

# Council of Governors

27 April 2023 | 1.00pm | Microsoft Teams

## Agenda

No	Item	Time	Encl.	Purpose	Presenter
1.	Chair and quorum	1.00pm	Verbal	Noting	P O'Neill
2.	Apologies for absence	1.01pm	Verbal	Noting	P O'Neill
3.	Declaration of interests	1.02pm	Verbal	Noting	P O'Neill
4.	Minutes of the previous meeting held on 26 January 2023	1.03pm	✓	Approval	P O'Neill
5.	Matters arising and action log update	1.04pm	✓	Noting	P O'Neill
6.	Chairman and Chief Executive's opening remarks	1.05pm	Verbal	Noting	P O'Neill/ J Wood
7.	Update from Subgroup Chairs	1.20pm	Verbal	Noting	J Miller/ P Spadlo
<b>8. STRATEGY AND PERFORMANCE</b>					
8.1	Workforce and OD Strategy Update	1.35pm	Pres	Noting	K Swindley
8.2	New Hospitals Programme update	1.55pm	Verbal	Noting	J Wood
<b>9. GOVERNANCE AND COMPLIANCE</b>					
9.1	Non-Executive Director update – Education, Training and Research Committee Chair	2.00pm	Pres	Noting	P O'Neill
9.2	Feedback on Chair and Non-Executive Directors' appraisals 2022/23	2.10pm	Verbal	Noting	P O'Neill
9.3	Re-appointment of Non-Executive Director	2.25pm	✓	Approval	J Foote
9.4	Meeting arrangements	2.35pm	Verbal	Discussion	P O'Neill
<b>10. ITEMS FOR INFORMATION (taken as read)</b>					
10.1	Governor Elections 2023		✓		
10.2	Appointment of Lead Governor		✓		
10.3	Appointment of Nominations Committee		✓		

No	Item	Time	Encl.	Purpose	Presenter
10.4	Governor Opportunities and Activities Summary		✓		
10.5	Governor Issues Report		✓		
10.6	<b>Minutes of Governor Subgroups:</b> (a) Care and Safety Subgroup – 16 January 2023 (b) Membership Subgroup – 10 October 2022		✓		
10.7	Date, time and venue of next meeting: <i>25 July 2023, 10.00am, Microsoft Teams</i>	2.50pm	Verbal	Noting	P O'Neill
<b>11. REVIEW OF MEETING PERFORMANCE</b>					
11.1	Discussion on how the meeting in public has been conducted	2.51pm	Verbal	Discussion	All
<b>12. RESOLUTION TO REMOVE PRESS AND PUBLIC</b>					
12.1	Resolution to exclude members of the press and public	2.55pm	Verbal	Approval	P O'Neill

# Council of Governors

## Public Meeting

26 January 2023 | 1.00pm | Microsoft Teams

PRESENT	DESIGNATION	26/4/22	28/7/22	3/11/22	26/1/23
<b>CHAIRMAN AND GOVERNORS</b>					
Professor P O'Neill (Chair)	Interim Chair	-	P	P	P
Professor E Adia	Chairman	P	P		
Dr Keith Ackers	Public Governor	P	P	P	P
Will Adams	Appointed Governor (Local Authority)	A	P	P	P
Pav Akhtar	Public Governor	P	P	P	P
Takhsin Akhtar	Public Governor	P	P	P	A
Rebecca Allcock	Staff Governor	P	A	P	P
Peter Askew	Public Governor	P	A	P	P
Sean Barnes	Public Governor	P	P	A	P
Alistair Bradley	Appointed Governor (Local Authority)	P	P	P	P
Sheila Brennan	Public Governor	P	P	P	P
Paul Brooks	Public Governor	P	P		
Anneen Carlisle	Staff Governor	P	A	A	A
David Cook	Public Governor	P	A	A	
Kristinna Counsell	Public Governor	P	A	A	A
Dr Margaret France	Public Governor	P	P	P	P
Steve Heywood	Public Governor	P	P	P	P
Waqas Khan	Staff Governor	A	A		
Lynne Lynch	Public Governor	P	P	A	P
Janet Miller	Public Governor	P	P	P	P
Jacinta Nwachukwu	Appointed Governor (Universities)	A	A		
Eddie Pope	Appointed Governor (Local Authority)	A	A	P	P
Frank Robinson	Public Governor	P	P	P	P
Suleman Sarwar	Appointed Governor (Local Authority)	P	A	A	P
Anne Simpson	Public Governor	A	P	P	A
Mike Simpson	Public Governor	P	P	P	P
Piotr Spadlo	Staff Governor	P	P	P	P
David Watson	Public Governor	P	P	P	A
Paul Wharton-Hardman	Public Governor	P	P	P	P
<b>IN ATTENDANCE</b>					
Karen Brewin ( <i>minutes</i> )	Associate Company Secretary	P	P	P	P
Ailsa Brotherton	Director of Continuous Improvement	-	-	-	-
Faith Button	Chief Operating Officer	-	-	P	-
Victoria Crokken	Non-Executive Director	P	P	P	P
Sarah Cullen	Chief Nursing, Midwifery and AHP Officer	-	P	P	-
Stephen Dobson	Chief Information Officer	-	-	-	-
Gary Doherty	Director of Strategy and Planning	-	P	P	-
Naomi Duggan	Director of Communications	P	P	-	-
Jennifer Foote	Company Secretary		P	P	P
Kevin McGee	Chief Executive	P	P	-	P
Ann Pennell	Non-Executive Director	P	P	-	P
Dr Gerry Skales	Chief Medical Officer	-	-	-	-
Kate Smyth	Non-Executive Director	P	P	P	-
Karen Swindley	Chief People Officer	P	P	-	P

Tim Watkinson	Non-Executive Director	P	-	P	P
Michael Wearden	Associate Non-Executive Director	-	-	P	P
Jim Whitaker	Non-Executive Director	P	P	P	-
Tricia Whiteside	Non-Executive Director	P	P	P	-
Peter Wilson	Associate Non-Executive Director		P	-	-
Jonathan Wood	Deputy Chief Executive/Chief Finance Officer	-	-	-	-
<b>P</b> – present   <b>A</b> – apologies   <b>D</b> – Deputy <b>Quorum:</b> 9 members must be present of which at least 1 must be a Public Governor; 1 must be a Staff Governor; and 1 must be an Appointed Governor <b>Chair</b> – Professor P O'Neill took over as Interim Chair with effect from 1 September 2022 following the departure of Professor E Adia					

**Observers:** Jo Leeming, Corporate Affairs Officer  
Jo Wiseman, Corporate Affairs Officer

### 1/23 Chair and quorum

Having noted that due notice of the meeting had been given to each member and that a quorum was present the meeting was declared duly convened and constituted.

### 2/23 Apologies for absence

Apologies for absence were received and recorded in the attendance matrix.

### 3/23 Declaration of interests

There were no conflicts of interest declared by governors in respect of the business to be transacted during the meeting.

### 4/23 Minutes of the previous meeting

The minutes of the meeting held on 3 November 2022 were approved as a true and accurate record subject to noting the items highlighted at the meeting during the Care and Safety Subgroup update. It was noted the Deputy Director of Nursing, Midwifery and AHPs had confirmed additional training and education was being undertaken linked to objectives and appraisal in respect of responding to patient concerns; and staff within the emergency department at Chorley would be released from their shifts on time with a relief shift being introduced to allow that to happen.

### 5/23 Matters arising and action log

A copy of the action log had been circulated and all actions had been completed.

### 6/23 Chair's and Chief Executive's opening remarks

The Chair referred to the significant demands being placed on the Trust and the system in addition to the pressures linked to ongoing industrial action, and recognised the difficulties faced by both hospital and community staff. Thanks were extended to Executive Directors, teams, and all members of staff for their resilience and hard work particularly during Christmas and into the new year.

The Chair had attended meetings of the Provider Collaboration Board which was now a Joint Committee making decisions on behalf of Trusts in Lancashire and South Cumbria. The arrangements would provide resilience for the system and there were some positive examples of how this had worked over the winter period.

Reference was made to the Non-Executive Directors' programme which was aimed at promoting inclusivity and widening diversity at Board level. The first Shadow Board meeting had been held and the Chair had met with participants (as Chair of the Shadow Board) noting their strong commitment to the programme and the wide range of lived experiences of those involved.

The Chair had written to governors prior to Christmas outlining thoughts around training and development and a revised development programme would be produced. It would be important to have a coherent development plan that met the needs of governors and the Board to ensure there was a single strategic vision to help the Trust be successful. The Chair continued to meet governors on a one-to-one basis and the sessions were providing helpful insights. Thanks were extended to governors for the time they had dedicated to those meetings.

The Chair's interim term of office would finish in May and the process for appointing a replacement was under discussion. It would be important to have stable leadership particularly during the current period of change and a significant part of that would be the appointment of a permanent Chair. The Chief Executive echoed the comments noting the Chair's appointment would be a crucial decision over the coming months.

As mentioned earlier, the winter period had been incredibly difficult particularly from the end of December up to the second week in January with challenges around handover times, long waits in the emergency department, and occupancy levels. At times the Trust had been above 100% occupancy and, on some days, around 50-60 patients were in the emergency department with a decision to admit although a bed could not be found in the system. The Chief Executive extended his thanks to clinical and operational teams noting that unprecedented decisions had needed to be taken with the introduction of additional beds on wards to keep the system safe and ambulances moving. Staff within the Trust had looked after patients safely, with dignity and respect, and the Trust was almost at a position where it could de-escalate additional beds which had only been made possible due to the hard work of clinical and operational teams. There had been some long ambulance handover delays although a 15-20minute handover standard had been achieved on most occasions. It was particularly difficult for the Trust when patients were handed over as some needed to be placed on corridors due to the physicality of the estate therefore there was a need to look at managing that position, such as opening additional escalation areas. The Trust was not yet out of winter and there would be a difficult operational period going into February which included half-term holidays when traditionally there was an increase in activity and staffing levels reduced. For the moment, there was a reduction in demand in the emergency department and the team was closely monitoring the position.

Industrial action continued and a range of days had been identified when nurses, ambulance staff and physiotherapy staff would take strike action. The Trust was grateful for the approach taken and the close working arrangements with unions to agree derogations and keep the system safe. The internal Staff Side representatives were also thanked for the preparatory work they had undertaken alongside the Trust. It was noted that junior doctors in the NHS were currently balloting for continuous strike action over 72hours and there was concern about the impact such action would have on activity. To date, the Trust had managed to maintain activity although three consecutive days of strike action by junior doctors would have serious implications for activity and flow. It was noted the Trust had been pro-active in terms of media messages to ensure

staff were aware that whilst the Trust was apolitical it would do everything it could to support the right of staff to strike and ensure the most up-to-date information was communicated to the public and their expectations were managed. There was a need to ensure an early resolution as the longer strike action took place the more risk was being put into the system.

It was noted The One Show had produced a positive segment regarding Finney House (the Community Healthcare Hub) which was due to be aired on BBC1 shortly and related to how flow was compromised in hospital and how the facility was supporting that.

There was a significant drive to eliminate 78-week waiters by the end of March 2023 and work was continuing on elective recovery and cancer restoration. However, due to the tertiary specialty services delivered by the Trust there would be pressure to deliver certain activity for some patients with complex needs.

The whole of the NHS was currently planning for next year in terms of the contracting round. Planning guidance had been received just prior to Christmas setting out the expectations for restoration and the financial perspective for 2023/24. Over the coming weeks, discussions would be held on the challenging targets to be achieved including delivery of elective and recovery activity to ensure waiting lists were reduced. Work was continuing to identify what that activity would look like for all organisations and further information was awaited on the restoration targets that would need to be achieved although the assumption was that organisations would be expected to deliver efficiencies in a more productive way as additional funding would not be available. Mutual aid would be an important part of delivering activity targets and there would be a need to incentivise and share patient treatment lists and manage waiting lists to determine how capacity was used on a system-wide basis.

In response to a question regarding why demand in the emergency department had reduced, it was confirmed there had been weeks when activity had been higher and on the days of the ambulance strikes it had been anticipated that the number of patients presenting directly at the emergency department would increase. However, that did not happen, figures reduced and then a bounce back effect was seen. It was not clear why the demand was lower and may relate to people who did not need to be treated in an emergency setting however things may change and the position was being closely monitored.

A query was raised regarding whether the Trust could influence spending plans following receipt of national funding for social care and whether the funding could be carried forward to support winter 2023. It was noted there were strict guidelines around national funding allocations and a requirement for local authorities to ensure funds were spent by the end of the fiscal year. It was also noted the Trust and local authority colleagues were working closely to jointly agree the actions that would make the biggest impact as any additional funding into the system should not be used to open acute beds and should be directed to community, domiciliary and social care settings.

## **7/23 Update from Chair of each Subgroup**

The Chairs of the Care and Safety and Membership Subgroups summarised the topics discussed at recent meetings and the following points were noted:

(a) *Care and Safety Subgroup (CaSS)*

The Subgroup met on 24 November 2022 and 16 January 2023 and received the standing update reports presented at each meeting on patient experience and estates. In addition, the Subgroup received presentations on the Alcidion system (replacement for the Portering Trac tool) and a presentation on the work of the Specialist Mobility Rehabilitation Centre. Concerns were raised at the meetings regarding the lack of bedside TVs and a day room facility on Cuerden Ward; access to hot beverages 24/7; issues around opening times of the mortuary at Chorley; waiting facilities for prisoners attending hospital; and the PALS signage and opening times at Chorley.

In terms of the concerns raised at the CaSS meetings, the Chair and Chief Executive recognised the operational nature of the issues which had been raised previously and confirmed they had already been picked up with the appropriate departments.

(b) *Membership Subgroup*

At the meeting on 10 October the Subgroup discussed progress with the membership strategy plan. At a separate meeting governors worked on producing a refreshed banner to help promote the membership at events and thanked the Communications team for their input and assistance with design. Discussions had also been held with the Communications team regarding the possibility of a footballer from Preston North End being involved in producing a promotional video for membership. The meeting scheduled for 5 December had been stood down. The Subgroup Chair and Deputy Chair had met with the Chair and Company Secretary to discuss support for membership events and how the membership strategy could be implemented, and feedback on the points raised would be provided in due course. The next meeting would be held on 6 February and all governors were welcome to attend.

Discussion was held regarding the forthcoming Health Mela on 18 March 2023 which was co-ordinated by the National Forum for Health and Wellbeing. The primary focus of the event was to increase health awareness of the population for prevention of various communicable and non-communicable diseases, with health professionals available to provide information and advice on a comprehensive range of health topics. There was also an invitation for visitors to the Health Mela to take a health MOT, including height, weight, blood pressure and cholesterol checks along with personal counselling from health professionals. It was noted that governors had historically attended the Health Mela to try to enrol new members. The Chief Executive recognised the importance of the Health Mela and confirmed that many departments and health professionals would be attending in March, as in previous years, to talk to the local population and communities which was the right approach to take particularly as the event was heavily focused on the health of ethnic minority communities. The Chair referred to the constructive conversation that had been held with the Membership Subgroup Chair and Deputy Chair so there was a common understanding on the role of governors. Consideration would be given to the issues raised and feedback would be provided to the Membership Subgroup Chair and Deputy Chair.

**8/23 Equality and Diversity Annual Update**

The report provided an annual update against the principles and aims of the Equality, Diversity and Inclusion (EDI) Strategy 2021-24 and was supplemented by a slide presentation delivered by the Chief People Officer.

The presentation outlined the actions that had been completed during the last 12 months against the five principles set out in the strategy. The report highlighted achievements, the measurable impact, performance, and current benchmarks reported in other mandated reports such as the Workforce Race Equality Standard (WRES), Workforce Disability Equality Standard, National Staff Survey and Gender Pay Gap report, alongside other intervention-level evaluation measures.

The report and presentation also described the future focus to ensure the Trust continued to deliver the strategic aims, which included increasing the quality of data held for patients and colleagues to provide an accurate understanding of health inequalities, representation, and experience in the Trust. The Trust would also continue delivering systemic actions which helped to ensure EDI was embedded in all aspects of its work.

The Council welcomed the detailed overview of actions taken against each of the five strategic aims. In respect of the presentation, there was a request that a standardised approach be taken to how arrows were used to identify the direction of travel, such as arrows pointing right should reflect a better position and those pointing left showed a poorer or deteriorating position. The point was noted by the Chief People Officer and would be cascaded to the appropriate team members.

Reference was made to a recent newspaper article reporting the ratio of NHS workers facing discrimination and a question was asked about whether the Trust was seeing levels comparable to the overall NHS picture. The Chief People Officer advised that the Trust had compared favourably against national benchmarks as detailed within the WRES standards recently published by the Trust. However, there was some disproportionality in terms of race although not to the degree mentioned in the newspaper article. It was noted the Trust published an action plan detailing how it would reduce the experiences of discrimination for all groups with protected characteristics. As Chair of the Workforce Committee, Non-Executive Director J Whitaker confirmed he worked closely with the Chief People Officer and where there were occasional hotspots or issues had been identified those matters were taken through the Workforce Committee. Within that forum the Committee would undertake deep dives, part of which included inviting service heads to report on the issues and progress with improvement actions, so the Committee was well-sighted on such matters.

## **9/23 Standing Orders for Council and Code of Conduct for Governors**

Following approval of the Constitution at the November Council meeting, the Standing Orders for Council and Code of Conduct for Governors had now been reviewed with advice from the Trust's solicitors (Hempsons) to ensure consistency with the new version of the Constitution. The revisions also received input, scrutiny and oversight from a working group of governors and thanks were extended for the time governors had dedicated to scrutinising the lengthy Standing Orders.

**The Council RESOLVED to approve the revised Standing Orders for Council and Code of Conduct for Governors as presented.**

## **10/23 Non-Executive Director Appraisals 2023**

The report set out the Chair appraisal framework as directed by NHS England, together with a Non-Executive Director appraisal framework which reflected the same methodology and would be adopted for all 2023 Non-Executive Director appraisals.



The Chair referred to previous meetings where it had been confirmed that work would be completed with the Company Secretary to ensure appraisals were undertaken as near as possible to the end of the financial year and objectives were set for the forthcoming year.

It was explained that the Trust was obliged to abide by the framework developed by NHS England and the plans for the 2022/23 appraisals took account of Council's previous comments regarding new governors having limited or no knowledge of the person about which they were being invited to provide feedback. It was confirmed that the 360 feedback surveys would be launched in March which would provide all serving governors the opportunity to participate in providing feedback as they would have had a minimum of a year's experience in the role of governor.

Attention was drawn to a paragraph in the framework which advised it was possible year-on-year that a number of governors involved in the process may vary although it was recognised that all governors being involved in 360 feedback was positive as it allowed the Council to hold Non-Executive Directors to account. The Chair agreed with the point noting that whilst holding the interim Chair role then all serving governors would be invited to participate in the survey, rather than a limited selection, therefore the Trust would be going beyond compliance and be as inclusive as possible.

**The Council noted the framework to be used for the 2022/23 Chair and Non-Executive Director appraisals.**

#### **11/23 Non-Executive Director Update – Safety and Quality Committee Chair**

A Pennell provided an overview of her role and responsibilities as a Non-Executive Director and member of the Board of Directors and the duties undertaken as Non-Executive Director Lead for Ockenden. A summary was also provided of her role as Chair of the Safety and Quality Committee, including the composition of the Committee, its purpose, what a typical agenda looked like, and recent issues that had been considered. Some personal reflections were also included on current strategies and work that would be required looking to the future. The slide presentation would be circulated to governors following the meeting.

In response to a question regarding the 21 midwives who had been recruited during the year, it was confirmed that the vast majority were newly qualified midwives. It was also noted that an appointment had been made to the Divisional Midwifery Director role with the permanent appointment of Emma Ashton.

#### **12/23 Non-Executive Director Update – Workforce Committee Chair**

J Whitaker provided an overview of his role and responsibilities as a Non-Executive Director and member of the Board of Directors. In addition, an overview was provided of his role and responsibilities as Chair of the Workforce Committee, including a sample of items discussed and the assurances provided in respect of achievement of metrics aligned to the Trust's strategy, Our Big Plan. A screenshot of the risk aligned to the Committee was also included and a list of recent issues and hot topics discussed by the Committee. A copy of the slide presentation would be circulated to Governors following the meeting.

Reference was made to reducing violence and aggression towards staff and clarification was requested on whether the data included incidences of violence towards volunteers particularly in meet and greet areas. The Chief People Officer confirmed that volunteer data would be included if incidences had been reported on the Datix system and it was suggested it would be helpful going forward for the dashboard presented in performance reports to separate staff and volunteer incidences. The Chief People Officer noted the point and would progress the arrangements with the appropriate team.

### **13/23 Governor Elections 2023**

The report provided a high-level update to the Council on progress with arrangements for the 2023 Governor Elections which launched on 9 January 2023. Two online engagement sessions had been held, led by the Chair, and thanks were extended to those governors who attended the sessions, particularly Lynne Lynch and Steve Heywood who provided an outline of what the role of a governor entailed. Since the engagement sessions, it was pleasing to note there had been positive approaches from some of those who were considering standing for public election and it was hoped to be able to elect several governors to the vacant public and staff seats.

It was noted that the link to the website contained on the final page of the report was incorrect and took the viewer to the 2022 Governor Elections and the covering letter from the Chair was not included in the nomination pack as had been the case for previous elections. The Company Secretary explained that the error on the final page would be amended in the final version of the report. With regards to the letter, it was confirmed the Chair had not been overlooked and it was more a matter of circumstance relating to the interim nature of the role when the Trust was required to activate the elections at a point in time.

**The Council noted the update provided on the process for the 2023 Governor Elections.**

### **14/23 Council Development Plan 2021/22 Update**

The report provided a further update on the status of outstanding actions on the Council Development Plan since last reported to the Council at the November meeting. It was noted that the Plan would be closely reviewed once a permanent Chair had been appointed as they would have their own thoughts on development which may warrant a broader discussion at a future Council meeting.

Reference was made to a couple of issues that had been marked green although were not in place, i.e. inclusion of pen portraits on the new intranet site; and governor photo boards would be maintained, although both matters had not been progressed. It was noted that feedback on both those issues would be provided to the Communications team. In addition, reference was made to the final point relating to producing a separate corporate calendar for governors and it was noted the proposal came about as the broader corporate and governor calendar was causing some confusion for governors in terms of what meetings and sessions they needed to attend. Finally, some governors felt there was a need for them to have greater influence on the items to be included on Council agendas. Council was thanked for its feedback, and it was confirmed the Standing Orders for Governors identified the process for how items for Council meetings were included on the agenda.

It was recognised the Plan had been produced some time ago and that the new permanent Chair would have their own views about development moving forward, and a question was raised about whether there was a cycle for reviewing the development plan. The Company Secretary was unsure whether there was a statutory requirement for review of development plans although agreed it was a timely point which would be brought forward when the permanent Chair had been appointed.

**The Council received and noted the status of the Council Development Plan.**

**15/23 Items for information**

The following reports were circulated with the agenda and the contents noted for information:

- (i) Governor opportunities and activities summary
- (ii) Governor issues report
- (iii) Minutes of Governor Subgroups:
  - Care and Safety Subgroup – 10 October and 24 November 2022
  - Membership Subgroup (*the October minutes were not available as the December meeting had been stood down*)
  - Chairs, Deputy Chairs and Lead Governor – 3 October 2022

**16/23 Date, time and venue of next meeting**

The next meeting of the Council of Governors will be held on Thursday, 27 April 2023 at 1.00pm using MS Teams.

**17/23 Reflections on how the meeting had been conducted**

No reflections were put forward on how the meeting had been conducted.

The Chair extended his personal thanks to those governors who would be stepping down or not standing for re-election. It was noted that the Chair would be writing personally on behalf of the Council to thank those governors for the work they had undertaken during their terms of office.

**18/23 Resolution to exclude press and public**

**RESOLVED THAT press and public be excluded from the meeting.**

## Action log: Council of Governors (part I) – 26 January 2023

*There are no outstanding actions from previous meetings.*

### **COMPLETED ACTIONS** (for information)

No	Min. ref.	Meeting date	Action and narrative	Owner	Deadline	Update
1.	11/23 and 12/23	26 Jan 2023	<i>Non-Executive Director presentations</i> – the slide presentations delivered by the Safety and Quality and Workforce Committee Chairs to be circulated to governors.	K Brewin	27 Apr 2023	<b>Completed</b> <b>Update for 27 April 2023</b> – slides emailed to governors (6 February 2023).
2.	13/23	26 Jan 2023	<i>Governors Election 2023</i> – the link to the website on the final page of the report to be amended to connect to the 2023 webpage.	K Brewin	27 Jan 2023	<b>Completed</b> <b>Update for 27 April 2023</b> – report amended, and a refreshed meeting bundle published on the Trust website.



# Council of Governors Report

## Re-appointment of Non-Executive Director

<b>Report to:</b>	Council of Governors	<b>Date:</b>	27 April 2023
<b>Report of:</b>	Company Secretary	<b>Prepared by:</b>	K Brewin

### Purpose of Report

<b>For approval</b>	<input checked="" type="checkbox"/>	<b>For noting</b>	<input type="checkbox"/>	<b>For discussion</b>	<input type="checkbox"/>	<b>For information</b>	<input type="checkbox"/>
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### Executive Summary:

Under Schedule 7, paragraph 17(1) of the National Health Service Act 2006, it is for the Council of Governors at a general meeting to appoint, re-appoint or remove the Non-Executive Directors. The purpose of this report is to provide information for the Council to consider re-appointment of Mr J Whitaker whose term of office is due to expire on 2 July 2023.

In line with the Trust's Constitution (paragraph 12.14), any re-appointment of a Non-Executive Director by the Council of Governors shall be subject to a satisfactory appraisal carried out in accordance with procedures which the Board of Directors has approved. All Non-Executive Directors have successfully completed their 2022/23 annual appraisals which this year were supported by 360-degree feedback from Board colleagues and Governors were also invited to contribute to a 360-degree survey. Discussions have been held with Mr J Whitaker who has confirmed his intention to serve for a further term, as determined by the Trust Constitution and subject to approval by the Council of Governors. Further supporting information is provided in the main body of the report.

Furthermore, the Trust's Constitution (paragraph 12.15) states that a Non-Executive Director may serve on the Board of Directors for longer than six consecutive years, subject to annual re-appointment. A Non-Executive Director of the Trust may not hold office for longer than a maximum of nine years in aggregate in the capacity of either the Chair or a Non-Executive Director of the Trust. Mr J Whitaker will have completed his six consecutive years on 2 July 2023 therefore Council is being asked to consider year one annual re-appointment.

The Nominations Committee considered the report at its meeting on 20 April 2023. At the meeting, the Committee received feedback on the Non-Executive Directors' 2022/23 appraisals and agreed to recommend to the Council re-appointment of Mr J Whitaker.

It is recommended that the Council approve the Nominations Committee recommendation to re-appoint Mr J Whitaker for the period 3 July 2023 up to and including 2 July 2024 (year one of three annual re-appointment).

### Trust Strategic Aims and Ambitions supported by this Paper:

<b>Aims</b>	<b>Ambitions</b>
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To offer excellent health care and treatment to our local communities	<input checked="" type="checkbox"/>	Consistently Deliver Excellent Care	<input checked="" type="checkbox"/>
To provide a range of the highest standard of specialised services to patients in Lancashire and South Cumbria	<input checked="" type="checkbox"/>	Great Place To Work	<input checked="" type="checkbox"/>
To drive innovation through world-class education, teaching and research	<input checked="" type="checkbox"/>	Deliver Value for Money	<input checked="" type="checkbox"/>
		Fit For The Future	<input checked="" type="checkbox"/>
<b>Previous consideration</b>			
Nominations Committee (20 April 2023)			

## 1. Role and responsibilities of the Non-Executive Director

A Non-Executive Director works alongside other Non-Executive and Executive Directors as equal members of the Board of Directors. They share responsibility with the other Directors for the decisions made by the Board and for the success of the organisation in leading the local improvement of healthcare services.

Non-Executive Directors use their individual skills alongside their personal experience as a member of the community to:

- provide independent judgement and advice on issues of strategy, vision, performance, resources and standards of conduct and to constructively challenge, influence and help the Executive Team develop proposals on such strategies to enable the organisation to fulfil its leadership responsibilities for healthcare of the local community;
- ensure that the Board sets challenging objectives for improving its performance across the range of its functions;
- monitor, in accordance with agreed Board procedures, the performance and conduct of management in meeting agreed goals and objectives and statutory responsibilities, including the preparation of annual reports and annual accounts and other statutory duties;
- contribute to the determination of appropriate levels of remuneration for identified senior staff;
- take an active part in Committees established by the Board of Directors to exercise delegated responsibility;
- as a member of Committees of the Board, appoint, remove, support, encourage and where appropriate 'mentor' senior Executives;
- bring independent judgement and experience from outside the Trust and apply this to the benefit of the Trust, its stakeholders and its wider community;
- assist fellow Directors in providing entrepreneurial leadership to the Trust within a framework of prudent and effective controls, which enable risk to be assessed and managed;
- assist fellow Directors in setting the Trust's values and standards and ensure that its obligations to its stakeholders and the wider community are understood and fairly balanced at all times;
- ensure that the organisation values diversity in its workforce and demonstrates equality of opportunity in its treatment of staff and patients and in all aspects of its business; and
- engage positively and collaboratively in Board discussion of agenda items and act as an ambassador for the Trust in engagement with stakeholders including the local community.

## **2. General information**

The following provides an overview of previous experience, key skills, knowledge and experience and the roles undertaken by Mr J Whitaker that provide assurance to the Board.

### **2.2 Overview of previous experience, skills and knowledge**

An experienced Executive currently working at BT Enterprise, where he is Director of Project Management. During his career, he has led many large-scale IT transformation programmes for customers in the UK and abroad; these have typically been high complexity and operationally critical in nature. He has worked with customers in many sectors including Government, Defence, Investment Banking and Retail. He is a Chartered IT Professional with the British Computer Society and holds project management qualifications, which include APM RPP, MSP and Prince 2. His areas of particular expertise are strategic planning, managing change, governance and risk management.

### **2.2 Roles undertaken within the Trust**

He undertakes a range of different roles that provide assurances to the Board including:

- Chair of the Workforce Committee
- Member of the Audit Committee
- Member of the Finance and Performance Committee
- Member of the Appointments, Remuneration and Terms of Employment Committee
- Member of the IM&T Strategy Board
- Non-Executive Director Lead for Risk

He is also a Director of Lancashire Hospitals Services (LHS) Limited and Chair of the LHS Board.

### **2.3 Additional duties**

In addition to the portfolios described, the Non-Executive Directors undertake a range of additional duties, such as Board workshops and training sessions, and attend both virtual and in person events such as Board safety and experience visits, and STAR accreditation awards. They also attend ad hoc Committee meetings where they are not a member to ensure they are sighted on issues and assurance across all Non-Executive Directors' portfolios.

### **2.4 Annual appraisal**

He has been appraised by the Chair of the Trust in each of his years of appointment and has consistently met the objectives agreed. His most recent appraisal was held on 3 April 2023 and involved 360-degree feedback from Board colleagues and governors were also invited to contribute to the survey. He again had a successful appraisal and met the objectives for 2022/23.

### **2.5 Conclusion**

His second term of office is due to expire on 2 July 2023 and in line with the Trust Constitution a Non-Executive Director may serve on the Board of Directors for longer than six consecutive years, subject to annual re-appointment. A Non-Executive Director of the Trust may not hold office for longer than a maximum of nine years in aggregate in the capacity of either the Chair or a Non-Executive Director of the Trust. Council is asked to consider re-appointment of Mr J Whitaker for the one-year period from 3 July 2023 to 2 July 2024 (year one annual appointment).

### 3. Financial implications

There are no financial implications arising from this report.

### 4. Legal implications

The relevant section within the Trust's constitution regarding reappointments (para. 12.14 and 12.16) states that:

*'The Chair and the non-executive directors are to be appointed for a period of office in accordance with the terms and conditions of office decided by the Council of Governors at a Council meeting. A non-executive director may be re-appointed without a competitive process. Any re-appointment of a non-executive director by the Council of Governors shall be subject to a satisfactory appraisal carried out in accordance with procedures which the Board of Directors have approved.'*

*'A non-executive director (including the Chair) may serve on the Board of Directors for longer than six (6) consecutive years, subject to annual reappointment. A non-executive director of the Trust (including the Chair) may not hold office for longer than nine (9) years in aggregate in the capacity of either the Chair or a non-executive director of the Trust.'*

The relevant sections of the NHS Foundation Trust Code of Governance (July 2014) relating to re-appointments are as follows:

*"The Board of Directors and the Council of Governors should also satisfy themselves that plans are in place for orderly succession for appointments to the Board, so as to maintain an appropriate balance of skills and experience within the NHS Foundation Trust and on the Board." (Supporting principle B.2.c)*

*"The Governors should agree with the Nominations Committee a clear process for the nomination of a new chairperson and non-executive directors. Once suitable candidates have been identified the Nominations Committee should make recommendations to the Council of Governors." (Provision B.2.5)*

*"All non-executive directors and elected governors should be submitted for re-appointment or re-election at regular intervals...The Council of Governors should ensure planned and progressive refreshing of the non-executive directors." (Supporting principle B.7.a)*

*"In the case of re-appointment of non-executive directors, the chairperson should confirm to the governors that following formal performance evaluation, the performance of the individual proposed for re-appointment continues to be effective and to demonstrate commitment to the role. Any term beyond six years (e.g., two three-year terms) for a non-executive director should be subject to particularly rigorous review and should take into account the need for progressive refreshing of the Board. Non-executive directors may, in exceptional circumstances, serve longer than six years (e.g. two three-year terms following authorisation of the NHS Foundation Trust) but this should be subject to annual re-appointment. Serving more than six years could be relevant to the determination of a non-executive's independence." (Provision B.7.1)."*

### 5. Risks

Should the Council of Governors not recommend re-appointment of the Non-Executive Director then there is a risk to the composition of the Board of Directors and the ability for the business of the Trust to be delivered in line with the Trust's Constitution and its Provider Licence.



## **6. Impact on stakeholders**

There is no impact on stakeholders arising from this report.

## **7. Recommendations**

It is recommended that the Council approve the Nominations Committee recommendation to re-appoint Mr J Whitaker for the period 3 July 2023 up to and including 2 July 2024 (year one of three annual re-appointment).



# Council of Governors Report

## Governor Election 2023

<b>Report to:</b>	Council of Governors	<b>Date:</b>	27 April 2023
<b>Report of:</b>	Company Secretary	<b>Prepared by:</b>	J Leeming
<b>Part I</b>	✓	<b>Part II</b>	

### Purpose of Report

<b>For approval</b>	<input type="checkbox"/>	<b>For noting</b>	<input type="checkbox"/>	<b>For discussion</b>	<input type="checkbox"/>	<b>For information</b>	<input checked="" type="checkbox"/>
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## Executive Summary:

The purpose of this report is to confirm the results of the 2023 election to the Council of Governors. The annual Governor Election process is carried out in line with the Trust’s Constitutional requirements and in accordance with Model Election Rules as published by NHS Providers. The election was conducted by Electoral Reform Services who acted as Returning Officer on behalf of the Trust.

For the 2023 Governor Election, there were eight vacancies in the public constituency and four vacancies in the staff categories of nurses and midwives, doctors and dentists, unregistered healthcare and support workers, and other healthcare professionals/healthcare scientists. This year as the number of public candidates nominated was not more than the positions available, all were returned uncontested as public governors. Nominations for staff governors were only received for the category of nurses and midwives and a copy of the Report of Voting from the Returning Officer is attached which includes the staff candidate elected and breakdown of voting. 3 governors have also been re-elected for the period 1 April 2023 to 31 March 2026.

It is recommended that the Council of Governors receive the report and note the results of the 2023 Governor Election for information.

## Trust Strategic Aims and Ambitions supported by this Paper:

<b>Aims</b>	<b>Ambitions</b>	
To provide outstanding and sustainable healthcare to our local communities	<input checked="" type="checkbox"/>	Consistently Deliver Excellent Care <input checked="" type="checkbox"/>
To offer a range of high quality specialised services to patients in Lancashire and South Cumbria	<input checked="" type="checkbox"/>	Great Place To Work <input checked="" type="checkbox"/>
To drive health innovation through world class education, teaching and research	<input checked="" type="checkbox"/>	Deliver Value for Money <input checked="" type="checkbox"/>
		Fit For The Future <input checked="" type="checkbox"/>

## Previous consideration

Not applicable

## 1. Introduction

The annual Governor Election process is carried out in line with the Trust's Constitutional requirements and in accordance with Model Election Rules as published by NHS Providers. The election was conducted by Electoral Reform Services who acted as Returning Officer on behalf of the Trust.

For the 2023 Governor Election, there were eight vacancies in the public constituency and four vacancies in the staff categories of nurses and midwives, doctors and dentists, unregistered healthcare and support workers, and other healthcare professionals/healthcare scientists. This year as the number of public candidates nominated was not more than the positions available, all were returned uncontested as public governors. Nominations for staff governors were only received for the category of nurses and midwives and a copy of the Report of Voting from the Returning Officer is attached which includes the staff candidate elected and breakdown of voting. 3 governors have also been re-elected for the period 1 April 2023 to 31 March 2026.

It is recommended that the Council of Governors receive the report and note the results of the 2023 Governor Election for information.

## 2. Outcome of the 2023 Election to the Council of Governors

The outcome of the 2023 Governor election is confirmed as follows:

### **UNCONTESTED: PUBLIC**

This year as the number of candidates nominated was not more than the positions available, the following candidates were returned uncontested as public governors:

David Blanchflower  
Margaret France  
Graham Fullarton  
Janet Miller  
Frank Robinson  
Feixia Yu

### **ELECTED: STAFF**

Steven Doran (representing nurse and midwives)

## 3. Financial implications

There are no financial implications associated with the recommendations in this report.

## 4. Legal implications

The election process has been conducted in line with the Trust's Constitution and the Model Election Rules published by NHS Providers.

## 5. Risks

There are no risks associated with the recommendations in this report.

## **6. Impact on stakeholders**

Stakeholders will be advised of the outcomes of the elections.

## **7. Recommendations**

It is recommended that the Council of Governors receive the report and note the results of the 2023 Governor election for information.

Attachment 1: Report of Voting

## LANCASHIRE TEACHING HOSPITALS NHS FOUNDATION TRUST

### ELECTION TO THE COUNCIL OF GOVERNORS

CLOSE OF VOTING: 5PM ON 23 MARCH 2023

#### CONTEST: Staff: Nurses and Midwives

*The election was conducted using the single transferable vote electoral system.  
The following candidate was elected:*

ELECTED	
Steven DORAN	

Number of eligible voters		2,820
Votes cast online:	55	
Total number of votes cast:		55
Turnout:		2%
Number of votes found to be invalid:		0
Total number of valid votes to be counted:		55

The result sheet for the election forms the Appendix to this report. It details:-

- the quota required for election
- each candidate's voting figures, and
- the stage at which the successful candidate was elected.

Civica Election Services can confirm that, as far as reasonably practicable, every person whose name appeared on the electoral roll supplied to us for the purpose of the election:-

- a) was sent the details of the election and
- b) if they chose to participate in the election, had their vote fairly and accurately recorded

The elections were conducted in accordance with the rules and constitutional arrangements as set out previously by the Trust, and CES is satisfied that these were in accordance with accepted good electoral practice.

All voting material will be stored for 12 months.

**Ciara Hutchinson**  
**Returning Officer**  
**On behalf of Lancashire Teaching Hospitals NHS Foundation Trust**

Election for	Staff Nurses and Midwives
Date	24/03/2023
Number to be elected	1
Valid votes	55
Invalid votes	0
Quota	28
eSTV Reg. 54096	2.0.16
Election rules	Custom

	First	Stage	2 Stage	3	
Candidates	Preferences	Exclusion of	Exclusion of		
		SKILLEN, Shaye	CARLISLE, Anneen		
CARLISLE, Anneen	13	2	15	-15	-
<b>DORAN, Steven</b>	20	1	21	3	<b>24 Elected</b>
HORRIDGE, Stephanie	16	1	17	4	21
SKILLEN, Shaye	6	-6	-	-	-
Non-transferable		2	2	8	10
Totals	55		55		55



# Council of Governors Report

Appointment of Lead Governor							
<b>Report to:</b>	Council of Governors			<b>Date:</b>	27 April 2023		
<b>Report of:</b>	Company Secretary			<b>Prepared by:</b>	K Brewin		
<b>Part I</b>	✓			<b>Part II</b>			
Purpose of Report							
<b>For approval</b>	<input type="checkbox"/>	<b>For noting</b>	<input type="checkbox"/>	<b>For discussion</b>	<input type="checkbox"/>	<b>For information</b>	<input checked="" type="checkbox"/>
Executive Summary:							
<p>In line with the NHS Foundation Trust Code of Governance, Councils of Governors are recommended to appoint a governor to act as a Lead Governor. The purpose of this report is to formally confirm the results of the recent virtual ballot for the Lead Governor role for the 12-month period up to and including 31 March 2024.</p> <p>The term of office of the Lead Governor expired on 31 March 2023 and to ensure the annual appointment was made as soon as possible following the 2023 Governor Election, governors supported the proposal to hold a virtual ballot which commenced on 3 April 2023 and closed on 14 April 2023. The process adopted mirrored that undertaken in previous years, whereby governors with 12-months in office were invited to express an interest in the Lead Governor role and provide a personal statement in support of their candidature. Further information on the process is contained within the report.</p> <p>I am pleased to announce that Janet Miller received the most votes for the Lead Governor and took up the role with immediate effect.</p> <p>The Council of Governors is asked to note the results of the 2023 ballot and the appointment of Janet Miller as Lead Governor for the next 12 months up to and including 31 March 2024.</p>							
Trust Strategic Aims and Ambitions supported by this Paper:							
Aims				Ambitions			
To provide outstanding and sustainable healthcare to our local communities				<input checked="" type="checkbox"/>	Consistently Deliver Excellent Care		<input checked="" type="checkbox"/>
To offer a range of high quality specialised services to patients in Lancashire and South Cumbria				<input checked="" type="checkbox"/>	Great Place To Work		<input checked="" type="checkbox"/>
To drive health innovation through world class education, teaching and research				<input checked="" type="checkbox"/>	Deliver Value for Money		<input checked="" type="checkbox"/>
					Fit For The Future		<input checked="" type="checkbox"/>
Previous consideration							
Not applicable							

## 1. Introduction

In line with the NHS Foundation Trust Code of Governance, Councils of Governors are recommended to appoint a governor to act as a Lead Governor. The purpose of this report is to formally confirm the results of the recent virtual ballot for the Lead Governor role for the 12-month period up to and including 31 March 2024.

The term of office of the Lead Governor expired on 31 March 2023 and to ensure the annual appointment was made as soon as possible following the 2023 Governor Election, governors supported the proposal to hold a virtual ballot which commenced on 3 April 2023 and closed on 14 April 2023. The process adopted mirrored that undertaken in previous years, whereby governors with 12-months in office were invited to express an interest in the Lead Governor role and provide a personal statement in support of their candidature.

## 2. Process

At the Council of Governors' meeting on 28 January 2021 it was agreed that the ballot for the Lead Governor role would be deferred until after the annual Governor Election to allow all eligible governors (including any re-elected governors) the opportunity to express an interest in the Lead Governor role.

A proposal was put to governors about again holding a virtual ballot, so the results were available for the Council meeting on 27 April 2023. The proposal was intended to ensure the Lead Governor role was filled as soon as possible as the post would be vacated on 31 March 2023. On 6 March 2023 the following proposal was circulated to, and supported by, all serving Governors:

Date	Action	Deadline for response	Comments
3 April 2023	Email to governors inviting expressions of interest by 6 April in the Lead Governor role.	6 April 2023 (4pm)	<ul style="list-style-type: none"><li>• Only those governors with over 12 months in office would be eligible to express an interest.</li><li>• An overview of the requirements of the Lead Governor role would be included in the email.</li><li>• A personal statement would be required from governors to support their expression of interest which would be circulated to all governors on 7 April.</li></ul>
7 April 2023	Email to governors (including personal statements) identifying who has expressed an interest and requesting governors submit their vote.	14 April 2023 (4pm)	<ul style="list-style-type: none"><li>• Governors will be asked to email their vote on their preferred candidate to the Corporate Affairs mailbox by 4pm on 14 April.</li><li>• Governors will be notified of the results as soon as possible following the ballot.</li><li>• A report confirming the results will be produced for the Council meeting on 27 April.</li></ul>

## 3. Nomination statements

The results of the 2023 Governor Election were published on 24 March 2023 and all eligible governors were invited to self-nominate if they considered they had the required skills and qualities to fulfil the role of Lead Governor. Two nominations were received and their nomination statements are reproduced below:



### 3.1 **Steve Heywood's nomination statement**

With only two of the maximum 9 years left as a Public Governor it would be a privilege to take on the role of Lead Governor on behalf of the Council of Governors albeit in the unlikely circumstances where the role would be required to be actioned.

For the benefit of new governors it is worth explaining the title 'Lead' Governor can be misleading. The regulatory title 'Lead' could be interpreted as creating some sort of hierarchical or leadership role and whilst in other Trusts the role may be much wider, within LTHTR this is not the case. It is limited to very exceptional circumstances where contact or escalation to the regulator would be required through a governor channel.

In terms of my ability to properly carry out the role if and when required I hope I have demonstrated during my time as a governor the ability to be objective, constructive and supportive but also challenging in my relationships with the Board, Non-Executive directors and fellow governors. From my career background my strengths are in problem solving and the ability to assess issues from multiple perspectives whilst maintaining an appropriate level of independence. I also have many years experience of chairing senior level management meetings in Baesystems, have been chair and deputy chair of governor sub groups and have been involved directly with formal investigations during my time as a public governor.

### 3.2 **Janet Miller's nomination statement**

I am an experienced Governor with a background in teaching health and social care and supporting CQC inspections.

During 2022-2023 I was elected to the positions of **Lead Governor, member of the Nominations Committee and Chair of the Care and Safety Subgroup.**

I support the Membership Subgroup and our staff ambassador forums and various patient and carers forums along with our dementia strategy work stream. From the outset I have been involved with the New Hospital Programme and was selected by our then Trust Chair to attend monthly New Hospital Programme update meetings with Jerry Hawker and Board members. Throughout my service as a Governor, I have demonstrated my absolute dedication to improving the patient experience.

The responsibility of Lead Governor is solely as a point of contact between the regulator and Council, should a need arise. I'm a diligent and active member of the Council. I always act with integrity in accordance with the Nolan Principles, abiding by Trust values, and the Governors' Code of Conduct.

Informed interaction between the Council of Governors and the Board of Directors is vital. This partnership requires transparency and trust. It also requires Governors to understand how Board assures itself on quality and performance matters. To this end, I regularly attend Board meetings and have used appropriate mechanisms to seek assurance from our NEDs on current issues.

## 4. **Result of the ballot for Lead Governor**

22 Governors were eligible to vote in the ballot and 15 votes were cast which represents a turnout of 68% of the governing body.

Candidates	Number of votes cast	Percentage
Steve Heywood	7	47%
Janet Miller	8	53%

I am pleased to announce that Janet Miller received the most votes for the Lead Governor and took up the role with immediate effect. An email was circulated to all Governors on 17 April 2023 confirming the result of the ballot for Lead Governor.

**5. Financial implications**

There are no financial implications associated with this report.

**6. Legal implications**

There are no legal implications associated with this report.

**7. Risks**

There are no risks implications associated with this report.

**8. Impact on stakeholders**

There are no stakeholder implications associated with this report.

**9. Recommendations**

The Council of Governors is asked to note the results of the 2023 ballot and the appointment of Janet Miller as Lead Governor for the next 12 months up to and including 31 March 2024.



# Council of Governors Report

## Appointment of Nominations Committee

<b>Report to:</b>	Council of Governors	<b>Date:</b>	27 April 2023
<b>Report of:</b>	Company Secretary	<b>Prepared by:</b>	K Brewin
<b>Part I</b>	✓	<b>Part II</b>	

### Purpose of Report

<b>For approval</b>	<input type="checkbox"/>	<b>For noting</b>	<input type="checkbox"/>	<b>For discussion</b>	<input type="checkbox"/>	<b>For information</b>	<input checked="" type="checkbox"/>
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## Executive Summary:

The Nominations Committee plays a key role in the recruitment, selection and appointment of the Chair and the Non-Executive Directors, and the appraisals of the Chair and Non-Executive Directors.

The Committee membership comprises the Chair or Vice-Chair (in the Chair); three elected governors (comprising two public and one staff governor); and one appointed governor. Details of the duties of the Committee are set out in the terms of reference attached (appendix 1).

Ballots for appointment to the Committee are held annually taking into account the two-year end date for each appointment including substitute governors for each of the three categories (public, staff and appointed) who attend meetings in the event any of the substantive members of the Committee are not available when required. To ensure equity and allow all eligible governors the opportunity to stand for election to the Nominations Committee, the Council decided in January 2021 to request expressions of interest following the annual Governor Election. The results of the 2023 Governor Election were announced on 24 March 2023.

Further information on the process and results of the Nominations Committee ballot are included within the report.

I am pleased to announce that the Nominations Committee membership up to and including 31 March 2025 is as follows:

- Public Governors – Steve Heywood and Janet Miller
- Staff Governor – Steven Doran
- Appointed Governor – Alistair Bradley
- Substitute Staff Governor – Piotr Spadlo

It is recommended the Council of Governors note the result of the annual ballot and the appointment of the above governors to the Nominations Committee from 1 April 2023 to 31 March 2025.

## Trust Strategic Aims and Ambitions supported by this Paper:

Aims	Ambitions		
To provide outstanding and sustainable healthcare to our local communities	<input checked="" type="checkbox"/>	Consistently Deliver Excellent Care	<input checked="" type="checkbox"/>
To offer a range of high quality specialised services to patients in Lancashire and South Cumbria	<input checked="" type="checkbox"/>	Great Place To Work	<input checked="" type="checkbox"/>
To drive health innovation through world class education, teaching and research	<input checked="" type="checkbox"/>	Deliver Value for Money	<input checked="" type="checkbox"/>
		Fit For The Future	<input checked="" type="checkbox"/>
Previous consideration			
Not applicable			

## 1. Background

The Nominations Committee plays a key role in the recruitment, selection and appointment of the Chair and the Non-Executive Directors, and the appraisals of the Chair and Non-Executive Directors.

The Committee membership comprises the Chair or Vice-Chair (in the Chair); three elected governors (comprising two public and one staff governor); and one appointed governor. Details of the duties of the Committee are set out in the terms of reference attached (appendix 1).

Ballots for appointment to the Committee are held annually taking into account the two-year end date for each appointment including substitute governors for each of the three categories (public, staff and appointed) who attend meetings in the event any of the substantive members of the Committee are not available when required.

## 2. Process

At the Council of Governors' meeting on 28 January 2021 it was agreed that the ballot for membership of the Nominations Committee would be deferred until after the annual Governor Election to allow all governors (including any new and re-elected governors) the opportunity to express an interest in the vacant seats. The results of the 2023 Governor Election were announced on 24 March 2023.

A proposal was put to governors about holding a virtual ballot, so the results were available for the Council meeting on 27 April 2023. The proposal was intended to ensure any vacancies on the Nominations Committee were filled as soon as possible to avoid delays in due process after year end, such as receiving feedback on the Chair's and Non-Executive Directors' appraisals. On 6 March 2023 the following proposal was circulated to, and supported by, serving governors:

Date	Action	Deadline for response	Comments
3 April 2023	Email to governors inviting expressions of interest by 6 April – there will be vacancies for one staff, two public and one appointed governor representatives.	6 April 2023 (4pm)	<ul style="list-style-type: none"><li>All governors are eligible to express an interest in joining the Nominations Committee.</li><li>A copy of the terms of reference will be circulated with the email.</li></ul>
7 April 2023	Email to governors identifying who has expressed an interest and requesting governors submit their vote.	14 April 2023 (4pm)	<ul style="list-style-type: none"><li>Governors will be asked to email their vote on their preferred candidate in each constituency to the Corporate Affairs mailbox by 4pm on 14 April.</li><li>Governors will be notified of the results as soon as possible following the ballot.</li><li>A report confirming the results will be produced for the Council meeting on 27 April.</li></ul>

## 3. Ballot for election to the Nominations Committee

On 3 April 2023, governors were asked to express an interest in standing for membership of the Nominations Committee in their relevant constituency.

Following expressions of interest, arrangements were made for a virtual ballot which was held between 6 and 14 April 2023.

Constituency	Governor Candidates
Public	<ul style="list-style-type: none"> <li>Sheila Brennan</li> <li>Steve Heywood</li> <li>Janet Miller</li> </ul>
Staff	<ul style="list-style-type: none"> <li>Steven Doran</li> <li>Piotr Spadlo</li> </ul>
Appointed	<ul style="list-style-type: none"> <li>Alistair Bradley</li> </ul>

#### 4. Result of the ballot for membership of the Nominations Committee

22 governors were eligible to vote in the ballot. 13 votes were cast for the public category and 16 votes were cast for the staff category. This represents a governor body turnout of 59% and 73% respectively.

Constituency	Candidates	Number of votes cast	Percentage
<b>Public</b>	Sheila Brennan	3	23%
	Steve Heywood	4	31%
	Janet Miller	6	46%
<b>Staff</b>	Steven Doran	9	56%
	Piotr Spadlo	7	44%
<b>Appointed</b>	Alistair Bradley	Uncontested	----

The following governors received the most votes for their respective constituency and have taken up their roles with immediate effect:

- Public Governors – Steve Heywood and Janet Miller
- Staff Governor – Steven Doran
- Appointed Governor – Alistair Bradley
- Substitute Staff Governor – Piotr Spadlo

Pav Akhtar and Suleman Sarwar remain the Substitute Public and Appointed Governors to the end of March 2024.

An email was circulated to all governors on 17 April 2023 confirming the result of the ballot for membership of the Nominations Committee.

#### 5. Financial implications

There are no financial implications associated with this report.

#### 6. Legal implications

There are no legal implications associated with this report.

## **7. Risks**

There are no risks implications associated with this report.

## **8. Impact on stakeholders**

There are no stakeholder implications associated with this report.

## **9. Recommendations**

It is recommended the Council of Governors note the result of the annual ballot and the appointment of the following governors to the Nominations Committee from 1 April 2023 to 31 March 2025:

- Public Governors – Steve Heywood and Janet Miller
- Staff Governor – Steven Doran
- Appointed Governor – Alistair Bradley
- Substitute Staff Governor – Piotr Spadlo

Appendix 1: Terms of Reference for Nominations Committee

# LANCASHIRE TEACHING HOSPITALS NHS FOUNDATION TRUST

## NOMINATIONS COMMITTEE

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### TERMS OF REFERENCE

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#### 1. CONSTITUTION

- 1.1 The Nominations Committee is established as a committee of the Trust pursuant to Clause 12.5 of the Trust Constitution.

#### 2. PURPOSE

- 2.1 The Committee will:
- i. recommend suitable people for appointment to Non-Executive Director positions (including the Chair) to be ratified by the Council of Governors
  - ii. recommend arrangements for remuneration and related terms and conditions for the Chair and Non-Executive Directors for agreement by the Council of Governors
  - iii. receive the outcome of appraisals of the Chair and NEDs for scrutiny prior to submission of an overview report to Council.
  - iv. Act as the proper committee for the consideration of formal complaints made against a non-executive director (including the Chair) as set out in Annex 4 of the Constitution

#### 3. COMPOSITION AND CONDUCT OF THE COMMITTEE

- 3.1 The Committee shall comprise the following membership:

- Trust Chair or Vice-Chair or SID (in the Chair)
- Two public governors
- One staff governor
- One appointed governor

Governors will ordinarily be elected annually to the Nominations Committee by vote of the Council of Governors. Should the Council vote be tied, the membership of the Nominations Committee will be flexed for the term of office to allow an additional governor to be a member of the Committee.

- 3.2 A nominated deputy shall be identified for the elected and appointed governor members (i.e. one public, one staff and one appointed governor deputy).
- 3.3 The Committee may require the attendance of other representatives of the Trust as appropriate.
- 3.4 *Frequency of meetings.* The Committee shall normally meet in order to facilitate the business of the Trust.
- 3.5 *Quorum.* three Committee members (or their nominated deputies) which must include the Chair, except where the business to be transacted is that of reappointment of the Chair, in which case the Chair will be excluded from the meeting during consideration of the item and the Chair shall be taken by the Vice-Chair or SID.
- 3.6 *Minutes.* The minutes of meetings shall be formally recorded as directed by the Company Secretary.





# Council of Governors Report

## Governor Opportunities and Activities – February 2023 – April 2023

<b>Report to:</b>	Council of Governors	<b>Date:</b>	27 April 2023
<b>Report of:</b>	Governors	<b>Prepared by:</b>	J Leeming
<b>Part I</b>	✓	<b>Part II</b>	
<b>For approval</b>	<input type="checkbox"/>	<b>For noting</b>	<input type="checkbox"/>
		<b>For discussion</b>	<input type="checkbox"/>
			<b>For information</b>
			<input checked="" type="checkbox"/>

### Executive Summary:

The purpose of this report is to update the Council of Governors on the opportunities, events and activities Governors have been involved in during February 2023 to April 2023.

The Governor role is to represent the interests of Foundation Trust members, the public and the organisations Appointed Governors represent. The events and engagement opportunities that Governors have been involved in are recorded in the report and attached as appendix 1.

It should also be noted that several of our Governors also undertake voluntary roles across both our hospital sites.

It is recommended that the Council of Governors receive the report and note the contents for information.

### Trust Strategic Aims and Ambitions supported by this Paper:

<b>Aims</b>	<b>Ambitions</b>	
To offer excellent health care and treatment to our local communities	<input checked="" type="checkbox"/>	Consistently Deliver Excellent Care <input checked="" type="checkbox"/>
To provide a range of the highest standard of specialised services to patients in Lancashire and South Cumbria	<input checked="" type="checkbox"/>	Great Place To Work <input checked="" type="checkbox"/>
To drive innovation through world-class education, teaching and research	<input checked="" type="checkbox"/>	Deliver Value for Money <input checked="" type="checkbox"/>
		Fit For The Future <input checked="" type="checkbox"/>

### Previous consideration

None

## **1. Background**

Governors have an important part to play by listening to the views of the Trust's members, the public and other stakeholders, and representing their interests in the Trust. This means, for example, gathering information about people's experiences to help inform the way the Trust designs, reviews or improves services effectively. Governors also have a role in communicating information from the Trust to members and to the public, such as information about the Trust's plans and performance. Successful engagement calls for an ongoing working relationship between a Foundation Trust and its members and the public, with patients and service users at the heart of this. Governors are supported in their work by other groups of people at the Trust including Executive and Non-Executive Directors and the Corporate Affairs Office.

## **2. Financial implications**

There are no financial implications associated with the recommendations in this report.

## **3. Legal implications**

There are no legal implications associated with the recommendations in this report.

## **4. Risks**

There are no risk implications associated with the recommendations in this report.

## **5. Impact on stakeholders**

Positive engagement with membership is a critical role for the Governors.

## **6. Recommendations**

It is recommended that the Council of Governors receive the report and note the contents for information.

There are a number of regular activities which Governors could be involved in including:

#### **Fabulous Feedback Friday**

Held monthly and virtually throughout the Covid-19 pandemic, teams provide an overview of their service at the Trust. Governors are provided with the opportunity to explore, receive insights and have a deeper understanding of the service being presented. The events have a broad reach and include invitations to Governors, Board Members, and a range of senior leaders throughout the Trust.

#### **STAR celebration events**

Held three times per year and virtually throughout the Covid-19 pandemic, teams present the peer support activity in which they have been involved as part of the STAR accreditation framework as well as celebrating achievements.

#### **PLACE (Patient Led Assessment of the Care Environment)**

The national programme usually takes place annually at each of our hospital sites (Chorley and South Ribble and Royal Preston Hospital). It is an opportunity for Governors to engage with patients and training is provided by the Trust. The programme is being reviewed nationally and further information on the changes is awaited.

#### **Strategic Operating Group (SOG) Debrief**

Every Friday between 10am and 12noon a Strategic Operations Group meeting is held during which leaders from across the Trust review existing pressures and make important decisions about our hospitals' current and future operational challenges. Governors along with staff can attend the debrief every Friday afternoon between 2pm and 2.15pm.

The list below does not include Governors' scheduled meetings and workshops.  
All activities were held using virtual platforms unless indicated otherwise.

<b>EVENT: excluding scheduled meetings and workshops</b>	<b>DATE: February 2023 – April 2023</b>
Preston Health Mela	18 March 2023
Patient Experience Improvement Group	21 March 2023
Chair Selection Stakeholder panel	30 March 2023



# Council of Governors Report

## Governor Issues Report

<b>Report to:</b>	Council of Governors	<b>Date:</b>	27 April 2023
<b>Report of:</b>	Company Secretary	<b>Prepared by:</b>	N Gauld
<b>Part I</b>	✓	<b>Part II</b>	

### Purpose of Report

<b>For approval</b>	<input type="checkbox"/>	<b>For noting</b>	<input type="checkbox"/>	<b>For discussion</b>	<input type="checkbox"/>	<b>For information</b>	<input checked="" type="checkbox"/>
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## Executive Summary:

The purpose of this report is to provide visibility of the issues and concerns raised by Governors for information.

The agreed process for Governors to raise issues and concerns is through the Senior Executive Assistant ([Natalie.gauld@lthtr.nhs.uk](mailto:Natalie.gauld@lthtr.nhs.uk)). These are then passed to the appropriate manager for investigation and response. A response is then provided to the Governor who raised the issue.

The attached report contains a summary of the issues raised since the last report to the Council and covers the period between January 2023 to date along with details of the responses provided.

**It is recommended that the Council receives the report and notes the contents for information.**

## Trust Strategic Aims and Ambitions supported by this Paper:

<b>Aims</b>	<b>Ambitions</b>	
To provide outstanding and sustainable healthcare to our local communities	<input checked="" type="checkbox"/>	Consistently Deliver Excellent Care <input checked="" type="checkbox"/>
To offer a range of high quality specialised services to patients in Lancashire and South Cumbria	<input checked="" type="checkbox"/>	Great Place To Work <input checked="" type="checkbox"/>
To drive health innovation through world class education, teaching and research	<input type="checkbox"/>	Deliver Value for Money <input checked="" type="checkbox"/>
		Fit For The Future <input checked="" type="checkbox"/>

## Previous consideration

Not applicable

## 1. Introduction

The purpose of this report is to provide visibility of the issues and concerns raised by Governors for information.

The agreed process for Governors to raise issues and concerns is through the Senior Executive Assistant ([Natalie.gauld@lthtr.nhs.uk](mailto:Natalie.gauld@lthtr.nhs.uk)). These are then passed to the appropriate manager for investigation and response. A response is then provided to the Governor who raised the issue.

The report contains a summary of the issues raised since the last report to the Council and covers the period between January 2023 to date along with details of the responses provided.

## 2. Activity report

During the reporting period, 4 concerns/issues were raised through the governor process map.

All concerns/issues have been closed within timescales for response.

A summary of the issues raised is provided below:

- 1 concern was raised regarding how equipment within the Trust is recycled and reused. A detailed response was sent by the Director of Estates and Facilities outlining our recycling procedures.
- 1 concern was raised regarding the CQC Banner at Chorley Hospital which had come adrift from the Board. The Director of Estates and Facilities was notified, and the issue resolved.
- 1 concern was raised regarding patients waiting over 50 hours within Chorley Hospital. The Chief Operating Officer responded and advised that the lead for ED has been made aware of the concern in order to address this.
- 1 concern was raised regarding patients being moved to a different ward at midnight without prior warning. The Chief Nursing Officer confirmed that moves after 10pm are kept to a minimum so as not to disturb patients, however there are times when beds become available and it is necessary to move patients to less acute areas to meet the needs of the most unwell patients. This will continue to be measured as a quality metric.

## 3. Financial implications

There are no financial implications associated with this report.

## 4. Legal implications

There are no legal implications associated with this report.

## 5. Risks

There are no risks associated with this report.

## 6. Impact on stakeholders

There is no impact on stakeholders associated with this report.

7. **Recommendation**

It is recommended that the Council receives the report and notes the contents of this report for information.

# Care and Safety Subgroup

16 January 2023 | 10.00am | Microsoft Teams

PRESENT	DESIGNATION	16/05	14/07	10/10	24/11	16/01	23/03
Janet Miller	Public Governor ( <i>Chair</i> )	P	P	P	P	P	
Paul Wharton-Hardman	Public Governor ( <i>Deputy Chair</i> )		P	P	A	A	
Keith Ackers	Public Governor	P	P	P	P	A	
Rebecca Allcock	Staff Governor	P	P	P	A	P	
Peter Askew	Public Governor	P		P	P	P	
Paul Brooks	Public Governor	P	P				
David Cook	Public Governor	A	P				
Kristinna Counsell	Public Governor	P	P				
Margaret France	Public Governor	P	P	P	P	P	
Steve Heywood	Public Governor	A	P	A	P	P	
Lynne Lynch	Public Governor	P	P	P	P	P	
Frank Robinson	Public Governor	P	P	A	P	P	
Ann Simpson	Public Governor	A	P		P	P	
Mike Simpson	Public Governor		A	P	A	A	
Piotr Spadlo	Staff Governor	P	P	A	P	P	
David Watson	Public Governor	P	A	P	A	P	
<b>IN ATTENDANCE</b>							
Alison Cookson	Patient Experience and Involvement	P	P	P	P	A	
David Hounslea	Director of Facilities and Services	P	A	A	P	P	
Christmas Musonza	Associate Director of Patient Quality, Experience and Engagement	A	A				
Kate Smyth	Non-Executive Director	P	P	A		P	
Joanne Wiseman	Corporate Affairs Officer (minutes)	P	P	P	P	P	
<p>P – present   A – apologies  <b>Quorum:</b> 50% of the Subgroup's total membership at the time of the meeting</p>							

**Presenters:** **John Howles**, Associate Director of Patient Quality, Experience and Engagement  
(*minute 8/23*)

**Phil Purcell**, Quality Manager – SMRC  
(*minute 9/23*)

**Observers:** **Jennifer Foote**, Company Secretary

## 1/23. **Chair and quorum**

Having noted that due notice of the meeting had been given to each member and that a quorum was present, the meeting was declared duly convened and constituted.

## 2/23. **Apologies for absence**

Apologies for absence were received and recorded in the attendance matrix at the front of the minutes.

## 3/23. **Declarations of interest**

There were no declarations made by Subgroup members in respect of the business to be transacted during the meeting.

## 4/23. **Minutes of the previous meeting**

**Excellent care with compassion**

The minutes of the previous meeting held on 24 November 2022 were approved as an accurate record.

**5/23. Matters arising and action log**

The action log was reviewed and would be updated accordingly.

A request for an update regarding action minute ref 41/22 for prisoner waiting facilities was recorded. A request to secure new dates for the SMRC visit, Urgent Care/CDH Emergency Department and Finney House with operational teams was recorded.

**6/23. Estates and Facilities Update**

The Director of Estates and Facilities provided the subgroup with an update and a report had been circulated prior to the meeting.

- Work was continuing on the first-floor modular development at Chorley and it was hoped that the contractor would hand over at the end of January 2023.
- Work had been completed on the call bell system for wards 17 and 18.
- Work would commence from February at Preston to replace the mobile endoscopy unit with a modular treatment room.
- Finney House - Estates and facilities team have integrated staff from the previous provider and were now delivering all services.
- There were various other developments at Preston ongoing with an additional operating theatre, an additional bi-plane suite and the Gordon Hesling entrance had been updated. Approximately £2m had been committed to improvement work at the RPH Emergency Department.
- Alcidion Smartpage Portering System had been rolled out at Preston and was due to be rolled out at Chorley to replace the outdated Portertrac system.
- A meeting had been held regarding the car parking process for the re-tendering of the car park management contract.
- Travel plans between the sites was underway.
- Catering had extended hours at Preston's café and new Starbucks outlet within Charters would open soon with a refurbishment of the restaurant planned. A take away service would be available while work was ongoing.
- The security team now had a new CCTV system to allow for better images and significant improvement for safety of patients and staff.
- There was now a new Head of Facilities in post.

It was noted that RVS staff had been given notice of redundancy but no other information was available. It was agreed that the email regarding the incorrect signage at Chorley would be emailed again to the Director of Estates. It was noted that the Christmas lights were still on display at CDH and it was agreed that the Director of Estates would resolve.

An issue of wheelchair access for the Dermatology unit at Chorley was raised as a concern and had been emailed to the Director of Estates who agreed to review. It was noted that the concerns regarding the homeless person in Costa Coffee had been raised with the security team and no other incidents reported.

**7/23. Non-Executive Director Update**



The Non-Executive Director provided the following update:

- The case study around anchor intuitions and social value would be printed in a book due out in March. The Trust had been asked to participate in the UCLAN research on social value taking place between February and June. The internal group was going well and reviewing food as resourcing could be improved for local procurement. The Central Lancashire group were making a difference but the boundaries may be changed. There would be a meeting mid-February regarding anchor institutions with the three local authorities, LTH, the Care Trust, the university and various housing associations. They would review what was working well and what improvements were required.
- The place-based group for health and inequalities was going well and the Non-Executive Director was still involved in the living well and ageing well task and finish groups.
- The Non-Executive Director was invited to bid for some NIHR funding with UCLAN and if successful there would be several millions of pounds and several years work involved.
- The Non-Executive Director role objectives had been finalised and was the Non-Executive Director lead again on the patient experience and involvement group and was to stress the importance of the patient experience strategy and its implementation.
- The Non-Executive Director was continuing to work with the Yorkshire and Humber Patient Safety Translational Research Centre who had received funding for the next five years and she had been asked to play a key role in the care and safety at home element.
- In December the Non-Executive Director gave a presentation at the ICB of her 'lived' experience and the disability network she was involved with and had been asked to work closely with the ICB by joining the People Board and would become their professional disability advisor.
- The Safety and Quality Committee had reviewed the winter pressures and impact to staff and patients. There were patients being treated in areas that were not ordinarily treatment areas but was necessary to create additional capacity.
- Other Executives would be going to Huddersfield and Calderdale Trust as their safety target results appeared to be better than LTH so that would be good to see if best practices could be shared.
- National work undertaken by the Non-Executive Director by speaking at webinars for Saxton Banfield for recruitment and Cambridge University, lots of activities during the disability history month, creation of a mentoring scheme for disabled NED's and disabled aspiring NED's. They were also developing a charter of expectations of NHSE in relation to disabled staff.

A concern regarding the PALS opening times of 10.00am to 2.00pm at Chorley was raised and the font size on the door sign advising of the times was too small. It was also noted that it would be helpful to have an engaged sign if the PALS team already had a patient inside the office. It was requested that a deadline of 14 working days for that to be rectified and for Governors to be kept informed. It was suggested that staff should now be manning both PALS offices on a fulltime basis. An explanation would be required if this did not occur as it was suggested that the pandemic could not continue to be used as an excuse for virtual working.

The newly appointed Associate Director of Patient Quality, Experience and Engagement introduced himself to the subgroup and indicated he would commence in post on 24 January 2023.

The actions already raised in the meeting were reiterated for the Associate Director of Patient Quality, Experience and Engagement which included the PALS office opening hours of 10am to 2pm, the inaccurate signage and wheelchair access to the Dermatology unit.

9/23. **SMRC Presentation**

The Quality Manager provided the subgroup with an update regarding the SMRC facility and the presentation would be shared with the minutes – please see appendix 1. The postponed visit would be welcomed to accommodate members of the subgroup.

It was confirmed that Dr Jepson had been involved in the New Hospital Programme.

10/23. **Reflections on the meeting**

It was commented that there were interesting items on the agenda. A request was noted to hold the meetings in person, as most places had returned to normal. It was noted that it had been agreed at the Council of Governors meeting to follow the same meeting framework as the Board of Directors and that the workshops and development sessions would remain as face to face when conditions permitted. A vote for Governors to return to face to face meetings was requested as an item of the Council of Governors meeting. It was suggested that there should be a balance of face to face and virtual meetings held and it was noted that it would help the new Governors when elected. The hybrid option was still being reviewed for the Gordon Hesling Room and as the Trust was a teaching hospital, larger rooms were prioritised for that intended purpose.

11/23. **Request for future meeting topics**

None.

12/23. **Any other business**

None.

13/23. **Healthwatch Report**

For information only.

A patient had posted on the NHS website that they had found difficulty navigating Chorley hospital and it was suggested that a large map was reintroduced to the ATC entrance as previously.

**Date, time and venue of next meeting**

23 March 2023 at 1.00pm using Microsoft Teams.

**Appendix 1**

# Report to: Care and Safety Subgroup

**Report to:** Care and Safety Subgroup

**Date:** 16<sup>th</sup> January 2023

**Report of:** SMRC Patient Feedback

**Prepared by:** P Purcell. Quality Manager

## **Specialist Mobility Rehabilitation Centre Overview**

- SMRC. Located at Preston Business Centre
- Service delivery
- Consultant lead by Dr Fergus Jepson Consultant in Rehabilitation Medicine.
- Multi -disciplinary Clinical team
- W/C 19,000 Patients
- Orthotics 24,000 Patients
- Prosthetics 2,000 Patients
- Specialist Military Veterans Centre
- Self-contained unit and self-supporting unit
- Budget £10 million

## **Accreditations**

- STAR (Gold award)
- ISO 9001:2015 Quality Management System
- Customer Service Excellence (Formally Charter Mark)

## **Patient Satisfaction**

- Patients for life.
- Unique view of patient satisfaction.
- Datix Plaudits
- Datix Complaints
- Family and Friends process
- User Group and Mobility matters

## **Current Challenges for patient satisfaction**

- Patient expectations with respect to equipment provision
- Supply chain interruptions
- Inflationary uplifts requests from suppliers

# Membership Subgroup

10 October 2022 | 2.00pm | Microsoft Teams

PRESENT	DESIGNATION	04/04	06/06	08/08	10/10	05/12
Piotr Spadlo	Staff Governor ( <i>Chair</i> )	P	P	P	P	
Mike Simpson	Public Governor ( <i>Deputy Chair</i> )	P	A	P	P	
Keith Ackers	Public Governor			P	P	
Rebecca Allcock	Staff Governor	P	A		P	
Sean Barnes	Public Governor	A	A	A	A	
Sheila Brennan	Public Governor		P	P	P	
David Cook	Public Governor	A	A	P	P	
Margaret France	Public Governor	P	P	A	P	
Steve Heywood	Public Governor	P	P	P	A	
Lynne Lynch	Public Governor	A	P		A	
Janet Miller	Public Governor	P	P	P	P	
Frank Robinson	Public Governor	P	P	P	P	
<b>IN ATTENDANCE</b>						
Naomi Duggan	Director of Communications and Engagement	A	A		A	
Adam Sharples	Marketing Manager	P	P	P	P	
Karen Swindley	Strategy, Workforce and Education Director	A	P			
Tricia Whiteside	Non-Executive Director	P	P	A	A	
Jackie Higham	Head of Widening Participation & Apprenticeships		P	P	P	
Jennifer Foote	Company Secretary			P	P	
Joanne Leeming	Corporate Affairs Officer ( <i>minutes</i> )	P	P	A	P	
Joanne Wiseman	Corporate Affairs Officer ( <i>minutes</i> )			P		
P – present   A – apologies <b>Quorum:</b> 50% of the Subgroup's total membership at the time of the meeting						

## 1. Chair and quorum

The Chair noted that due notice of the meeting had been given to each member and a quorum was present.

## 2. Apologies for absence

Apologies for absence were received and recorded in the attendance matrix at the front of the minutes.

## 3. Declarations of interest

There were no declarations made in respect of the business to be transacted during the meeting.

## 4. Minutes of the previous meeting held on 8 August 2022

The minutes of the meeting held on 8 August 2022 were agreed as a true and accurate record.

5. **Matters arising and action log**

The outstanding actions were reviewed, and the action log would be updated following the meeting.

Reference was made to the previous discussion regarding how young members could be engaged and the suggestion for inclusion of a dedicated page in Trust Matters. The Marketing Manager confirmed this would be included in the next edition and information could be added to the web page prior to that.

6. **Membership Strategy Action Plan**

The action plan was discussed and updated.

There was discussion around roles and responsibilities for promotion of Trust membership. The Chair offered a meeting with the Company Secretary to provide the background on this.

7. **Governor coffee catch ups**

Members had not attended the Governor coffee catch ups despite notices provided on the home page of the Trust website. The Marketing Manager agreed to check if links were shared with members. It was suggested that production of posters and more mass marketing on social media or the use of paid advertising could be used to encourage attendance. There was discussion around having a membership stall at one of the sites now that Covid regulations had relaxed. The Chair would be put in contact with the Head of Charities, to discuss further.

8. **Reflections of the meeting**

It was suggested that the strategy plan actions be collated for focussed discussions at future meetings.

9. **Requests for future meeting topics**

The Marketing Manager confirmed Google analytics could be utilised to determine how many people access pages on the website and would provide a summary report of the membership section.

10. **Date, time, and venue of next meeting**

The next meeting of the Membership Subgroup will be held on 5 December 2022, 2pm via MS Teams.