Ashford and St. Peter's Hospitals NHS Foundation Trust

OPEN MEETING OF THE COUNCIL OF GOVERNORS
7th June 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**
	Susan Bell	Public Governor, Runnymede, Surrey Heath, Windsor and Maidenhead	**SB**
	Tracey Bradshaw	Staff Governor, Nursing and Midwifery	**TB**
	Andy Brown	Staff Governor, Volunteers	**AB**
	Rose Chandler	Appointed Governor, Spelthorne Borough Council	**RC**
	Kate Colban	Staff Governor, Allied Health Professionals	**KC**
	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**
	Ellen Nicholson	Appointed Governor, Woking Borough Council	**EN**
	Aidan Parsons	Staff Governor, Ancillary, Admin, Clerical and Managerial	**AP**
	Michael Smith	Public Governor, Woking and Guildford	**MS**
	Anthony Tweh	Public Governor, Hounslow, Kingston-upon-Thames, Richmond-upon-Thames and Rest of England	**AT**
	Sylvia Whyte	Public Governor, Runnymede, Surrey Heath, Windsor and Maidenhead	**SW**
APOLOGIES:	Miranda Alcock	Public Governor, Woking and Guildford	**MA**
	Malcolm Cressey	Appointed Governor, Runnymede Borough Council	**MC**
	Melaine Coward	Appointed Governor, University of Surrey	**MC**
	Chris Frazer	Public Governor, Spelthorne	**CF**
	Chris Howorth	Appointed Governor, Royal Holloway University	**CH**
	Mohamed Imam	Staff Governor, Medical and Dental	**MI**
	Chris Kane	Non-Executive Director	**CKa**
	Carmel Keane-Maher	Public Governor, Spelthorne	**CKM**
	Ann Ooms	Public, Governor, Elmbridge	**AO**
	Helen Pernelet	Public Governor, Elmbridge	**HP**
	Tom Smerdon	Director of Strategy and Sustainability	**TS**
	Arun Thiyagarajan	Non-Executive Director	**AT**
	James Thomas	Chief Operating Officer	**JT**
IN ATTENDANCE			
	Dami Adedayo	Non-Executive Director	**DA**
	Jane Dale	Non-Executive Director	**JD**
	David Fluck	Medical Director	**DF**
	Ruby-May Grimshaw	Chertsey High School Student	**RMG**
	Donald Iro	Non-Executive Director Designate	**DO**
	Shashi Irukulla	Deputy Medical Director	**SI**
	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**
	Nuno Pina	Charitable Funds Co-ordinator	**NP**
	Julian Ruse	Associate Director of Performance	**JR**
	Julie Smith	Chief Executive	**JS**
SECRETARY:	Anu Sehdev	Membership and Engagement Manager	**AS**

Minute **Action**

COG-13/23 **Apologies**

Apologies as listed on the previous page.

Shirley Holmes, Lead Governor, stated that it was the Chairman's last Council of Governors meeting and that she, on behalf of the Council, wanted to thank the Chairman for his contribution and commend him on how accessible and supportive he had been with the Governors. The Chairman had ensured the Governors had received good and regular communications and had recently allowed them to attend sub-committee meetings which had increased their understanding of Trust business. Shirley considered the Chairman was a great ambassador for the Trust and went above and beyond his role. The Chairman advised that he had thoroughly enjoyed his time at the Trust and wished the Trust well with all its future endeavors.

COG-14/23 **Declarations of Interests in the Proceedings**

None

COG-15/23 **Minutes of the Meeting held on 8th March 2023**

The minutes of the meeting held on 8th March 2023 were agreed as a correct record.

COG-16/23 **Matters Arising**

It was noted that all actions on the action log were now complete.

FEEDBACK FROM GOVERNORS

COG-17/23 **Governor Activities**

Shirley Holmes, Lead Governor, advised that it had been a busy time for Governors and wanted to highlight the Pride in Nursing and Midwifery Day that she and Tracey Bradshaw had attended recently. There had a real buzz in the room and Shirley encouraged Governors to attend future events. Shirley advised that three Governors had attended an NHS Providers Governor Focus session and that she would be arranging a session for the three Governors to update the rest of the Council on what they had learnt.

The Chairman thanked the Governors for their time and commitment to meetings and events.

The Council NOTED the report.

Minute		Action
COG-18/23	**Patient Experience Group (PEG) Report** Shirley Holmes, Lead Governor, presented the report in Chris Howorth's absence. Shirley advised that it was a good session with 45 minutes dedicated to Pharmacy and Toks Ogunbanjo, Divisional Director for Diagnostics, Therapeutics and Cancer Services, explaining processes and responding to queries. Following this was the Freedom to Speak Up (FTSU) Guardian, Elizabeth Tysoe, when a good lively discussion ensued. The Chief Nurse went through the Quality Report and advised that the target for the Friends and Family Test (FFT) had been reduced from 20% to 10%. Shirley advised her personal view was that for the most part patients were happy with the treatment and care they received and were then less likely to complete the survey. The Chairman advised that using volunteers to encourage patients helped but considered similar to the Trip Advisor effect only the very happy or very unhappy tended to complete surveys. John Machin referred to the point about some staff not realising they were being performance managed and considered that Elizabeth should raise this with the Executives. The Director of Workforce Transformation added that through listening to people an insight of how to reflect on feedback was provided. The Chairman advised that Elizabeth was very active in her role. Anthony Tweh reflected on the groups of people who experienced barriers to speaking up. The Chief Executive advised that the FTSU was another way of raising concerns and it had been highlighted that middle management needed to be supported to enable them to proficiently manage and be the first line of contact. Work was underway on how to develop a programme to help this process. The Council NOTED the report.	
COG-19/23	**Membership and Community Engagement Group (MCEG) Report** Lilly Evans, Chair of MCEG, took the report as being read. Lilly advised that it had been a good meeting with Kayo Rippingham from Communications updating the Group. Bulletins had been reinvigorated and were of a high quality. The Associate Director of Corporate Affairs and Governance and Director of Strategy and Sustainability had also attended and an extensive discussion on the action plan resulting from the Governors' away day had taken place. Assurance that expectations were aligned was received. Richard Evans's daughter, who is a school teacher, had approached her school about membership. It was hoped the Community Day would result in many more new members. Lilly requested more members for the Group and to contact the Membership and Engagement Manager should they be interested. The Council NOTED the report.	**All**
	PERFORMANCE	
COG-20/23	**Assurance Report** The Chief Executive advised the report highlighted a very busy time for the Trust, the work that was ongoing and provided oversight. A few items were highlighted.	

Minute **Action**

The Chief Executive advised that relationships with staff were a key focus and four listening events; two at Ashford and two at St Peter's had taken place. The purpose of these events had been to reflect on the last six years for the Chairman and last year for the Chief Executive. A session with the consultants had also taken place with Jane Dale. 100 or so attended and attendees reflected on how they were working through challenges. It was advised that additional support for clinical staff was available with Surrey Safe Care and the Trust was currently in the stabilisation phase.

The Chief Executive advised that the Trust had gone out to recruit a Chief Digital Officer who would sit on the Board as a high level focus on digital was needed.

Industrial action during April had been challenging and more industrial action was expected from the 14-16 June. The Trust would be working with all professional groups to ensure adequate cover.

The Chief Executive advised that HR and colleagues had worked hard to fill vacancies resulting in less than 4% vacancy rates for nursing and midwifery staff.

The Chief Executive advised that there would be further detail provided later by the Chief Financial Officer on the year end finances but that this year's plan included a £17.5m deficit forecast. This was a challenging target which included ensuring services were providing value for money and were performing at maximum productivity. Initiatives included the Surrey Elective Centre at Ashford Hospital where hip, knee and eye surgeries would be taking place, and working with Royal Surrey and ICS colleagues. It was clear there was a need to work differently and decisions were driven by the need to improve patient outcomes and ensuring only patients that would benefit from a hospital stay were in hospital. More work needed to be done and this included improving the paediatric pathways.

The Chief Executive advised that a workshop including the four acute hospitals looking at maternity, neonatal and paediatric services had taken place. Feedback had been very positive. The North West Alliance continued to work on place. It was important to support GPs to care for patients in the community to avoid the need for attending hospital.

The Chief Executive advised that the Brooklands Museum and Bourne Education Trust were recently awarded 'Learning Programme of the Year' in the Museums and Heritage Awards 2023 for its 'Learning Without Borders' programme. The Medical Director highlighted how he had attended the Brooklands Innovation Academy at Brooklands Museum the previous year and how fantastic the event had been for young people. This was something that would continue going forward.

The Chief Financial Officer provided details of the year-end financial position advising that although there had been some slippage in Quarter 4, the Trust had been able to achieve its target of £12m deficit. The Trust had received £6m from the ICS as it had demonstrated good fiscal management which would be maintained going forward although not without its challenges.

Lilly Evans queried where the Trust stood in its strategic objectives, especially around ensuring improved outcomes for patients. The Chief Executive advised that the Trust continued to try to deliver the best care for patients. The 4 hour A&E and cancer targets had been softened as it had become clear these were unrealistic in the current climate but did not mean the Trust was any less ambitious. For example, the Trust was able to

over achieve in its RTT target but costs did play a part in this and there was a need to think and work differently. The Associate Director of Performance added that the softened targets would appear in the next performance report.

Rose Chandler advised that when she had been campaigning during the recent local elections, people had shared with her concerns about not be able to get GP and hospital appointments and queried where money was being targeted. The Chief Executive advised that money received was in the form of income and went towards paying staff and purchasing consumables to deliver services. Rose added that concerns had been raised with her about the wait in A&E and patients having to sit on chairs as there were no beds available. The Chief Executive advised that the Trust had invested in emergency care and had developed the Urgent Treatment Centre, Clinical Assessment Unit and Ambulatory Care Unit. It was not good to hear that patients were left sitting on chairs but emergency care was very busy at times but the wait time was continually communicated and other areas of support were signposted. It was important to support GPs when they needed a clinical opinion to avoid hospital attendance as well providing more support to frail and elderly patients when they left hospital.

Ellen Nicholson referred to the metrics and measurements and the single oversight framework. She was aware the Trust had a good reputation and queried whether it would aspire to achieve higher targets. The Chief Executive agreed the Trust had a good track record and would try to over-achieve where possible whilst ensuring value for money.

The Council NOTED the report.

COG-21/23 **Performance Report**

The Associate Director of Performance presented the report in the Chief Operating Officer's absence. It was advised that the report covered April when there had been further incidences of COVID and the Trust was in the recovery phase. During this phase and since, the Trust had recorded the lowest number of ambulance delays and there was an average of around seven patients waiting for a bed in the Emergency Department. There was a capacity issue for mental health patients nationwide and an average of six beds were being used for this service at the Trust. The Trust continued with the Main Effort initiative.

The Associate Director of Performance advised that during 2022/23 NHS England had set ambitious targets for recovery, requiring providers to reduce waiting times for patients, with a focus on those waiting the longest for treatment. The aim was to have zero patients waiting over 104 weeks by July 2022 and to reduce the number of patients waiting over 78 weeks for treatment by March 2023. Despite the challenges posed by the increased demand for services, COVID, and the disruption caused by the Surrey Safe Care implementation, the Trust had been able to meet these targets. The Trust's Efforts had led to the successful reduction of waiting times, with no patients waiting over 104 weeks by July 2022 and only seven patients, who opted to delay treatment, waiting over 78 weeks for treatment by March 2023. It was advised that the Patient Clinical Harms Group monitored safety implications for patients with long waits. The next target would be no patient waiting more than 65 weeks in March 2024. The report provided details of the average wait for a first appointment per specialty. There was a programme to improve waiting times in place and this included tackling Did Not Attends (DNA). The Trust benchmarked well in RTT (Referral to Treat) standards nationally.

Minute **Action**

The Associate Director of Performance advised in March the Trust had reported compliance in 5 of the 8 standards and that the Trust had been impacted by the loss of capacity due to the industrial action by junior doctors and Easter bank holidays although had been able to reserve and rapidly reschedule capacity to support Two Week Rule (TWR) patients. May had seen further improvement in statistics.

The Associate Director of Performance advised that diagnostics had been impacted again due to the issues mentioned above with April's performance being marginally lower than March's. The Trust benchmarked well nationally, although further industrial action would impact performance.

Ellen Nicholson referred the shortage of mental health care in the area since the new Abraham Cowley Unit (ACU) would not have psychiatric capacity. It was also understood that the Police would no longer attend incidents involving mental health issues. The Chief Executive advised that the Trust would be working closely with the ACU. It was clear there were insufficient services and it was important to address issues early on, through schools, for example. The Police had referenced not attending such cases, so working on solutions and continuing to support Surrey and Borders Partnership FT (SABP) would be very important. The Chief Executive referenced eating disorders and a pilot study being implemented on how paediatric nurses could support SABP and early improvements had been noted.

Tracey Bradshaw queried how assured the Trust was that patients waiting were safe and the Associate Director of Performance advised that patients were able to alert the service or go through their GPs should their condition deteriorate. Regular reviews were also conducted and patients were contacted via text asking them a series of questions. During periods of industrial action priority and urgent patients were being looked after. Six patients had had their cancer operations cancelled but they were quickly rebooked.

The Chairman hoped the Governors had found the report useful and advised this was the same report that was used at sub-committees and Board meetings.

The Council NOTED the report.

STRATEGY

COG-22/23 ***Quality of Care*** **– Maternity CQC Update**

The Chief Nurse referred to her paper which presented an update on actions. She reminded the Council that the CQC had visited the Maternity Unit during 6-8 January and had issued a Section 29a warning notice. The Team had worked quickly through the actions and there was now nothing left outstanding. The Trust had been commended by NHS England on its swift action and had been impressed by its transparency. Working through the actions had led to the workforce being strengthened in triage and improved oversight by clinicians. The area had been visited by key personnel and feedback had been positive.

The Chief Nurse was confident of future compliance. She advised that Val Wilson had been appointed as the Improvement Director for the service and Toby Cooper as the new Director of Midwifery. A new structure of meetings had been introduced for oversight purposes.

Minute **Action**

Another inspection by the CQC was expected but it was not known when, but probably at the end of the year. The time between inspections allowed the service to work on the changes. The Chairman added that nearly all of the trusts that had been inspected so far had come down in ratings.

The Chief Nurse advised that Region was really impressed with the Trust's response and considered it was an exemplar in its response to turn things around.

Shirley Holmes congratulated the Chief Nurse on her secondment although the Governors were sad to lose her. It had been an absolute pleasure to work with the Chief Nurse.

Tracey Bradshaw referred to the workforce problem and was pleased to learn how the Trust was undertaking its own recruitment for midwifery positions. The Chief Nurse advised that an automatic job offer had been implemented and was pleased to advise that 17 new staff would be starting in September.

Sue Bell thanked the Chief Nurse for a great update. Sue requested a timeline for the lift that was required. The Chief Financial Officer advised that the work was currently in the planning and tender stages and it was expected that the lift would be installed by the end of the year.

Jane Dale advised that she had previously been Maternity Champion and that she was now offering her support which included undertaking walkarounds and confidential drops ins for staff. It was intended that Arun Thiyagarajan and herself would be conducting an assurance exercise during the walkarounds so that the service was in a good position when the CQC revisited. The Chairman added that the remaining non-executive directors would be buddying up with other divisions.

The Council NOTED the update

COG-23/23 ***People*** **– Staff Survey**

The Director of Workforce Transformation shared a video which highlighted the headlines of the staff survey. The staff survey had been conducted in autumn 2022 and this was during the energy and cost of living crisis with industrial action on the horizon. The key headlines were:

- ASPH ranked #23 (compared to #21 in 2021) in the country for overall positive score when compared against other acute and acute community trusts.
- 58% (63% in 2021) would recommend the Trust as a place to work, compared to a national average of 57%
- Overall score for staff engagement saw a slight decrease to 6.9 (7 in 2021) , which is slightly above the average for acute trusts, it is ASPHs lowest score in the last 5 years
- 60% (63% in 2021) believe that the organisation takes positive action on health and wellbeing, compared to 56% average score
- 73% (78.6% 2021) believe the care of patients is the Trust's top priority, compared to national average 87%
- 25% of results scored green on the RAG score, identifying a positive score when compared to the Picker average

Minute **Action**

The Director of Workforce Transformation advised that the Trust scored average or above average in the motivation scores.

The Trust had scored around average for the questions on whether it would be recommended as a place to work for or get treatment in but was not as high as in previous years

The Director of Workforce Transformation advised that most of the responses around the People Promise were slightly above average apart from being slightly lower in the statement “We are always learning”.

The combined results for Surrey Heartlands in three of the questions were as follows:

1. I would recommend my organisation as a place to work - All staff groups in Surrey Heartlands observe an increasing trend from the 2021 results
2. How often, if at all, do you feel burnt out? - All staff groups in Surrey Heartlands observe an increasing trend from the 2021 results
3. I often think about leaving this organisation - The total respondents who often think about leaving is 29.3%

The Director of Workforce Transformation advised that three pulse surveys had been conducted more recently and despite it being a better period in staffing numbers and improved provision of facilities and wellbeing offers, including catering and the gym, many staff had expressed they did not feel the Trust was doing enough in these areas. On the questions around what made staff stay and what motivated them, “team and colleagues” was the overwhelming response.

The Director of Workforce Transformation turned to the progress made and outlined the various offers available to staff which included easy access to the Citizens Advice Bureau, Barclays Bank, a weekly fruit and veg stall and various deals and discounts under the Financial Friday tag. There had been considerable investment in the Freedom to Speak Up Guardian role. It was advised that the Chief Nurse and Deputy Chief Nurse had introduced an accreditation programme across 17 wards and the shared decision-making council pilots were working well. Forums to discuss challenges and empower staff to make decisions and flexible working options to reduce the barriers to working were in place. Under “we are always learning” a lot of work had been undertaken including Surrey Heartlands rolling out a Foundation to Coaching Skills programme and the Trust recently beginning a career development programme. Kate Colban had done some excellent work with allied health professional staff to include work under the “grow your own” initiative. It was added that the Trust was involved in an initiative called Scope for Growth which was a national programme which identified and coordinated diversity in teams, building on existing succession plans and providing tailored career development support.

The Director of Workforce Transformation referenced the Equality, Diversity and Inclusion (EDI) observations and considered having the EDI officer at a future meeting would be useful. In relation to the questions relating to culture the Trust was not too different from the Picker average.

The Director of Workforce Transformation outlined the need for a refresh and this involved:

Minute **Action**

- Increasing understanding of the vision and service brand – embed a common purpose
- Connecting relationships across tiers of the organisation – shared values
- Preparing people for leadership roles – enable high performance
- Autonomy and service level decision making

The Director of Workforce Transformation touched upon the new Organisational Development Steering Group and key themes for the Group.

Lilly Evans advised she had found the presentation useful and comprehensive and queried how having a low response rate the Trust was confident that the key areas were being focused upon. The Director of Workforce Transformation advised that the response rate was still above the national response rate so she was confident the right areas were being focused upon. A further multi-variant analysis was being worked upon and the Medical Director advised this was around how each area interacted and providing more detail. The Chief Nurse advised that the timing of the survey aligned with a time when staff had been under sustained pressure for three years and they were burnt out and some were showing signs of PTSD. The health and wellbeing piece was very important and there were signs there was a shift in how people were feeling. Retention of staff remained another important element. It was considered that the next survey would be more promising.

Kate Colban referred to the response rate and whether other ways to encourage wider participation had been considered. Kate highlighted that there were many staff who did not regularly use a PC, for example. The Director of Workforce Transformation advised that paper surveys had also been available and that iPads had been provided to housekeeping staff, for example. But ideas were welcomed. The Chairman considered using phones might be a way forward. Kate turned to the comments section and how these were analysed. It was advised that each division reviewed responses and developed an action plan.

Sue Bell queried whether the results of the additional analysis would be ready in time to feed into the refresh and it was advised that it was hoped these would be ready in time for the People Committee meeting in July. Sue also queried whether the survey had included questions around manager performance and it was advised that there were questions but that they were reflected slightly differently. Sue advised that she had recently attended the Modern Healthcare Committee meeting where it had been indicated that vacancy rates and retention of staff were proving challenging in the Estates department and queried what was being done to alleviate this. It was advised that appraisals were routinely conducted and that there was an action plan in place.

Lilly Evans referred to the low response rate and whether this was statistically significant in all groups in order to draw conclusions. The Medical Director advised that the multi-variant analysis would indicate the level of assurance.

The Director of Workforce Transformation encouraged Governors to email with any further questions.

The Council NOTED the update.

Minute		Action
COG-24/23	**Any Other Business** None	
COG-25/23	**Date of Next Meeting** Wednesday 6th September 2023, 4-6pm	

KEY	
✔	Complete
ND	Not due
---	On track

Action Long

Meeting Date	Minute Ref	Topic	Action	Lead	Due Date	Update	Status
7.6.23	**COG-19/23**	**Membership and Community Engagement Group Report**	Let the Membership and Engagement Manager if you are interested in becoming a member of the Group.	**All**	ASAP		