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

OPEN MEETING OF THE COUNCIL OF GOVERNORS
28th February 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**
	Dr Ann Gallagher	Appointed Governor – University of Surrey	**AG**
	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 Samantha Lamb	Staff Governor – Admin/Managerial/Ancillary	**SL**
	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**
	Mrs Judith Moore	Public Governor – Guildford	**JM**
	Mr Andrew Ryland	Public Governor - Runnymede	**AR**
	Cllr Michael Smith	Appointed Governor – Woking BC	**MS**
	Mrs Tracy Ward	Public Governor – Runnymede	**TW**
APOLOGIES:	Dr Howard Manuel	Public Governor – Woking	**HMa**
	Cllr Jean Pinkerton	Appointed Governor – Spelthorne BC	**JP**
	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 Raj Bhamber	Director of Workforce and OD	**RB**
	Dr David Fluck	Medical Director	**DF**
	Mr Clive Goodwin	Non Executive Director	**CG**
	Mr Jim Gollan	Non Executive Director	**JG**
	Mr Andrew Liles	Chief Executive	**AL**
	Mr Simon Marshall	Director of Finance & Information	**SM**
	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-1/13 **Declarations of Interests in the Proceedings**

No declarations of interests were noted.

COG-2/13 **Minutes of the Previous Meeting**

The minutes of the meeting held on 5th December 2013 were agreed as a correct record.

David Frank, Public Governor – Surrey Heath, advised that there remained a vacancy on the Remuneration and Appraisal Committee and that any Governor interested in joining should get in contact. He added that the commitment required to be a member of the Committee was not too onerous.

COG-3/13 **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:

- The matter of Governor involvement in sub-committees was being kept under review.
- The Council was asked to forward any comments on Members' Matters to the Head of Communications.
- The Chief Nurse advised that she had been unsuccessful in obtaining data in relation to the comparison of private companies with the Trust around a surge of complaints during the month of October and requested any help the Governors could provide with this matter.

FEEDBACK FROM GOVERNORS

COG-4/13 **Patient Experience Group Report**

The Chairman congratulated Keith Bradley, Public Governor - Woking, on taking over as Chair of the Patient Experience Group. Keith presented highlights from the Patient Experience Group Report.

Keith advised that the Group had 3 new members: Brian Catt, Governor for Spelthorne; Susan Lockwood, Governor for Runnymede and Ann Gallagher, Appointed Governor for the University of Surrey.

Keith Bradley advised that the Head of Patient Engagement and Experience had shared the draft Patient Experience Strategy with the Group and had invited comments from members. Keith advised that comments were also welcomed from those Governors not on the Patient Experience Group.

Keith Bradley clarified that Judith Moore, Governor for Guildford, had been shown plans of the new birthing rooms when she visited the Maternity Department and not the actual birthing rooms. It was also advised that both the Associate Director of Quality and Head of Patient Engagement and Experience welcomed any feedback Governors received from members.

Keith Bradley further confirmed that PEAT had been succeeded by PLACE and that Godfrey Freemantle, Governor for Hounslow and Judith Moore, Governor for Guildford had expressed an interest in joining PLACE alongside Michèle Low, Governor for Hounslow. Michèle advised that PLACE was about to get underway and that invites would be sent out shortly for the first session.

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It was advised that a meeting would be arranged with the Patients Association to discuss working together on a one-off project.

Finally, the visit by the Group to the Infusion Suite and Outpatients to view the refurbishment was highlighted.

The Council of Governors NOTED the Group report.

COG-5/13 Membership Report

Andrew Ryland, Chair of the Membership and Community Engagement Group, introduced the Membership Report and highlighted that there had been a steady increase in membership numbers. It was reiterated that Governors should continue to try and avail themselves of opportunities in their daily lives to recruit new members. It was advised that an Aide Memoire had been circulated to all Governors providing useful information when recruiting. New outpatient letters were still proving the most effective way of highlighting membership.

Andrew Ryland advised that a reduction in email costs had resulted from accumulating the new membership database and this offered a further opportunity of engaging with members.

Hugh Meares, Appointed Governor for Runnymede Borough Council, advised that Councillors, particularly, had excellent opportunities to recruit new members.

Andrew further highlighted the issue of how long discharge summaries and pathology results were taking to reach patients' GPs. The Medical Director advised he would look into this matter and report back to the Governors at a later date. **DF**

Keith Bradley advised that the recent annual Governor Briefings had been sent out and one of his constituents had approached him after receiving it. Keith considered the annual briefings a useful engagement and communication exercise which should be continued going forward.

The Council of Governors NOTED the report.

STATUTORY

COG-6/13 Register of Interests

The Head of Corporate Affairs advised that the annual update of the Register of Interests had taken place with a few returns remaining outstanding. Graham Hanson would be removed from the Register as he was no longer Governor. The updated Register would be circulated to all Governors once complete. **GR**

The Council of Governors NOTED the report.

COG-7/13 Review of the Trust Constitution

The Head of Corporate Affairs advised that the Trust Constitution had undergone a second revision. It was clarified that it was no longer necessary for Monitor to authorise further amendments. Adjustments to the constitution were required as a result of the recent Health and Social Care Bill and needed to be made by April 2013. The Head of Corporate Affairs advised he had outlined the proposed amendments and was happy to discuss in further detail.

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David Frank commented that the definition of significant transaction required clarification. The Governors felt that a transaction resulting in a fundamental change in care delivery, even if this amounted to less than 25% of the Trust's assets, still required consultation with the Governors. For example, if in the future it was decided that some staff would be sub-contracted to Virgin, the Governors would not be comfortable with this proposition as they considered this would be a fundamental change. Terry Price, Non Executive Director, advised that any such sub-contracting would more likely be around 60 – 70% and hence this would be captured by the 25% threshold. The Director of Finance and Information suggested using words which referred to a 'transaction which is innovative or out of the ordinary'. Terry Price advised that there was standard wording within Governmental bodies which could be utilised. It was agreed that the Director of Finance and Information, Head of Corporate Affairs and Terry Price would work together to re-draft the wording for approval by the Governors before going to the Board. It was advised that the deadline for tabling at Trust Board was 21 March 2013. **SM/GR/TP**

The Council APPROVED the other changes proposed to the Constitution.

STRATEGY AND PERFORMANCE

COG-8/13 **Strategic Objective: Financial Sustainability and Efficiency Gains**

Jim Gollan, Non Executive Director, advised the Council that the Trust's financial position was good with a current FRR rating of 4 with a strong FRR of 3 expected at the end of the financial year and a £3.3 million surplus. It was anticipated that the £12 million Cost Improvement Plans (CIPs) would be delivered in full and historic borrowings paid off in March. However, winter pressures and contracts with commissioning partners were two challenging areas and needed to be resolved by the end of the financial year. Regular monitoring of the financial position was necessary as a small deviation from plan could lead to the surplus not being met.

The Director of Finance and Information presented the drivers for developing the Trust's Financial Strategy which would be: information driven, include engagement with commissioners, divisions, specialties, staff and other stakeholders, join up finance with the trust's approach to quality, clinical strategy and workforce, include long term financial modelling of both revenue and capital and look for both business growth and efficiency gains.

The trust had five key financial sustainability objectives:

- Delivering our CIPs (three year 15% CIP);
- Driving clinical efficiency (care in the right settings and how consultants operate);
- Securing profitable activity growth;
- Devolving decision making; and
- Adopting new technology.

The Director of Finance and Information advised that the Trust was one of 160 trusts on the CHKS Dashboard for Efficiency and Service Improvement and was currently listed in the top quarter in relation to performance although the Trust was struggling with A&E targets. The Trust was on track for delivering its strategy although next year would be even more challenging.

Tracy Ward, Public Governor – Runnymede, congratulated Jim Gollan and the

Director of Finance and Information on a FRR of 4 but queried whether a £3.3 million surplus was a sufficient contingency. Jim Gollan responded that £3.3 million amounted to two weeks in working capital which was considered adequate in NHS terms. Consideration had to be given when setting the Finance Strategy not to effect quality and hence margins could not be too large. The Trust worked to a 0.5% margin which was considered tight but achievable without a detrimental effect on the quality of service.

The Medical Director and Philip Beesley, Non Executive Director, expressed the importance of ensuring data was recorded against national standards to highlight trends.

The Lead Governor asked how it was ensured that cost improvements did not impact on the quality of care. The Medical Director and the Chief Nurse both confirmed that they were responsible for ensuring that quality was not compromised and that there were sufficient controls over CIPs in place to ensure that this was the case. In many cases cost improvements resulted in greater efficiency which in turn improved the quality of care.

The Chief Nurse emphasised that the clinical impact of any cost reductions were carefully analysed and proposals would often be modified to ensure that there was no impact on quality.

Michael Smith, Appointed Governor for Woking Borough Council, was pleased to note the Trust would be debt free at the beginning of April.

The Chief Executive clarified that the new commissioner, North West Surrey CCG, had indicated that finances were challenging for the next financial year. It would be important to ensure the Trust was paid for over-performance over the agreed contract. North West Surrey CCG had suggested that elective care would be reduced and this is a risk as it was a profitable activity for the Trust.

The Council of Governors NOTED the report.

COG-9/13 **Assurance Report**

The Chief Executive presented the report highlighting the five sections: Internal Focus, Strategy, External Outlook, Regulation and Performance.

Steve McCarthy, Governor for Elmbridge, requested that the recent FTGA Guide on the "Role of the Governor in Foundation Trusts" be reviewed and ensure those items detailed which should be presented to Governors on pages six and seven were being addressed. **GR/AL**

Brian Catt sought further clarification on the complaints data displayed in Chart 3 showing Complaints by Service Area and whether this highlighted when complaints arose or when complaints were received. The Chief Nurse confirmed that data showed when complaints were received by the Trust.

The Chief Executive agreed that it was not possible to control the number of attendances in A&E and the current 4 hour performance in A&E during quarter 4 was 92.5%. The 4 hour target was key to the Trust and many other trusts were also struggling with this target due to rising volumes in elderly attendances. Philip Beesley, Non Executive Director, advised that the Trust was working hard to meet the 4 hour performance target but it was unlikely that the target would be met in quarter 4 although the Trust was in a better place than this time last year.

It was likely there would be an increase in attendances during 2013/14.

Margaret Lenton, Governor for Windsor and Maidenhead, queried whether commissioning services were aware of the problem. The Chief Executive confirmed that they were aware of the pressures but that a huge restructure was currently taking place and it was hoped that the new commissioning services would have a better handle on the situation. The Trust had recently opened more beds and employed more staff to increase capacity which had resulted in cost implications. It was important to make the transition from winter into spring and make progress in other areas taking into account the elderly population. The Chief Executive reiterated the issue of Surrey being particularly financially challenged.

Maurice Cohen, Governor for Woking, queried how the Trust was making progress on patients being cared for the community. The Deputy Chief Executive advised that the nursing project continued and that the patient pathway continued to improve.

The Council of Governors NOTED the report.

COG-10/13 **Staff Experience and Turnover**

The Director of Workforce and Operational Development presented the paper noting that she was pleased for the opportunity to clarify turnover rates with the Council.

David Frank queried the reasons for the high turnover rates as depicted in Table Three for people leaving for personal reasons. The Director of Workforce and Operations Development advised that many of these were due to fixed term contracts coming to an end and a few redundancies. A comparison had been completed with other trusts in the Surrey area and Ashford and St Peter's was approximately 1% higher. The Trust was more comparable with trusts in the South London area.

The Director of Workforce and Operational Development advised that the Board had not had the opportunity to discuss the findings of the Staff Survey in great detail although further analysis, led by the Chief Executive, would begin in early March. An overall response rate of 50% had been achieved and this was considered good. Although progress had been evidenced in 46 areas, there were 23 areas which had deteriorated with no change in 7 areas. Regular meetings were held with staff governors to discuss issues and ways forward. An annual process would be put in place with the aim to survey all staff with some calibration on age, group and gender.

Tracy Ward queried why a sample of 408 respondents rather than the full census of 1,439 respondents had been used. The Director of Workforce and Operational Development advised that in line with the survey mechanism, all data had been inputted and a sample extracted. Tracy Ward felt that the data was somewhat diluted using this method.

The Director of Workforce and Operational Development indicated that on pages four to six of the report arrows had been added to the tables to show improvements in some areas although these improvements had not been significant enough to enhance the Trust's ratings. Issues to consider were the recent Pathology restructure and how acute areas of the Trust had fared better in the work related stress section as staff employed there were more

accustomed to work pressures.

Going forward the results of the survey would be communicated to all members of staff and a series of listening events would be held with heads of departments and speciality leads. Ways of monitoring staff throughout the year would also be investigated.

The Chief Executive reinforced that he was very disappointed with the staff survey results and they were being taken extremely seriously. It was important to understand the reasons for the feedback and to begin with one to one meetings with all departments. A new Director of Workforce and Operational Development would be in post in the next couple of months.

Samantha Lamb, Staff Governor for Administrative and Ancillary Staff, expressed her concern at the results although she had not expected a huge improvement on last year's findings. Brian Catt, Governor for Spelthorne raised his concern that none of the areas that empowered staff had fared well. The Chairman added that analysis of the results was a major priority and that regular reports would be made to the Board in relation to this. It was agreed that there was a correlation between staff satisfaction and quality.

The Council of Governors NOTED the report.

INFORMATION

COG-11/13 **Responding to the Francis Report**

The Chief Nurse introduced the report highlighting that future reporting would centre on the new Friends and Family test and mortality ratios.

The Chief Nurse advised that a workshop had taken place that day inviting all staff to attend and share their views. 70 members of staff attended and shared their concerns which had been very positive. During the workshop consideration had been given as to how mechanisms could be put in place to avoid a similar turn of events at Ashford and St Peter's. Staff had been asked whether they felt comfortable raising concerns. Some did not feel they always received a response. It was advised that there were seven recommendations for Governors.

Michèle Low, queried how the Governors would take the findings forward with the Board and whether this could be in the form of a seminar or working group. An update at the next meeting would be welcomed.

The Chairman considered Professor Brian Edwards Report on "A Collapse in the Culture of Care – The Stafford Hospital Inquiries" an excellent summary of the very lengthy Francis Report and recommended this be circulated to the Governors. **GR**

The Chief Nurse was concerned of the damage resulting from the Francis Report to nursing staff and the medical profession. The Council felt that the NHS's reputation as a whole may suffer but that members of the public were, on the whole, happy with actual treatment and care received from individual members of staff. The Council considered it important to wait for more guidance and to preserve the positive culture at Ashford and St Peter's. The issue of staff morale was discussed and options of arranging more social settings.

Minute **Action**

Margaret Lenton advised she had experienced the Mid Staffordshire Trust first hand and had found the hospital filthy and staff did not engage with patients.

Simon Bhadye, Governor for Spelthorne, was pleased to note that Dr Peter Carter, Chief Executive of the Royal College of Nursing, was visiting the Trust in June and felt it would be good for staff morale. The Chief Nurse agreed that the visit would be beneficial for nursing staff.

The Council of Governors NOTED the report.

ANY OTHER BUSINESS

COG-12/13 The Chairman advised that Martin Roberts and Sarah Betteley would be stepping down from the Council at the end of March as PCTs were no longer in existence. It was also advised that it was the Director of Workforce and Operational Development's last Council and although her last day had not been decided, the Chairman wished to thank her for her commitment to the Trust.

COG-13/13 The Director of Finance and Information advised that the Charitable Funds Committee was looking for two Governors to join the Committee. Further information on the time commitment would be circulated after the meeting. **SM**

COG-14/13 **QUESTIONS FROM THE PUBLIC**

Members of the public raised a number of items:

- that a break in the proceedings would be useful in order to allow members of the public to network with the Board and Governors.

- that the main reason for the Trust no longer pursuing the merger with Epsom Hospital was down to the £13.8 million debt. The Chief Executive clarified that the £13.8m was the on-going deficit of Epsom.

- that the staff survey results had been bad at the Trust for seven years and that perhaps this was linked to the turnover rate. It was suggested that a separate review needed to be conducted with an independent person coming in to oversee this.

Date of Next Meeting

The next meeting would be held on Tuesday 28th May 2013 at St Peter's Hospital.

Signed……

Chairman
28th May 2013

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KEY	
✔	Complete
ND	Not due
---	On track

Summary Action Points

Meeting Date	Minute Ref	Topic	Action	Lead	Due Date	May 2013 Update	Status
01/12/2010	**COG-7/10**	**Governors' Code of Conduct**	Review the Code of Conduct in one year	JG	01/12/11		---
17/05/2012	**COG-16/12**	**Chairman's Report on Discussions with the governors**	Repeat process of individual reviews between Governors and Chairman	AMcL	Jan 2013	One to one meetings arranged and conducted in April and May 2013.	✔
11/09/2012	**COG-45/12**	**Board Assurance – Integrated Governance and Assurance Committee.**	Consider involvement of governors on Board sub committees such as IGAC	AMcL	05/12/12	On-going review of involvement.	
11/09/2012	**COG-46/12**	**Chief Executive's Report**	Consider if a Staff Governor could be included on the LRP	AL	05/12/12	Transaction halted. Action on hold.	---
28/02/2013	**COG-5/13**	**Membership Report**	Look into the time GPs receive discharge summaries and pathology results.	DF	28/05/13	Discharge Summary has been added as a project to the preventing readmissions programme – thus it has a project team, deliverables and objectives. Outcome by Q4 is to get 98% of summaries electronically sent to GPs > 24 hours of patient being discharges.	✔
28/02/2013	**COG-6/13**	**Register of Interests**	Circulate updated Register	GR	ASAP	Circulated on 7th March.	✔
28/02/2013	**COG-7/13**	**Review of the Trust Constitution**	Re-drafting of 'significant transaction' wording.	SM/GR/TP	ASAP	Re-drafted and circulated to all Governors on 7th March.	✔

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28/02/2013	**COG-9/13**	**Assurance Report**	Review suggested information to Governors within FTGA Guide – Role of the Governor in Foundation Trusts.	GR/AL	28/05/13	List of suggested information circulated under separate cover including reasons for non-presentation.	✔
28/02/2013	**COG-11/13**	**Responding to the Francis Report**	Circulate report entitled "A Collapse in the Culture of Care – The Stafford Hospital Inquiries" to all Governors	GR	ASAP	Circulated on 1st March 2013.	✔
28/02/2013	**COG-13/13**	**Any Other Business**	Send further details to Governors on time commitment required for the Charitable Funds Committee	SM	ASAP	Circulated on 1st March 2013.	✔

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