the Chair and the NEDs. The CoG NRC recommendation was that 2023-24 remuneration was to remain the same as that in 2022-23. GY confirmed that there was national guidance on NED and the Chair remuneration. ZS confirmed that this guidance had not been updated since it was published in 2019. The guidance recommended that NED remuneration from 2022-23 should be set at £13,000. It was agreed by the CoG in December 2022 to apply a 3.5% pay award which took basic NED remuneration to £13,455 in 2022-23. ZS said that since this decision the latest Code of Governance had been published and there was a provision that NHS trusts should explain in its annual report if it had deviated from the guidance. GY said that there was a national imperative to be aligned to the guidance, to be vigilant in the current NHS financial climate and that the remuneration did not necessarily reflect the time that NEDs gave to the Trust. The CoG approved that remuneration of the Chair and the NEDs for 2023-24 would remain at the level approved for 2022-23.</p> <p>DECISION: The CoG approved that the remuneration of the Chair and the NEDs for 2023-24 would remain at the same as that approved for 2022-23.</p>
9.	Minutes from the Governor Sub-Committees/Groups
	<p>GY referred the CoG to the approved minutes that had been circulated including:</p> <ul style="list-style-type: none"> • Governor Staff Group on 12 July.

	<ul style="list-style-type: none"> • Governor Steering Group on 15 August. <p>DECISION: The CoG noted the minutes of its sub-committees/groups.</p>
<p>10.</p>	<p>Effectiveness Reviews of the Governor Sub-Committees/Groups</p>
	<p>PS said on request of the Chair, and on behalf of the CoG, he had undertaken effectiveness assessments of the following sub-committees/groups:</p> <ul style="list-style-type: none"> • Governor Steering Group • CoG NRC • Seminars • Membership Engagement Group (MEG) – reinstated from March 2023. <p>The reviews confirmed their continuing effectiveness in discharging the duties of the CoG. The full reviews were included in the pack including, where relevant, their terms of reference. PS said that a key consideration in early 2024 was for the Chair, Lead and Deputy Lead Governor, and Trust and Deputy Trust Secretary to review their membership considering attendance and natural succession planning.</p> <p>DECISION: The CoG noted the effectiveness reviews of the governor sub-committees/groups.</p>
<p>11.</p>	<p>Governor Development Day Evaluation</p>
	<p>PS said that the Trust had commissioned an internal bespoke Governor Development Day themed on ‘How can governors support the Trust to get from good to outstanding’. It included:</p> <ul style="list-style-type: none"> • Next steps following the well-led review carried out in early 2023. • What governors needed to know about the new Care Quality Commission (CQC) assessment framework. • QI. • Table exercises and feedback. • Recap of CoG statutory duties. • Presentation from Stephen Lightfoot, Chair of the Sussex ICS with a Sussex update. Lead Governors of other Sussex NHS Foundation Trusts and the Royal Surrey attended for this afternoon presentation. <p>Only 11 out of a possible 26 governors attended (42%) compared to 19 governors (73%) in 2022. This was the lowest attendance to date.</p> <p>Positive feedback had been received from 8 of the 11 governors who attended. QI and the ICS sessions scored the highest – 4.6/5 and 4.8/5 respectively – with a score of 5 being excellent. PS said that the involvement of NEDs at the day enriched the learning and helped governors and NEDs build relationships.</p> <p>The full evaluation report had been included to give full transparency on feedback that had been provided. Areas for on-going development included:</p> <ul style="list-style-type: none"> • More opportunities for governors to be involved in roundtables discussions and to report back to the full CoG. • Possible QI exercise linked to support governors in their statutory duty to obtain feedback from members and the public. • Preference to design development days in-house and use Trust staff rather than commission NHS Providers as done so in previous years.

	<ul style="list-style-type: none"> • Consideration of not holding the development day during half-term to improve attendance. • Consideration of alternative venues and catering. <p>DECISION: The CoG noted the governor development day evaluation.</p>
12.	<p>Governor Nominations and Elections – January to March 2024</p>
	<p>PS said that governor nominations and elections would start in early January for four public constituency seats in Arun, Brighton and Hove, Crawley and Mid Sussex. The Trust was working with partner Civica, an independent organisation appointed to run the process. PS said that a comprehensive communication plan was being enacted. All relevant members would be communicated with by email or letter, and where elections would take place, these members would be asked to vote. A social media campaign to promote the seats was underway for the nomination period (Friday 5 to Monday 22 January). PS encouraged governors to spread the word and to share information to their networks, contacts, family and friends to promote the governor seats. A public announcement confirming the outcome of the nominations and elections would be made available from w/c Monday 4 March.</p> <p>DECISION: The CoG noted the plan for governor nominations and elections to take place from January to March 2024.</p>
13.	<p>Membership Engagement Strategy 2023-26 – Update on Delivering the Year One Plan</p>
	<p>PS provided an update on the delivery of the Year One Plan (from August 2023) and included the following metrics:</p> <ul style="list-style-type: none"> • The MEG, which led the delivery of the strategy, had meet five times since it was reinstated in March. • MEG had developed a calendar of events and had attended 10 since June. This engagement had generated 14 completed feedback forms and 33 new members. • The Deputy Trust Secretary had worked closely with the Engagement Lead at the ICS and had joined up on community events since the marking of the NHS 75th birthday in July. • The separate Staff Governor Group continued to meet with the Chair and virtual drop-in sessions with staff had taken place. Seven forms of feedback had been shared by staff and relevant Trust responses had been issued. • The summer edition of the members’ newsletter had been issued in July. It had been sent to 2,998 public members with a valid email address. The open rate stood at 59%. There had been 59 bounces and 30 unsubscribes. <p>An overview of current membership was provided including areas of focus to recruit to underrepresented demographics. Current public membership numbers stood at 5,454 and had slightly increased on the June figure that stood at 5,425.</p> <p>PS said that the report provided confirmation of the effective delivery of the strategy which was focused on member and public feedback and membership recruitment. PS thanked the MEG for their continued support at community events to engage with the public, to seek their feedback and to recruit new members.</p> <p>DECISION: The CoG noted the update on the delivery of the Membership Engagement Strategy 2023-26 Year One Plan.</p>

14.	Council of Governors Meeting Report to January 2024 Board Meeting
	<p>ZS suggested the CoG meeting report to the Board should provide a summary of items covered/discussed at this meeting:</p> <ul style="list-style-type: none"> • Signage/wayfinding and parking at sites that SCFT operates from. • More engagement with patients and how the Trust hears about their experience of care. • Using the Membership Engagement Strategy as an additional way to capture patient feedback to the Board. • Opportunities for governors to sit within SCFT patient services and seek feedback from users. <p>GY asked for this item to be prioritised on the agenda for the March 2024 CoG meeting.</p>
15.	Any other business
	There was no other business. The meeting closed at 16:13.
16.	Date of next meeting
	Wednesday 13 March 2024 14:00 to 16:15 at Worthing Leisure Centre, Shaftesbury Avenue, Goring-by-Sea, Worthing BN12 4ET (Joint Board of Directors and Council of Governors)

Action List

	Meeting Date	Name	Action	Delivered By
1	06/12/23	ZS	Service visits summary report to be shared with the CoG at its 13 March 2024 meeting.	13/03/2024
2	06/12/23	LS/People Directorate	Lesley Strong/People Directorate to provide Ngaire Cox with details of support provided to staff who undertake an academic degree course with a training college.	31/01/2024