Ashford and St. Peter's Hospitals NHS Foundation Trust

OPEN MEETING OF THE COUNCIL OF GOVERNORS
8th March 2023 via Microsoft Teams

PRESENT:	Edwin Addis	Public Governor, Hounslow, Kingston-upon-Thames, Richmond-upon-Thames and Rest of England	**EA**
	Frances Ansell	Public Governor, Elmbridge	**FA**
	Tracey Bradshaw	Staff Governor, Nursing and Midwifery	**TB**
	Andy Brown	Staff Governor, Volunteers	**AB**
	Kate Colban	Staff Governor, Allied Health Professionals	**KC**
	Malcolm Cressey	Appointed Governor, Runnymede Borough Council	**MC**
	Lilly Evans	Public Governor, Runnymede, Surrey Heath, Windsor and Maidenhead	**LE**
	Richard Evans	Public Governor, Spelthorne	**RE**
	Andy Field	Chairman	**AF**
	Shirley Holmes	Public Governor (Lead), Woking and Guildford	**SH**
	Chris Howorth	Appointed Governor, Royal Holloway University	**CH**
	Ellen Nicholson	Appointed Governor, Woking Borough Council	**EN**
	Ann Ooms	Public, Governor, Elmbridge	**AO**
	Aidan Parsons	Staff Governor, Ancillary, Admin, Clerical and Managerial	**AP**
	Helen Pernelet	Public Governor, Elmbridge	**HP**
	Michael Smith	Public Governor, Woking and Guildford	**MS**
	Anthony Tweh	Public Governor, Hounslow, Kingston-upon-Thames, Richmond-upon-Thames and Rest of England	**AT**
APOLOGIES:	Miranda Alcock	Public Governor, Woking and Guildford	**MA**
	Susan Bell	Public Governor, Runnymede, Surrey Heath, Windsor and Maidenhead	**SB**
	Soma Champaneri	Honorary Associate Non-Executive Director	**SC**
	Rose Chandler	Appointed Governor, Spelthorne Borough Council	**RC**
	Melaine Coward	Appointed Governor, University of Surrey	**MC**
	Chris Frazer	Public Governor, Spelthorne	**CF**
	Mohamed Imam	Staff Governor, Medical and Dental	**MI**
	Carmel Keane-Maher	Public Governor, Spelthorne	**CKM**
	Arun Thiyagarajan	Non-Executive Director	**AT**
	Sylvia Whyte	Public Governor, Runnymede, Surrey Heath, Windsor and Maidenhead	**SW**
IN ATTENDANCE			
	Dami Adedayo	Non-Executive Director	**DA**
	Jane Dale	Non-Executive Director	**JD**
	David Fluck	Medical Director	**DF**
	Donald Iro	Non-Executive Director Designate	**DO**
	Chris Kane	Non-Executive Director	**CKa**
	Andrea Lewis	Chief Nurse	**AL**
	John Machin	Non-Executive Director	**JM**
	Simon Marshall	Chief Financial Officer	**SM**
	Sal Maughan	Associate Director of Corporate Affairs and Governance	**SMa**

	Louise McKenzie	Director of Workforce Transformation	**LMcK**
	Cathy Parsons	Programme Director, Surrey Heartlands Elective Centre	**CP**
	Julian Ruse	Associate Director of Performance	**JR**
	Tom Smerdon	Director of Strategy and Sustainability	**TS**
	Julie Smith	Chief Executive	**JS**
	James Thomas	Chief Operating Officer	**JT**
	Marcine Waterman	Deputy Chairman/Non-Executive Director	**MW**
SECRETARY:	Anu Sehdev	Membership and Engagement Manager	**AS**

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COG-01/23 **Apologies**

Apologies as listed on the previous page.

COG-02/23 **Declarations of Interests in the Proceedings**

None

COG-03/23 **Minutes of the Meeting held on 7th December 2022**

The minutes of the meeting held on 7th December 2022 were agreed as a correct record.

FEEDBACK FROM GOVERNORS

COG-04/23 **Governor Activities**

Michael Smith, Deputy Lead Governor, covered this agenda item as Shirley Holmes, Lead Governor, had lost her voice. Michael advised that the Governors had met recently to hear from those Governors that had taken part in board walkabouts and had observed board sub-committee meetings. It was agreed that both had been very useful endeavours.

Michael highlighted the Governors Away Half Day which had proved very informative with a segment on membership and also the opportunity to speak with the Non-Executive Directors. Michael thanked everyone for their time and hoped that a similar session would take place in the future.

Michael noted that the Governors had been very busy over the past three months and it was good to see Governors observing sub-committee meetings and taking part in walkabouts and the away day to help them become better acquainted with the Non-Executive Directors.

The Council NOTED the report.

COG-05/23 **Patient Experience Group (PEG) Report**

Chris Howorth, Chair of PEG, took the report as read and highlighted Lilly Evans' feedback on her recent walkabout. Chris encouraged Governors to take part in the walkabouts if they were able to. It was added that there was an issue the Group wanted to raise regarding car parking charges and the Chief Executive encouraged a conversation so the reasons for increasing the charges could be explained. Chris **AS**

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	advised that it related to the difference in charges between the Runnymede car park, located in the hospital grounds, and the Trust's car park charges. Ellen Nicholson advised that she had raised her concerns regarding patient experience via the Membership and Engagement Manager and had received wonderful feedback. Since raising her concerns, squash and water were now provided to those patients that were waiting. The Chairman was pleased to hear the positive feedback and advised that when volunteers were designated to areas they were able to undertake tasks such as making tea and providing refreshments. The Council NOTED the report.	
COG-06/23	**Membership and Community Engagement Group (MCEG) Report** Lilly Evans, Chair of MCEG, took the report as read. Lilly advised that the meeting had not been as well attended as previously and encouraged Governors to join the group. Lilly advised that the Group had discussed the importance of engaging with the existing membership and not necessarily increasing the membership. Lilly highlighted that the Director of Strategy and Sustainability had been active with the Bourne Education Trust and welcomed further opportunities to engage with younger students. Lilly advised that there had been no magazine or monthly bulletin since November 2022 and understood a magazine was due to come out in March. Lilly understood that stories were shared via social media but many members were missing out. It was added that Governors were not asking for anything more or in particular but just that good stories were shared with members. Lilly requested that anyone that had influence in this area to action this request. The Associate Director of Corporate Affairs and Governance advised that an action plan had been pulled together from the Governors Away Day and this included Aspire and bulletins. She offered her assurance that actions would be taken forward. The Director of Strategy and Sustainability advised there was a good action plan in place and would sit under the auspices of MCEG. It was added the Trust Strategy had now been released and shared with the Governors as well as the members. A good conversation had taken place with the Bourne Education Trust and it had been suggested that 15-20 students would be put forward to discuss the offer to younger members.	**SMa**
	Andy Brown reiterated the offer he made at the Governors Away Day to help as a sounding board to the Communications Team. Lilly thanked the Director of Strategy and Sustainability for his continued work with schools. The Chairman reminded Governors of their two main roles, the second of which representing the members and urged Governors to support the work being undertaken by MCEG. Richard Evans advised that he had a daughter at school and was aware how students wanted to access to the NHS to assist with their career prospects and wondered whether some communications could go out inviting students to a recruitment style evening. The Director of Strategy and Sustainability advised that this could be added to the action plan and in the meantime was happy to have a conversation regarding Richard's daughter.	**RE/TS**

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The Council NOTED the report.

PERFORMANCE

COG-07/23 **Assurance Report**

The Chief Executive advised the report highlighted how busy the Trust had been and also provided an update on activities and finance.

The Chief Executive referred to the CQC inspection in Maternity and how the Trust was working on improvements which included: in triage; filling vacancies and the use of main theatres for caesarean sections. The Chief Nurse advised that a weekly meeting took place with the Integrated Care Board to go through the recovery plan. The draft report issued by the CQC was currently being checked for accuracy and the Trust was awaiting the final report, although the Trust was already implementing the changes needed. Regular walkabouts to Maternity were being undertaken and the space allocated to triage had already improved. A new Director for Maternity had been appointed and would begin in her position in April 2023. Workforce issues were being tackled via the Integrated Care System (ICS).

The Chief Executive highlighted the industrial action by junior doctors taking place the following week and advised that plans were in place to mitigate workloads by ensuring consultants were on hand to support patient care.

The Chief Executive referred to the planning cycle and how the Trust was working with colleagues to meet operational goals by triangulating the finance plan, the workforce plan, activity plan and recovery narrative.

The Main Effort initiative which helped to support patients that did not need care in a hospital setting was mentioned.

The Chief Executive advised that the implementation of the Sectra PACS system had gone well. Sectra was the system used for viewing x-rays and other radiology reports and images. It was added that during a recent walkabout the Chief Executive had heard from radiology staff on how pleased they were with the system.

The Chief Executive touched upon the Rt Hon Patricia Hewitt's review into Integrated Care Systems and how the Chief Executive was able to feedback and influence the report.

The Chief Executive was pleased to report that the Trust was likely to get back to the forecast deficit position by the end of the financial year. Cash balances were in a good position but capital spend was slightly behind.

The Chief Executive turned to the Board Assurance Framework (BAF) and advised that a comprehensive review had taken place with no significant changes.

Malcolm Cressey referred to the recent CQC inspection in Maternity and was concerned to hear that the senior leadership had been surprised with the content of the report and how he considered it was important to ensure all departments were working well. The Chairman advised that the Non-Executive Directors would be assuring themselves there were no other areas that were experiencing issues. Recent

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walkabouts focused on triage areas across the Trust. The Chief Executive confirmed that Maternity triage had been highlighted on the risk register and, with Marcine Waterman's assistance, a deep dive had been conducted of all risk registers. Some of the risks had been escalated to the corporate risk register. Malcolm was pleased to hear that the whole Trust was being scrutinised and that the leadership acknowledged the need for this.

Michael Smith was pleased to hear about the enhanced executive meetings taking place and suggested having meetings where consultants could meet up to ensure seamless pathways were in place. The Chief Executive advised that the enhanced executive meetings were a real priority and that that clinical directors, divisional directors and leadership teams attended to resolve issues. More recently an away half day had taken place to tackle Paediatric A&E.

Edwin Addis queried the Trust's high risk appetite in some areas and it was advised that there was a lower risk appetite in anything relating to patient care and a higher risk in other areas. John Machin added that due to the financial position the Trust was in it was important to look at innovation and transformation options. Ann Ooms queried whether risk areas were correlated and whether they impacted other areas. The Chairman advised that all risks were linked and an oversight was provided throught the Audit and Risk Committee.

In response to Ellen Nicholson in relation to the update she was required to provide to Woking Borough Council, the Chairman advised that she could advise that the Maternity Service had received a visit by the CQC and a draft report had been received for comment before the final report was due to be received in a couple of weeks' time.

The Council NOTED the report.

COG-08/23 **Performance Report**

The Chief Operating Officer highlighted the industrial action by junior doctors taking place the week of 13th March and assured the Council that robust plans were in place for each division to ensure areas were covered. Consultants would be deployed to cover cancer services, long waiters and urgent work. The Trust would be working closely with its partners including Social Services. In response to Marcine Waterman, the Chief Operating Officer advised communications with the public would be led by the Integrated Care System's Communications Team.

The Chief Operating Officer referred to the key standard of 78 weeks and advised there were currently 80 patients at risk of breaching; although this was much lower when compared against other trusts. Eleven patients would be treated by the end of the month. December had been extremely busy and the Trust was still stabilising from the launch of Surrey Safe Care. A programme had been introduced to ensure patients were safe while wating.

The Chief Operating Officer advised that the diagnostics service was continuing to improve and Endoscopy wait times had improved. Winter usually saw the introduction of escalation beds but due the Main Effort initiative there had been no need for them this winter.

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The Chief Operating Officer advised that cancer targets continued to be a challenge although performance had improved more recently with the Trust meeting four out of the 7 standards in January.

Edwin Addis queried how the Trust was coping with workforce challenges and it was advised that there was a challenge in Dermatology but this was being experienced nationally. Four consultants had recently been recruited and part-time positions introduced which had made an impact already resulting in the Trust hitting the Two Week Rule standard.

Lilly Evans referred to Cancer waiting times and requested assurance that the Trust was on track. The Chief Operating Officer advised that the Trust was working hard to recover its position and the introduction of the Surrey Heartlands Elective Centre would further help this work. It was advised that regular meetings took place to track patients in the system to ensure pathways were maintained. Marcine Waterman advised that the Non-Executive Directors went through the performance report and benchmarked where the Trust was as well as looking at trajectories. The Chairman added that Modern Healthcare and Quality of Care also scrutinised the report. John Machin advised that at Modern Healthcare, committee members debated the report extensively and due to the new reporting being introduced: Alert, Advise and Assure, this received a good degree of attention at Board. Jane Dale assured the Council that the report was a key focus for the Quality of Care committee members and assurance was provided that patients waiting were being clinically checked to ensure their safety.

The Council NOTED the report.

COG-09/23 **ED Performance Deep Dive**

The Chief Operating Officer advised that the recent report published by the BBC regarding ED Performance across trusts had conveyed incomplete information for the Trust as it did not include Walk In Centre figures; namely Ashford Health Centre located at Ashford Hospital and Woking Walk In Centre as information for other trusts had.

The Chief Operating Officer advised that December 2022 had been very busy with figures rising to 405 attendances in A&E, whereas before the pandemic attendances were around the 300 mark. It was explained the reasons for the high attendance included the incidence of Streptococcus A (Strep A) and the doubling of Paediatric attendances.

The Chief Operating Officer turned to the time ambulances remained at the hospital of 60 minutes or more and although this had been a challenge in December, in January only 8 had breached this target and in February there had been none. This target had never previously been achieved in the last two years and never during a winter period.

The Chief Operating Officer advised that Paediatric A&E had been moved to a larger space in December and a Divisional Director for ED had been appointed. Work had been undertaken to improve flow through the hospital and plans were in place to move discharge timings to earlier in the day.

The Chief Operating Officer highlighted that more junior doctors and nurses had been recruited and there were now 14 Consultant staff on the rota when previously there had been 10 in December 2022.

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The Medical Director turned to the Main Effort about how this initiative helped on where to put resources. During the pandemic there had been the opportunity to evaluate who needed to come into hospital for treatment and who was better off at home to avoid infection or further deterioration in their standard of health. Further data was gleaned on what proportion of patients did not need to be hospital. Tracking lists had been in place for cancer care for a number of years and these were now being put in place for the Main Effort. The Medical Director highlighted how the bed base at the Trust had increased in the past and this had been similar across the Integrated Care System (ICS). The Summary Acute Provider Indicator Table (SAPIT) indicated the bed base had reduced to allow for reinvestment in the community. The new 14 Consultant ED rota allowed the Trust to extend hours of operation and there had been changes implemented in Paediatric pathways. Readmissions had been moved away from the ED pathway and doctor staffing models had been reviewed.

Michael Smith queried how many patients attending the Walk In centres then proceeded to be seen in the ED and the Chief Operating Officer advised numbers were very low but that more attended the ED when presenting in the UTC first and confirmed this data was included.

STRATEGY

COG-10/23 ***Modern Healthcare*** **– Surrey Heartlands Elective Centre**

The Programme Director for Surrey Heartlands Elective Centre highlighted how during the pandemic people had delayed seeking treatment and were now presenting which meant waits for surgery had increased substantially. The Government had introduced a recovery programme to tackle waiting lists and had implemented 80 elective surgery hubs. The Trust had been successful in its bid and would be building the Surrey Heartlands Elective Centre at Ashford Hospital. This would further increase capacity at Ashford and would also assist the Royal Surrey and Surrey and Sussex with their waiting lists. The centre would allow for three types of procedures to take place in one area and best practice would follow. The centre would also allow for the training of junior doctors to be provided.

The Programme Director for Surrey Heartlands Elective Centre advised that two new theatres would be built at Ashford and a separate Ophthalmology procedure suite would be incorporated allowing for two patients to be treated at the same time. The flow through theatres would become more efficient using the Get It Right First Time (GIRFT) principle to improve productivity.

The Programme Director for Surrey Heartlands Elective Centre shared the plan of the ground floor detailing where the two new theatres would be located.

In response to Andy Brown, it was advised that the two new theatres would be in place at the beginning of 2024 and would be funded, including the day to day running, by the Government. The Chief Financial Officer advised that it was part of the old elective fund and would evolve over time becoming a pooling arrangement in the system. The Programme Director for Surrey Heartlands Elective Centre advised that Orthopaedics would remain on the second floor.

The Chairman highlighted that this was the first project of the provider collaborative and would be instrumental in reducing waiting lists.

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	The Council NOTED the update.	
COG-11/23	**Any Other Business**	
	Andy Brown found the ED Deep Dive very useful and suggested this could be shared with the members.	
	Frances Ansell requested details of the Non-Executive Directors' responsibilities.	**AS**
COG-12/23	**Date of Next Meeting**	
	Wednesday 7th June 2023, 4-6pm	

KEY	
✔	Complete
ND	Not due
---	On track

Action Long

Meeting Date	Minute Ref	Topic	Action	Lead	Due Date	Update	Status
8.03.23	**COG-05/23**	**Patient Experience Group (PEG) Report**	Arrange a meeting between Chris Howorth, JS, AF and SM	**AS**	ASAP	Issue covered at the Informal meeting with the Chairman and Chief Executive on 10th May 2023.	✔
8.03.23	**COG-06/23**	**Membership and Community Engagement Group (MCEG) Report**	Develop action plan resulting from Governors' Away Day	**SMa**	ASAP	Action plan developed and presented to the Membership and Community Engagement Group on 17th May 2023	✔
8.03.23	**COG-06/23**	**Membership and Community Engagement Group (MCEG) Report**	Richard Evans to speak with the Director of Strategy and Sustainability re his daughter	**RE/TS**	ASAP	Met on 23rd March	✔
8.03.23	**COG-11/23**	**Any Other Business**	Share details of NED responsibilities	**AS**	ASAP	Sent 13th March 2023	✔