Ashford and St. Peter's Hospitals NHS
NHS Foundation Trust

OPEN MEETING OF THE COUNCIL OF GOVERNORS
9th September 2013, Education Centre, Ashford Hospital

PRESENT:	Mrs Linda Abbott	Public Governor – Spelthorne	**LA**
	Mr Simon Bhadye	Public Governor – Spelthorne	**SB**
	Mr Keith Bradley	Public Governor – Woking	**KB**
	Mr Brian Catt	Public Governor – Spelthorne	**BC**
	Dr Maurice Cohen	Public Governor – Woking	**MC**
	Mr David Frank	Public Governor – Surrey Heath	**DTF**
	Mr Godfrey Freemantle	Public Governor – Hounslow	**GF**
	Mr Keith Goodger	Public Governor – Richmond Upon Thames	**KG**
	Mr Arun Gupta	Staff Governor – Medical and Dental	**AG**
	Mrs Sue Harris	Staff Governor – Nursing and Midwifery	**SH**
	Mr Chris Howorth	Appointed Governor – Royal Holloway University	**CH**
	Mrs Margaret Lenton	Public Governor – Windsor and Maidenhead	**ML**
	Mrs Susan Lockwood	Public Governor - Runnymede	**SLo**
	Ms Michèle Low	Public Governor - Hounslow	**MLo**
	Mr Steve McCarthy	Public Governor - Elmbridge	**SM**
	Mrs Aileen McLeish	Chairman	**AMcL**
	Mrs Diana Manthorpe	Staff Governor – Volunteers	**DM**
	Cllr Hugh Meares	Appointed Governor – Runnymede BC	**HM**
	Dr Howard Manuel	Public Governor – Woking	**HMa**
	Mrs Judith Moore	Public Governor – Guildford	**JM**
	Cllr Jean Pinkerton	Appointed Governor – Spelthorne BC	**JP**
	Mr Andrew Ryland	Public Governor - Runnymede	**AR**
	Cllr Michael Smith	Appointed Governor – Woking BC	**MS**
	Mrs Tracy Ward	Public Governor – Runnymede	**TW**
APOLOGIES:	Dr Ann Gallagher	Appointed Governor – University of Surrey	**AG**
	Ms Samantha Lamb	Staff Governor – Admin and Ancillary	**SL**
	Mr Paul Wills	Staff Governor – Allied Healthcare Professionals	**PW**
IN ATTENDANCE:	Ms Valerie Bartlett	Deputy Chief Executive	**VB**
	Mr Philip Beesley	Non Executive Director	**PB**
	Ms Sue Ells	Non Executive Director	**SE**
	Dr David Fluck	Medical Director	**DFl**
	Mr Jim Gollan	Non Executive Director	**JG**
	Mr Simon Marshall	Director of Finance & Information	**SM**
	Ms Louise McKenzie	Director of Workforce Transformation	**LM**
	Mr Robert Peet	Director of Strategic Development	**RP**
	Mr Terry Price	Non Executive Director	**TP**
	Ms Suzanne Rankin	Chief Nurse	**SR**
	Mr George Roe	Head of Corporate Affairs	**GR**
	Mr Peter Taylor	Non Executive Director	**PT**
SECRETARY:	Mrs Anu Sehdev	Membership Manager	**AS**

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Minute **Action**

COG-33/13 **Declarations of Interests in the Proceedings**

No declarations of interests were noted.

COG-34/13 **Minutes of the Previous Meetings**

The minutes of the meeting held on 28th May 2013 were AGREED as a correct record.

The minutes of the special meeting held on 10th July 2013 were AGREED as a correct record apart from a superfluous bracket in COG 30/13 (fourth paragraph). David Frank, Lead Governor, raised his concern that a new draft of the KPMG reports had not been forwarded to Governors by the Trust auditors and it was agreed that the Head of Corporate Affairs would chase this up. **GR**

COG-35/13 **Matters arising**

The action log identified that most items were up to date in accordance with agreed time scales. Further clarification was provided on the following:

COG-45/12 Board Assurance – Integrated Governance and Assurance Committee

David Frank queried when this had been agreed and why there had not been any discussion with the Governors. The Chairman advised that the decision for non Governor involvement at subcommittee level had been undertaken by Board members. David expressed his surprise that this decision had been made without any discussion with the Governors especially when many other foundation trusts did have Governor input at sub committees. Michèle Low, Public Governor for Hounslow, added that she felt that Governors could potentially add value to the proceedings and further deliver the requirement to hold the Board to account. The Chairman agreed that a taskforce would be developed with participation from Governors and Directors and the matter would be reviewed further. **GR**

FEEDBACK FROM GOVERNORS

COG-36/13 **Governor Activities**

David Frank clarified that his objective was to provide information to the public on the full range of activities undertaken by Governors since the last Council of Governors in May 2013.

Keith Bradley, Public Governor for Woking, advised that he and Simon Bhadye, Public Governor for Spelthorne, were also members of the Ashford Outpatient Group.

The Council of Governors NOTED the report.

COG-37/13 **Chairman's Report**

The Chairman presented her report to the Council. David Frank sought clarification on whether those who had not yet had the opportunity to take part in the one to one meetings with the Chairman could partake at a later date. The Chairman confirmed that this was possible and encouraged.

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The Council of Governors NOTED the report.

COG-38/13 Patient Experience Group Report

Keith Bradley, Public Governor for Woking, presented highlights from the Patient Experience Group Report.

Keith advised that three meetings had taken place since the last Council and highlighted the unannounced visits conducted by six Governors. A further visit would be taking place on 25th October 2013 at 12 noon and Keith urged other Governors to take part.

Keith raised his concern on the poor attendance from Governors at the recent Quality Workshop. Keith explained how valuable these workshops were and how it was a great opportunity to meet other stakeholders. Keith advised that the next Quality Workshop would be taking place on 28th October 2013 at 12.30 pm and encouraged all Governors to attend.

Keith advised that a special meeting which took place on 10th July 2013 was around discussion on the project that the Patients Association would undertake. It had been decided that the project would investigate closer involvement with carers and their family. A second meeting on 29th August 2013 took place which included attendance from Celia Turnbull, Project Manager at the Patients Association, Dr Raad Nari, Lead Consultant in Elderly Care, the Service Improvement Project Manager and the Head of Patient Engagement and Experience as well as the Patient Experience Group members. It had been decided that the project would concentrate on elderly patients in the first instance and then developments could be incorporated into other areas.

Keith clarified that the project group would include two local ambassadors and two Governors from the Patient Experience Group. A junior doctor had also been identified to be part of the working group by Dr Nari.

The Council of Governors NOTED the report.

COG-39/13 Membership Report

Andrew Ryland, Public Governor for Runnymede, highlighted that there had been a modest increase in membership numbers and reiterated the importance of Governors increasing their endeavours in recruiting new members.

Andrew advised that the Annual Members' Meeting had been well attended and consideration would be given to holding the meeting at St Peter's Hospital in 2014.

Andrew advised that the Membership Manager had analysed the health events that had taken place in 2013 so far and ascertained that each event had attendance from new members and was able to confirm that the same members were not attending each event. Andrew confirmed that he had been provided with posters for the next two health events which he would be using to advertise the events in his local GP surgery and should other Governors want copies of the posters, he could provide these to them.

Andrew focused on the forthcoming health event for students and how this would enable the Trust to increase it representation in the young people category.

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Lastly, Andrew advised that a member had raised the possibility of Governors holding surgeries where members could come along and provide their feedback. Andrew advised that he would be trialling a surgery with his Runnymede colleagues and once a date had been finalised a plan and advertising the event would be looked into.

The Council of Governors NOTED the report.

STATUTORY

None

STRATEGY AND PERFORMANCE

COG-40/13 **Strategic Objective 2: Workforce**

The Director of Workforce Transformation and Sue Ells, Non Executive Director, presented their paper on the Strategic Objective 2: Workforce.

The Director of Workforce Transformation advised that the Trust currently had 350 whole time equivalent vacancies and that 250 people were in the pipeline to cover these posts. If all these people were employed then the Trust would have no nursing vacancies. It was apparent that the Trust did not handle retention of staff well. The Trust's current turnover was 14.2%, a little off the target of 13%.

To deal with the challenges of retaining staff, the Trust needed to understand the reasons for staff leaving. Exit questionnaires had been sent to 153 staff and it was the Trust's endeavour to interview all staff that were leaving or request they complete a questionnaire. Reliance on agency staff had reduced and bank staff were being utilised. Rates with agencies had been recently re-negotiated.

The Director of Workforce Transformation advised the importance of ensuring staff had the appropriate skills to provide high quality patient care and the priorities for the Trust were:

- Integrating education into one place and developing cohesive multi-disciplinary strategies around education, innovation and research;
- Completing a radical overhaul of management training;
- Developing a career and training pathway from HCA Band 2s through to Registered Nurse at Band 5 to ensure that staff had the skills and competencies to deliver high quality patient care;
- Maximising opportunities in the new education and training architecture and
- Making mandatory and statutory training "feel real".

Other areas highlighted included the management of leadership and performance issues and how to handle these situations in the best way. Ideas included the use of pod casts and CDs which could be listened to whilst travelling by car.

Further discussion around providing information on how to access foundation nursing courses and work around citizenship and leadership coaching took place.

Different approaches to improving engagement with staff including the recent on-line "wall" where staff had been able to post their comments were highlighted. The wall had initially been controversial but over time the tone of people's

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comments changed with many staff expressing more positive comments in response to negative ones. It had been decided to continue with the wall but this time encouraging staff to engage on the Trust's values and ascertain what the Trust expected and what the Trust did not want to see.

Ideas around how to motivate staff were highlighted including the new "Wow Awards" which had proved to be an excellent way of patients being able to provide feedback regarding staff members.

Motivating staff was another concern and how to develop leaders in the organisation.

David Frank queried whether the Trust had the correct structure and whether ground level staff were doing a good job and whether management styles were appropriate. The Director of Workforce Transformation advised that the Manager's Toolkit was being looked at, the focus being on how to teach technical skills and the skills needed to handle performance issues.

The Chief Nurse highlighted the importance of supporting and encouraging development rather than using discipline. Michèle Low advised she felt encouraged by the presentation and the discussion that had ensued.

Simon Bhadye, Public Governor for Spelthorne, expressed his view that he had seen many proposals for improving staff morale during his time and seen no real improvements. Simon hoped that the improvements put forward today would have a better outcome. Sue Ells advised she was pleased with the discussion that had ensued and confirmed she and the Director of Workforce Transformation would arrange a session to provide further detail to Governors on the developments in progress. **SE & LM**

The Chief Nurse understood Simon's concern but advised that she had been a nurse for 25 years and the challenge was now how to engage staff and this was constant and changing. Nurses had more patients to look after than before. During the recent 24 hour hospital observation conducted at the Trust it had been apparent that staff felt more supported and were more engaging.

Tracy Ward, Public Governor for Runnymede, advised she was encouraged by the Trust looking at the coaching approach and queried whether there was a timeframe to develop changes and feel the impact of these changes. Sue Ells advised that smaller groups would be developed to look at how to address the challenges the Trust faced and staff would be encouraged to become coaches with accreditation. There were already two doctors on board and two other senior staff were about to come on board.

Arun Gupta, Staff Governor for Medical and Dental staff, expressed his approval for the use of exit interviews as after 18 years working at the Trust he was aware that reasons for leaving were normally only shared with close friends and not widely known. Using exit interviews would help gain a better understanding for the reasons for leaving. Sue Ells advised that all organisations faced similar challenges with staff members.

Hugh Meares, Appointed Governor for Runnymede Borough Council, queried whether Peter Taylor, Non Executive Director, felt that reducing the management structure would improve performance. Peter advised that in the past the Trust had adopted a more clinical unit structure and had now moved away from this. Clinical staff did not always possess the skills or time to audit

their departments to continually improve and it was felt that other management staff were best able to deal with this. Reducing the number of managers was widely recognised as not being the most efficient way. The Deputy Chief Executive highlighted that divisions were clinically led and supported by management and overall improved the patient experience.

Brian Catt, Public Governor for Spelthorne, queried whether areas including reception, outpatient and day surgery were being addressed and the Director of Workforce Transformation advised that all management areas would be covered especially those that were public facing as the Trust needed to ensure service was delivered at the highest possible standard from the first contact with the patient. Sue Ells thanked the Council for engaging with the proposals outlined.

David Frank advised that he had visited St Peter's back in 2006 and when he walked around the Trust now he has a sense that services were functioning better and things that had been tried in the past were now working, although he was aware that there was still a huge amount of work to be done. Philip Beesley, Non Executive Director, added that he had recently visited a ward and found the ward team engaged and less apologetic.

The Council of Governors NOTED the presentation.

COG-41/13 **Assurance Report**

The Deputy Chief Executive introduced the report highlighting the five sections: Internal Focus, External Outlook, Strategy, Regulation and Performance and welcomed comments from the Council.

David Frank was pleased to note that the paper was very detailed and provided the right amount of information the Governors needed.

David noted that the Trust was operating to capacity in Imaging and whether this meant that additional work could be taken on. The Deputy Chief Executive advised that the Trust had seen demand for diagnostics go up 17% per year and if capacity were to be increased then this would readily be utilised. The Deputy Chief Executive confirmed that an audit had been undertaken to check that Diagnostics had the right type of equipment to ensure the meeting of service needs and it had been highlighted that a third scanner would be needed some time in the future to meet the increase in demand.

Hugh Meares queried why there was no service after 5 pm and if service out of hours were to be incorporated what effect this would have to costs. The Deputy Chief Executive advised that many areas of the service provided limited out of hour services although it was evidenced that out of hours services were not necessarily to the benefit of the patient and their experience.

Chris Howorth, Appointed Governor for Royal Holloway University of London, queried whether a comparison had been conducted with other trusts and whether there was likely to be any differences. The Deputy Chief Executive advised that the Trust did benchmark favourably against others trusts and the service the Trust provided at the weekend was noted as being better. The Medical Director added that the service was more robust than before and the internal 24/7 service was one of many areas that had seen an improvement.

Tracy Ward highlighted section "1.4 Preventing Readmissions" and how costly this was to the Trust and stressful to patients and their families and queried why

discharge was not one of the work streams. The Deputy Chief Executive advised that the Trust carried out a wealth of discharge related work elsewhere and this had been so for a number of years, most notably under the remit of Readmission Prevention Programme sponsored by the Medical Director with input from primary and secondary care. David Frank felt the target was tough and little unfair when circumstances were outside the Trust's control. The Medical Director confirmed that not only were emergency readmissions investigated but elective readmissions were also closely monitored.

David Frank noted the increase in complaints concerning outpatients during July 2013 and the Chief Nurse advised that there was no analysis conducted for the reasons for this increase but explained that the rise seen was from four to six.

The Director of Finance and Information confirmed that contracts with commissioners had a component of over-performance built in.

The Council of Governors NOTED the report.

COG-42/13 **Emergency Care**

The Deputy Chief Executive presented the paper on Emergency Care which outlined the reasons why the four hour waiting time target was so important to the Trust and its regulators, as well as the plans in place to ensure performance against the standard was maintained throughout the coming winter.

The Deputy Chief Executive advised that the Trust felt the four hour waiting time target was a good thing as evidence showed that patients waiting longer than four hours in A&E were more susceptible to harm and there was an impact on complaints and mortality when the Trust did not deliver this target.

To enable the delivery of the four hour waiting time target the Trust had invested in staffing in the A&E, Medical Assessment Unit (MAU) and Surgical Assessment Unit (SAU). There were now more consultants in A&E and SAU and further investment during the winter would be undertaken. The Deputy Chief Executive realised that delivering the four hour target did put a financial burden on the Trust and staff were having to work differently to meet increased demands. It was clear that every year the demand on A&E rose by 5-6% and that there was no real period of time during the 24 hour shift that pressures eased. The Trust would be doing everything to ensure that patients received the best possible care and reduced readmission rates.

The Deputy Chief Executive advised that results for staff working in A&E in the recent staff survey had been good even though it was recognised that these staff worked in a considerably high pressured environment.

The Deputy Chief Executive further advised that the four hour target had been achieved in quarter one and results for July and August were also good. It was envisaged that the four hour target would be achieved for quarter two. The recent visit from the Emergency Care Intensive Support Team (ECIST) had provided positive feedback.

Looking forward the Deputy Chief Executive advised that the forthcoming winter would be challenging with an increase in frail, elderly patients visiting A&E. To meet the demand, A&E now had 5.4 WTE Consultant cover and a further three consultants would be recruited in January 2014. Another area of concern was Paediatric A&E due to the increase in demand. A new Ambulatory Care Unit

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next to A&E was due to open at the end of October which would be used to divert patients away from A&E. An Older People's Team would come into effect in November 2013 to help care for elderly patients. The SAU would be expanded to care for patients attending A&E with a surgical condition. Discharge practices and process would be examined and the Clinical Commissioning Group (CCG) had provided the Trust additional money to develop a Frail and Elderly Pathway. In addition the Trust would be playing a larger role in both health and social care whilst working closely with colleagues.

Howard Manuel, Public Governor for Woking, queried whether GPs could play a role in A&E and triage patients instead of nurses. The Deputy Chief Executive advised that a number of GPs did work closely with the Trust and this was through the Walk In Centres based in Ashford, Woking and Weybridge.

David Frank queried whether the Trust had received any extra resources in light of the recent Prime Minister's statement to increase resources in A&E departments. The Deputy Chief Executive advised that nothing was forthcoming yet but when funds became available the Trust would be making its case.

David Frank highlighted that the national vacancy rate at trusts was 5.7% and that the Trust's vacancy rate was 17%. The Deputy Chief Executive advised that it was widely recognised that it was challenging to recruit staff in outer London trusts as staff were prepared to travel and work in a London trust where they would be paid more. However, the Trust had made real inroads in recruiting staff to A&E and if the Trust's vacancy rate were to be revisited now, it would compare more favourably with the national average.

Michael Smith, Appointed Governor for Woking Borough Council, highlighted that approximately 250 people attended A&E daily and queried how many of these patients needed to be treated in A&E and whether it was possible for GPs to provide out of hours cover. It was advised that 20% of the 250 patients could most probably be treated adequately in another healthcare environment and approximately 50 – 60% of Paediatric A&E patients could be treated elsewhere. The Deputy Chief Executive advised that the CCG would be undertaking an audit on unplanned care.

The Medical Director advised that it was clear the a few patients did attend quite often, some as often as every two weeks. A lot of these patients were young and had mental health issues.

The Chief Nurse explained that once a patient was in an ambulance it was deemed necessary to take that patient to hospital. Work was being undertaken on the treatment of patients with End of Life care issues and those requiring catheter and cardiac care. The Deputy Chief Executive advised that there were a lot of initiatives being considered with the potential of paramedic staff being able to effectively triage patients, although at this moment in time there were not enough paramedic staff. The Chief Nurse advised that there were only a small number of serial attendees to A&E and when a patient attended more than four times a year this was highlighted to staff. There was one case where a patient had attended almost 25 times in the year but this person had serious mental health issues and when there was a possibility of self-harm, A&E was the best place for such patients. The Police had brought this patient into hospital for safety reasons.

The Council of Governors NOTED the report.

INFORMATION

None

ANY OTHER BUSINESS

The Chairman advised that Howard Manuel, Diana Manthorpe, Linda Abbott and Michèle Low had decided not to stand for re-election in the forthcoming elections.

The Chairman wished to thank these Governors for their dedication and commitment over the past three years.

The Chairman further thanked Peter Taylor, Non Executive Director, as this would be his last Council before retiring from the Trust at the end of October 2013.

COG-43/13 **QUESTIONS FROM THE PUBLIC**

A member of the public noted that if the name plates were typed in a larger font, members of the public would be able to see names more clearly.

Date of Next Meeting

The next meeting would be held on Wednesday 11th December 2013 at St Peter's Hospital.

COG-44/13 **Addition - Remuneration and Appraisal Committee**

The Closed meeting of the Council of Governors received minutes of the Remuneration and Appraisal Committee which had endorsed the appraisal of the Chairman and Non Executive Directors. The Council agreed that the receipt of these minutes would be noted within the open minutes as a public record of this role having been undertaken.

Signed……

Aileen McLeish
Chairman
11th December 2013

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KEY	
✔	Complete
ND	Not due
---	On track

Summary Action Points

Meeting Date	Minute Ref	Topic	Action	Lead	Due Date	December 2013 Update	Status
01/12/10	**COG-7/10**	**Governors' Code of Conduct**	Review the Code of Conduct in one year	GR	Dec 2011	Code of Conduct agreed by Governor taskgroup. On agenda for Council approval.	✔
09/09/13	**COG-34/13**	**Minutes of the Previous Meetings**	KPMG revised reports to be received	GR	Dec 2013	Complete	✔
09/09/13	**COG-35/13 (also COG-45/12)**	**Board Assurance – Integrated Governance and Assurance Committee**	Develop a taskforce with participation from Governors and Directors to reconsider involvement of Governors on Board sub committees	GR	Dec 2013	Taskforce met on 19th November 2013. Attended by 10 Governors and three members of the Board.	✔
09/09/13	**COG-40/13**	**Strategic Objective 2: Workforce**	Update the Council on developments	SE & LM	Dec 2013	Workforce Seminar took place on 22nd October 2013.	✔

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