

# MINUTES OF THE COUNCIL OF GOVERNORS MEETING

22 June 2022 14:00 – 16:15 MS Teams

Present		
Peter Horn (PH)	Trust Chair	
Mark Swyny (MS)	Non-Executive Director – items 1 to 6 only	
Mike Jennings (MJ)	Chief Financial Officer – items 5 and 6 only	
Donna Lamb (DL)	Chief Nurse – items 1 to 5 only	
David McGill (DMG)	Interim Lead Governor and Public Governor for Arun	
Andrew Baldwin (AB)	Appointed Governor – West Sussex County Council	
Ann Barlow (ABa)	Appointed Governor – Volunteers	
Pennie Ford (PF)	Appointed Governor – Clinical Commissioning Groups (CCGs) – joined at 2:30pm	
Elaine Foster-Page (EFP)	Appointed Governor – Volunteers – left at 3:15pm	
Rob Persey (RP)	Appointed Governor – Brighton & Hove City Council	
Janet Baah (JB)	Public Governor for High Weald Lewes Havens	
Lilian Bold (LB)	Public Governor for Horsham	
Dave Collins (DC)	Public Governor for Adur	
Craig Gershater (CG)	Public Governor for Chichester – left at 2:45pm	
Anne Jones (AJ)	Public Governor for Mid Sussex	
Matthew Stubbs (MSt)	Public Governor for High Weald Lewes Havens	
Alan Sutton (AS)	Public Governor for Chichester	
Harriet Clompus (HC)	Staff Governor – Doctors and Dentists – left at 3:20pm	
Ngaire Cox (NC)	Staff Governor – Nurses and Healthcare Assistants	
Shingai Ngwenya (SN)	Staff Governor – Nurses and Healthcare Assistants	
Jessica Poulton (JP)	Staff Governor – Allied Health Professionals	
Anita Sturdey (ASt)	Staff Governor – Support Staff – joined at 3:10pm and left at 3:30pm	
Rosie Gratwick (RG)	Fundraising Manager – Item 14 only	
Zoe Smith (ZS)	Trust Secretary	
Paul Somerville (PS)	Deputy Trust Secretary	
Apologies		
Grainne Saunders	Deputy Lead Governor and Appointed Governor – Children and Young People	
Eli Adie	Appointed Governor – Children and Young People	
Julie Fryatt	Appointed Governor – Higher Education	
Stella Benson	Public Governor for Brighton & Hove	
Sandra Daniells	Public Governor for Arun	
Zara Grant	Public Governor for Brighton & Hove	
Sue Morton	Public Governor for Horsham	
Tanya Petherick	Public Governor for Brighton & Hove	
Amber Villar	Public Governor for Crawley	
1. Welcome, apologies,	declarations of interest	



Peter Horn (PH) Trust Chair welcomed everyone to the meeting including Mark Swyny
(MS) Non-Executive Director (NED). Apologies for absence are noted on page one of
these minutes. No declarations of interest were declared for this meeting.

#### 2. Minutes of the Previous Meeting 16 March 2022

The minutes of the previous meeting were agreed as a true and accurate record.

# 3. Lead and Deputy Lead Governor Update

Interim Lead Governor David McGill (DMG) praised the democratic process that had been undertaken with the Lead Governor election. DMG said that it was important that the Council of Governors (CoG) were involved with the Integrated Care System (ICS). DMG reported that many Lead Governors at other NHS foundation trusts across Sussex were leaving, however, it was important that Lead Governors worked together in collaboration with the developing ICS. PH said that he and Alan McCarthy, Chair of University Hospitals Sussex NHS Foundation Trust (USHFT), had previously convened meetings with the Chairs and Lead Governors across Sussex, and it was suggested that these would be reconvened once new Lead Governors had been appointed.

Anne Jones (AJ) said from her own experience that patient involvement was not joined up and the voices of people were not being heard. PH acknowledged that the health and care system was under significant pressure. MS provided assurance that the issue about capacity was regularly discussed at the Trust Board and the Board asked itself what else the Trust could do to help support other parts of the system.

#### 4. Governor Feedback

PH welcomed feedback from the CoG.

Janet Baah (JB) reported that following a recent service visit to Time to Talk the team mentioned items that they had previously raised which had not yet been resolved. PH said that Lesley Strong, NED, had written a report following the visit which had been shared with the Board and that any issues raised would be followed up by the Executive Directors, and the NEDs would seek assurance. JB reported that through her work as a local councillor she had received four sources of positive feedback on community nursing.

Lilian Bold (LB) advised that the Clinical Commissioning Groups (CCGs) had held their last meetings before the ICS started on 1 July. LB said that the ICS had organised three launch events across the three places – Brighton and Hove, East and West Sussex. LB said that she would be joining a virtual meeting with Stephen Lightfoot, Chair Designate of the Sussex Integrated Care Board (ICB) and encouraged other governors to attend/contribute. PH asked Paul Somerville (PS) to circulate details to the CoG. LB congratulated the Trust's Hospital at Home service after it won an award in June at NHS England and NHS Improvement for the South East Region in supporting patients at home using health monitoring.

#### ACTION: PS to circulate information about the ICS and launch events to the CoG.

AJ said that there were no available packages of care in the community. LB said that as more care homes were due to be closed down this would create a bigger gap between supply and demand in the system.



PH reported that Beccy Cooper, Public Governor for Worthing, had stood down following her appointment as Leader of Worthing Council, after her party's local election win.

# 5. Performance Report – Month 12 (March 2022)

Mike Jennings (MJ) talked through the presentation that had been circulated with the papers. MJ reported that the Trust made a small surplus of £211,000 (in line with the forecast) for the financial year ended 31 March and that the final accounts would be submitted to NHS England on Friday 24 June with an unqualified audit opinion, which provided assurance that the Trust finances had a clean bill of health. The annual expenditure budget had grown to £300 million, up from £285 million. Managing the finances had been slightly easier as extra money was made available for the COVID-19 pandemic response. MJ thanked the continued due diligence of all teams in the stewardship of Trust resources.

Capital investment was at a record level - £13 million had been invested in assets including digital equipment to support the ambition to be a digital aspirant plus Trust. MJ reported that 2022-23 would be more challenging mainly due to very significant inflationary pressures that were not in the Trust's control. The Trust had initially forecast a deficit of £3.5 million. NHS England had subsequently agreed additional funding of £2.4 million. The Trust was now planning a break-even position through an additional £1.1 million in efficiency plans.

MJ reported that fewer people left the Trust during the pandemic. The Board was aware that the turnover rate was increasing and was focused on developing staff and ensuring that there were career paths. In comparison, MJ reported that the vacancy rate was lower than other local NHS providers. MJ reported that the sickness rate reflected the impact of the pandemic but was now recovering. Activity at the vaccination centres had dropped off and the Trust was planning for the autumn booster prior to winter.

Donna Lamb (DL) reported that the clinical quality performance for the year was very positive with favourable assurance. DL noted that the data presented was at a high level and smoothed out performance across individual services/teams. DL shared details of two new developments to strengthen analysis of patient safety data including improved understanding of themes from incident reporting and a rounded view of patient safety and safer staffing at intermediate care units (ICUs), the latter was due to be implemented shortly. DL said that the pareto chart helped the Trust to identify patient safety areas that had the highest number of incidents and therefore where most focus was required. For 2022-23 the Trust had developed a new approach that monitors all patient safety metrics for all of its ICUs onto a single page. It will provide a rounded view of each ICU's performance and will highlight common themes. DL said it would also look at the relationship between staffing on the ICUs and the experience of care for patients. PH added that the Trust continued to look at better ways to evaluate data.

Mark Swyny (MS) said that it was a tough year financially and the Trust would continue to influence where it can to create efficiencies, without impacting patient and staff experience.

JB asked what was causing the turnover of staff and what actions were the Trust taking to mitigate this. MJ said that there were some common themes from exit interviews



where that the Trust had an ageing workforce and many staff were retiring, and that a significant number of staff were moving for career/professional development. MJ said that the new People Strategy was focused on providing learning and development opportunities through a learning academy. MS added that the Trust had introduced a People Committee that was committed to building a workforce fit for the future with the aim to build an improved pipeline of new staff. The Trust was committed to creative ways to attract new people to start their career in the NHS. Matthew Stubbs (MS) asked if the turnover and vacancies data included all staff or just staff employed by the Trust. MJ said that the majority of staff were employed by the Trust, however, there were small areas where staff were employed by partners. MJ provided assurance that discussion with partners with regard to turnover and vacancies rates took place. Craig Gershater (CG) said that he was very interested to know how this performance data would be modelled to derive future objectives/targets. MJ agreed to speak with CG outside of the meeting. Ngiare Cox (NC) posted information via the MS Teams chat about an ICS launch event on 1 July taking place in Littlehampton.

### 6. Trust Strategic Goals

MJ said that the presentation had not been circulated with the papers in order that the CoG could receive the latest update in relation to the engagement currently taking place. It was agreed that the presentation would be circulated after the meeting. MJ said that the strategy refresh focused on three life stage frameworks: Starting Well, Living Well and Ageing Well that would help to translate the Trust's vision and strategic goals into clear plans for service delivery and continuous improvement. The Trust would ensure alignment with the ICS Integrated Care Strategy as it develops. MJ said that the frameworks would set a clear direction for service provision, would identify and prioritise key actions, identify key risks and interdependencies and demonstrate the benefits for patients, staff and system partners. The frameworks would be informed by an evidence-based understanding of population needs and current services through current engagement with staff, patient representatives and governors, whilst working with system partners and the ICS. This would lead to the development of clear and deliverable plans for transformation. MJ talked through the progress of the current engagement with an end date of September for the Board to sign off the strategy. The CoG were reminded about the opportunity to attend the Staff and Patient Engagement Workshop on 6 July in Hove to provide additional input into the life stages. MJ said that key themes from governor engagement on Tuesday 7 June workshop were very similar to wider feedback from additional engagement that had took place. Standardisation of services was not about a one-size-fits-all approach but ensuring equal opportunity to access of services.

Rob Persey (RP) said that it was important that the Trust Strategy dovetailed the Health and Wellbeing Strategies of the three places and the ICS Strategy that was due to launch in December 2022. MJ said that the Trust was sharing intelligence with the ICS. Anne Jones (AJ) praised the work of the Trust in the development of the strategy and working in collaboration as a Sussex system. JB added that the strategy was transformational and would make a big impact. MS gave a perspective from the Board. There had been a collaborative process with the Board, that due to timings there would be a challenge to align to the ICS strategy and there was a need to provide clarity on what difference the strategy would make to patients and staff. There had been good Board discussion on the strategy and data would be used to demonstrate delivery of the strategic goals. Andrew Baldwin (AB) said the strategy was positive and sought assurance that the system was doing everything it could to support people's mental



health following a teenage suicide in Horsham. MJ said that Sussex Partnership NHS Foundation Trust (SPFT) was the main provider of mental health services but the system was working collaboratively to support people's mental health. Harriet Clompus (HC) said that the Trust needed a joined-up approach with SPFT as the majority of mental health support through Child and Adolescent Mental Health Services (CAMHS) was difficult to access unless young people were at crisis point. There were an ever-increasing number coming through and this was reflective across the country.

ACTION: Paul Somerville (PS) to share the Life Stages Framework presentation with the CoG after the meeting.

#### 7. Approval of appointment of Interim Chief Executive

PH said on 13 June a briefing was held for the CoG, followed by a communication, that Siobhan Melia (SM), Chief Executive, had agreed to take on a secondment as Interim Chief Executive at South-East Coast Ambulance Service (SECAmb) until 31 March 2023. The paper outlined the process that the NEDs had followed at a Board Nomination and Remuneration Committee meeting and had made the recommendation to appoint MJ as Interim Chief Executive effective 4 July. One of the CoG's duties as described within the Trust's Constitution is to consider the approval of a new Chief Executive.

DECISION: The CoG approved the appointment of Mike Jennings as Interim Chief Executive for the duration of the secondment of the substantive Chief Executive (4 July 2022 to 31 March 2023).

On behalf of the CoG, DMG congratulated MJ on the appointment and provided best wishes to SM.

#### 8. Approval of appointment of Lead Governor

PH said that 21 out of 27 governors had voted by the deadline and that Alan Sutton (AS), Public Governor for Chichester had a clear majority, and that it was the decision of the CoG to appoint AS to the role of Lead Governor.

DECISION: The CoG approved the appointment of Alan Sutton as Lead Governor for a two-year term effective 1 July 2022 to 30 June 2024.

AS said that he was delighted and hoped to repay CoGs confidence and paid tribute to the two fellow candidates who stood. AS said that DMG's contribution as Interim Lead Governor over the past few months was outstanding. He was looking forward to the challenge, working more collaboratively across the ICS, building relationships with governors and members of the Board, and listening to views from members and the wider public.

PH said that as DMG's term ended on 7 September as Public Governor for Arun and that he was standing down, this would be his last CoG meeting. PH said that he joined the Trust as Chair in June 2018 when DMG had been Lead Governor for just four months. This was PH's first time as Chair of a NHS foundation trust and therefore the first time that he had worked with a CoG. PH thanked DMG for his support and providing challenge when it was needed. DMG responded to the Trust's ask in March to again take on the role as Interim Lead Governor whilst a successor was appointed. On behalf of the Board, PH thanked DMG for his work and for ensuring the smooth onboarding of the new Lead Governor.



0	Feedback on NHS England consultation on key governance guidance – an
Э.	Addendum for Governors

PS thanked governors who had provided feedback on the consultation on key governance guidance – an Addendum for Governors with a CoG deadline of 22 June. PS said that the Trust Board were reviewing all consultation documents in relation to the draft Code of Governance 2022 and would be submitting collective feedback by the national deadline of Friday 1 July.

# 10. Membership of Council of Governors Sub Committees/Groups

PH said that this paper had not been circulated with the pack, subject to the approval of the appointment of the Lead Governor, however, it was shared at the meeting. It was agreed that PS would email this paper to the CoG after the meeting.

PH said that following discussion at the Governor Steering Group on 3 May, a communication was sent out to all governors with an overview of opportunities to join various committees and groups related to the work of the CoG. It set out the following for each committee/group: current membership, current vacancies, purpose and dates and times of future meetings. All governors were encouraged to submit their request to the Deputy Trust Secretary by Monday 30 May. All requests were reviewed by the Trust Chair, Interim Lead Governor and the Deputy Trust Secretary.

The paper set out the proposed changes. The revised membership of CoG committees/subgroups was approved by the CoG. The CoG noted governors who would join the Governor Membership Group and Trust-led Patient Experience Group.

DECISION: The CoG approved the revised membership of CoG committees/subgroups and noted governors who would join the Governor Membership Group and Trust-led Patient Experience Group.

ACTION: PS to email the paper on the Membership of Council of Governors Sub Committees/Groups to the CoG after the meeting.

#### 11. Future Arrangements for Council of Governors Committees/Groups Meetings

PH said that the paper provided a recommendation following the Governor Steering Group meeting on 3 May in relation to future arrangements of meetings of the CoG following the relaxation of national COVID-19 social distancing measures. It had been based on feedback from governors with the aim to provide some face-to-face opportunities whilst considering best use of people's time and the use of resources. The recommendation was based on current national guidance and was subject to change should national social distancing measures be re-introduced. AS said that recent face-to-face engagement opportunities had been effective in building relationships between governors. PH said that a commitment had been made to regularly review these arrangements at each Governor Steering Group and CoG meeting. The CoG supported the regular review and approved the recommendation.

DECISION: The CoG approved the future arrangements for all related meetings of the CoG.

# 12. Report of the Council of Governors Nominations and Remuneration Committee (CoG NRC) – Thursday 16 June

PH said that the report from the CoG NRC set out the following recommendations for CoG approval:



- To approve the annual reappointment of NED David Parfitt. Provision B.7.1 of the NHS Foundation Trust Code of Governance states that where, in exceptional circumstances, NEDs serve longer than six years this should be subject to annual reappointment.
- 2. To ratify minor amends to the CoG NRC Terms of Reference.

DECISION: The CoG approved the above CoG NRC recommendations.

### 13. Update from Governor sub-committees including Terms of Reference

PH referred the CoG to the papers that had been circulated including:

- The minutes of the Governor Steering Group on 3 May and the updated Terms of Reference for ratification.
- The notes from the Staff Governor Group on 4 May.

DECISION: The CoG noted the minutes and ratified the Governor Steering Group's Terms of Reference.

#### 14. Update from the Trust's Charity: Sussex Community NHS Charity

Rosie Gratwick (RG) invited feedback and questions from the CoG following earlier release of the video presentation about the Trust's charity. It provided an overview of what the charity does and how the CoG could get involved, and to consider becoming an ambassador. Feedback was overwhelmingly positive. AS asked what else governors could do. RG said that governors could signpost people to the charity and could provide them with leaflets/resources to hand out to people that they were engaging with. The CoG recommended that because the video presentation was generic in its approach that it could be shared more widely via social media. JB suggested that charity materials could be sent to members of the Governor Membership Group and to have these at events when promoting Trust membership. PH said that in most cases a small amount of money raised made a huge difference to patient and staff experience. PS suggested that the CoG might like to do a team fundraiser to support team bonding and to raise the profile of the CoG both to staff and externally. RB said that the charity could align to the ICS strategy to focus on preventative measures and to build relationships with other major charities. RG added that partnerships were being built with other health organisations. PH thanked RG for updating the CoG on the work of the charity. PS encouraged the CoG to sign up to receive the latest news from the charity including upcoming fundraising activities from the charity webpage.

# 15. | Membership Engagement Strategy – Update on Year Two Plan

PS provided an update on the delivery of the Year Two Plan (August 2021 to May 2022), including:

- 535 new members had been recruited.
- There were now 210 new members who wanted to be involved with the Trust.
- 34 members had died or left.
- The Governor Membership Group formed in June 2021 had recruited the significant number of new members, primarily undertaken at the mass vaccination sites in Brighton and Crawley, as well as the membership stall at Lewes. The Group was temporarily suspended in January 2022 due to the raise of the omicron variant, however, the Group was expected to be restarted from August following approval of the Group's updated membership.
- Other membership opportunities over the summer months included Brighton Pride, Bognor and Horsham Hospital Fetes, and other community events recommended and supported by governors.



• The report highlighted priority demographics to grow the membership to be more representative of its local population.

PS thanked the Governor Membership Group for their continued proactive work. PH acknowledged its work to date.

#### 16. Plans for Wednesday 21 September

PS confirmed arrangements for the afternoon as follows:

- A private Joint Meeting of the Board and CoG. To receive the Independent Auditor's Report to the CoG on the Annual Report and Accounts 2021-22.
- Annual Members' Meeting. A presentation from the Interim Chief Executive, Interim Chief Financial Officer and Chief Nurse providing a summary of the year from the Annual Report and Accounts and Quality Account 2021-22, followed by an annual update from the Lead Governor. The meeting will conclude with a presentation about the Trust's new three-year strategy, prior to sign off at the Trust Board on Thursday 29 September.

#### 17. Any other business

JB made reference to the weekly message about the higher cost of living and the impact that this was having on staff. PH said that MJ had led a response across the Sussex system to increase the mileage rate reclaimable through expenses by an extra five pence per mile, to help with rising fuel costs. This was effective from 1 July to 30 September. AJ said that more nursing homes were closing that this would apply additional pressure on the Trust with regard to discharging patients.

The meeting closed at 16:15.

#### 18. Date of next meeting

Wednesday 21 September 2022 14:00 to 17:15 to be held in the Shaftesbury Room at Worthing Leisure Centre, Shaftesbury Avenue, Goring-by-Sea, Worthing BN12 4ET.

#### **Action List**

	Meeting Date	Name	Action	Delivered By
1	22/06/22	PS	To circulate information about the ICS and launch events to the CoG.	ASAP
2	22/06/22	PS	To share the Life Stages Framework presentation with the CoG after the meeting.	ASAP
3	22/06/22	PS	To email the paper on the Membership of Council of Governors Sub Committees/Groups to the CoG after the meeting.	ASAP