

**Minutes of the meeting in public of the Council of Governors held on
Wednesday 1 February 2017 at 2.30pm in Lecture rooms A and B, Education Centre,
Chesterfield Royal Hospital**

Present:

Chairman	Dr H Phillips, Chair
Public Governors	Mrs S Bean, Public Governor, Chesterfield constituency Dr L Clarke, Public Governor, High Peak constituency Mrs R Grice, Public Governor, Chesterfield constituency Dr M Grundman, Public Governor, Derbyshire Dales and North Amber valley constituency Mrs R Ludford, Public Governor, Chesterfield constituency Dr D Lyon, Public Governor, Chesterfield constituency Mr D Millington, Public Governor, North East Derbyshire constituency Mr B Parsons, Public Governor, Chesterfield constituency Dr J Reece, Public Governor, North East Derbyshire constituency Mr J Rigarsford, Public Governor, Derbyshire Dales and North Amber Valley constituency Mrs M Rotchell, Public Governor, Chesterfield constituency Mrs D M Weremczuk, Deputy Chairman and Public Governor, Bolsover constituency Mr B Whittleston, Public Governor, Bolsover constituency
Staff Governors	Miss E Bradley, Staff Governor, All Other Staff Dr M Luscombe, Staff Governor, Medical and Dental Mrs J Smith, Staff Governor, Nursing and Midwifery
Appointed Governors	Mrs T Moore, Appointed Governor, Education Partners Cllr B Murray-Carr, Appointed Governor, local authority partners Mrs A Parnell, Appointed Governor, Voluntary Sector Partners Mrs L Tory, Appointed Governor, Voluntary Sector Partners
In attendance	Ms L Andrews, Director of Nursing and Patient Care Mr T Campbell, Chief Operating Officer Mr S Hackett, Director of Finance and Contracting Mrs Z Lintin, Acting Director of Workforce and Organisational Effectiveness Mrs A McKinna, Non-Executive Director Mr S Morrill, Chief Executive Mrs J Reay, Corporate Governance Manager Mrs S Rudd, Foundation Trust Secretary Mr P Severs, Non-Executive Director Mrs N Smith, Governor and Membership Officer Mr D Urpeth, Non-Executive Director Ms B Webster, Non-Executive Director Dr J Wight, Non-Executive Director
Member apologies	Mrs G Bartle, Public Governor, Bolsover constituency Cllr S Brittain, Appointed Governor, Local Authority Partners Mrs M Brown, Appointed Governor, Education Partners Mr J Burton, Public Governor, Southern Derbyshire and West Nottinghamshire constituency Cllr K Caulfield, Appointed Governor, Local Authority Partners Dr J Connolly, Appointed Governor, Hardwick Health CCG Mr A Craw, Public Governor, Chesterfield constituency Mr M Gibbons, Public Governor, North East Derbyshire constituency Mr S Green, Public Governor, South Sheffield and Rotherham constituency Mr J Kirby, Public Governor, North East Derbyshire constituency Mrs J Stringfellow, Appointed Governor, North Derbyshire CCG Mr P Whitehouse, Staff Governor, Allied Health Professionals, Pharmacists and Scientists
Attendee apologies	Mrs L Challis, Non-Executive Director Mrs G Collins, Medical Director Dr D Pickworth, Non-Executive Director

- CG1/17** **Chairman's Welcome and Note of any Apologies (Verbal)**
- Dr Phillips welcomed the members and attendees to the meeting.
- The apologies for absence were received and noted.
- CG2/17** **Declaration of Interests (Enclosure A)**
- The Council received the register of Governors' interests for January 2017.
- CG3/17** **Verbal Questions and Comments from the Public (Verbal)**
- No members of the public were in attendance.
- CG4/17** **Minutes of the Meeting held on 7 December 2016 (Enclosure B)**
- The Council received the minutes from the meeting held in public on 7 December 2016.
- Amendments were requested for two sentences:
- Page five – CG124/16 – Quality Assurance Update*
The experiences from Non-Executive Directors attendance at Divisional Governance meetings had been mixed.
- Page 10 – GC132/16(ii) – PPI Committee Update*
An excellent presentation had been received from Mr Ball on the work of the Governors Volunteers.
- Subject to the amendments above, the Council approved the minutes of the meeting held in public on 7 December 2016.
- CG5/17** **Matters Arising from the Minutes (Enclosure C)**
- The Council received and noted the report on matters arising from previous meetings.
- The following point were noted:
- CG5/17(i)** **CG120/16(iii) – Operations – Bed Occupancy**
The information on medical outliers required adding to the IPR.
- CG6/17** **Sub-Committee Election Results**
- The Council noted the results of the elections for its Sub-Committees.
- Each of the Governors that had reapplied for their seats on the PPI and Nominations Committees had been reappointed.
- Mrs N Smith continued to seek interest in filling the vacancies which remained on the Council's Committees:

PPI – One Staff Governor seat;
Nominations Committee – One Staff and One Partner Governor seat.

The Council congratulated the Governors on their reappointments to Committees.

CG7/17 **Integrated Performance Report (IPR) (Enclosure D)**

The Council received the report to 31 December 2016. Mr Campbell highlighted the following points as being of particular note:

- ED performance against the four hour waiting target;
- Cancer performance against 62 day target;
- Continued pressure on Trust finances.

Further detail was provided by Board Members and the following points were noted:

CG7/17(i) **Monitor**

ED Four Hour Wait

An update on the Trust's ED position and improvement plan is provided at CG14/17(i).

Cancer 62 Day Wait

Performance was particularly low in October 2016 as had been anticipated. Compliance had improved in November and December 2016 but the trajectory (being achieved) was for non-compliance in January and February 2016.

CG7/17(ii) **Quality**

Slips, Trips and Falls

The Trust hoped to sustain the improvements which were evident from recent interventions.

Information Governance

The Trust was currently at 48% compliance. The Board had noted this as an area of risk and action plans were in place to achieve the required 66% compliance by 31 March 2017.

CG7/17(iii) **Workforce**

The Trust had received top line results but the information was under embargo until 7 March 2017. The Board had received an update to its private meeting on 25 January 2017 and had agreed that staff experience would continue to be a focus for improvement.

CG7/17(iv) **Discharges**

The number of patients fit for discharge would be added to the IPR.

TC

CG7/17(iv) **Finance**

At month nine the Trust:

- Was on plan;
- Had an over achievement of income of £4.4m;
- Had expenditure matching income – mainly due to increased staffing costs;
- Secured its STP funding for quarter three for finance;
- Did not attract the STP funding relating to ED and cancer targets (£1.7m).

Mr Hackett cautioned that quarter four would be difficult and that there was a high possibility that the Trust would be off plan at the year end.

Governors noted that Derbyshire CCG and Hardwick CCG were in 'turnaround'. This meant that they were receiving central support as they would not achieve the financial plans that they had set for the year.

CG8/17 Issues from the Governors' pre-meeting (Verbal)

The following issues from the Governors pre-meeting were highlighted to the meeting:

- CG8/17(i) North Derbyshire Cancer Action Group
Governors queried what had happened to the North Derbyshire Cancer Action Group (NDCAG), highlighting the useful benefit to both staff and patients over the years.

Post meeting note: NDCAG have themselves agreed to disband as of 14 January 2017 in its current form given recent difficulties to run and support the group. Any remaining members who wish to be involved with the new cancer unit have been invited to do so.

- CG8/17(ii) Car Parking
Mrs Grice questioned whether Chesterfield could offer patients the same option as Sheffield Teaching Hospitals, allowing patients to park for £2.50 all day over weekends. Subsequent investigations following the meeting revealed that this was only offered to patients at Weston Park, and was for overnight parking between the hours of 6pm and 6am.

- CG8/17(iii) Cancer Information Point
Governors questioned whether the cancer information point located within the pharmacy waiting area would get as many drop ins once it was relocated to the new cancer build.

Post meeting note: the information point was initially set up in 2012 as a temporary pilot and at the time, this was the only space available to house the information. As part of the grant agreement for the new cancer unit, the information point will be located right next to the main entrance and therefore footfall will actually increase and staff will be encouraged to direct patients to the info point from clinics across the hospital. Volunteers will also be on hand to help collect and direct patients to the info point which will also gain a band 7 clinical lead for additional support.

- CG8/17(iv) Patient experience
Governors had queried how joined up the patient experience could be in a secondary care setting, given the input of primary care. A conversation on good practice in this area would be included on a future Council agenda.

GC

CG8/17(v)

Nurse Staffing Levels

Governors had noted the actual and perceived nurse staffing position. Ms Andrews advised the Council that the Quality Assurance Committee received and discussed detailed reports triangulating staff numbers with harms and patient experience results. She reminded the meeting that an escalation process for nurse staffing was in place and she reassured the Governors that actions were in place to look at short, medium and long term cover.

CG8/17(vi)

Ashgate Hospice

Governors had queried the position relating to Palliative Care Nurses based at Ashgate Hospice. Ms Andrews advised that the Trust had been notified of the Hospice's intention to re site the nurses in the community. Discussions had taken place with the Hospice and with Commissioners on possible different models to ensure that palliative care services continued to be provided. The Trust was waiting for clarification from the CCG on what service it commissioned from Ashgate Hospice as this was not clear in the contract.

CG9/17

Board Assurance Framework (Enclosure E)

Governors welcomed the revised report format and content which had been developed and populated with Executive Directors. Controls, assurances and actions had been updated and risks were assigned to individual Board Committees.

The BAF was iterative and would continue to be refined through work with Board Members and from comments actions and assurances received as a result of its presentation to all Board and Committee meetings.

The Governors acknowledged the work that had been put to improving the Framework and agreed that it was easier to read and clearer on actions required.

The Council noted the Board Assurance Framework.

Consideration of how Governor priorities were included in the document would now take place.

SR

CG10/17

Risk Committee Assurance Update (Enclosure F)

The Council received an update from the Risk Committee meeting held on 17 January 2017 and noted that:

- Work to restate partnership and strategic risks had taken place;
- Significant assurance had been provided from an internal audit of the Trust's risk processes;
- Members had been partially assured on strategy and performance risk and had requested further information on IT strategy, security and cyber risks.

CG11/17

Quality Assurance Committee Update (Enclosure G)

The Council received an update from the quality assurance Committee meeting held on 23 January 2017 and noted that:

- Members had been partially assured by the patient safety report, noting that learning from clinical incidents and claims was an area of challenge for the Trust;
- Members had been assured on the safety of the Trust but noted that staffing risks were increasing as nurse ratios reduced;
- An increase in mortality for December 2016 had been noted and work to investigate this was in place;
- The requirement to continued work on communications was noted from the patient experience report.

CG12/17

CQC Update (Enclosure H)

An update on the inspection of 13 – 14 July 2016 was received.

Draft reports had been received on 7 December 2016 and the Trust had responded with points of factual accuracy which had been accepted by the CQC. The final report was expected in March 2017.

The paper outlined progress against the Trust's improvement plan from the prior inspection and Governors noted that, if the scores from the latest inspection were used to re-rate the Trust its classification would move from 'requires improvement' to 'good'.

The Council of Governors noted the update from the CQC inspection.

CG13/17

Five-Year Forward Plan for Prevention (Enclosure I)

Governors noted that the Derbyshire STP identified prevention as a priority within the place work stream. The paper proposed how the Trust could contribute to health improvements as part of the wider health community.

Dr Wight highlighted the aim to provide collective messages from the health economy – simple, repetitive straplines on all correspondence that would require coordination but have limited cost. Governors commented that engagement with the media would assist with this aim.

The Trust had re-launched itself as a no smoking site in July 2016. Governors queried how successful this had been and noted that a further review would be undertaken to progress changes to signage and how better policing to reduce smoking could be improved.

At its meeting on 25 January 2017 the Board had agreed:

- To produce an action plan to take this forward;
- That reporting would be via the HLT and People Committee;
- That an update would be provided to the Board in mid-2017.

The Council noted the Trust's approach to improve health.

CG14/17

Updates Requested at the Last Council of Governors Meeting

CG14/17(i)

ED Improvement Plan (Enclosure J)

The Council received information on winter activity and performance in ED.

The outturn ED performance for January 2017 had been 79% against a plan of 90%. Governors noted that national attendance at ED had been difficult and that, locally, the acuity experienced had contributed to a number of breaches.

Actions were being taken to minimise and manage attendances - eg working with partners to stream activity which had shown positive results.

A brief discussion on how long patients could be waiting on trolleys took place. It was unusual for a patient to be on a trolley for over four hours and Governors noted that the Trust was working hard to reduce any such occurrences. Trolley waits were monitored and all eight and 12 hour breaches were recorded. Details of trolley waits would be added to the IPR.

Mrs N Smith would circulate appendix A of the report to Governors.

NS

CG14/17(ii)

Urgent Care Village Update (Verbal)

The Council received on update on the creation of an Urgent Care Village (UCV) at the Trust.

Governors noted that, within the last few months, the STP had agreed that a UVC was required in North Derbyshire and that this should be based at the Royal. However, the provision – which would require capital investment of £18m - £20m - needed to be considered against other priorities and would not be in place for a number of years.

In the meantime the current layout of the Trust's ED was not suitable to react to the type and level of activity being experienced and the Trust was therefore looking to improve the environment in the short term, accounting for the likely changes to create a UCV in the future.

Updates on the ED environment and on the UCV would be provided to the Board and Council in the coming months.

CG15/17

Quality Accounts - Indicators (Enclosure K)

The Council noted the requirement for it to choose a local indicator for audit and inclusion in the Trust's Quality Account for 2016/17.

The Council agreed that, in line with the approach taken in previous years, the decision be devolved to the PPI Committee. The Chair of the PPI to Committee would circulate the decision to Governors after the PPI Committee meeting on 6 February 2017.

BW

The Council noted the requirement for it to submit a commentary for inclusion in the Trust's Quality Account for 2016/17.

The PPI Committee was tasked with drafting a commentary on behalf of the Council. The commentary would be provided to the Council for approval at its meeting in April 2017.

CG1617 **Chair's Items (Enclosure L)**

The Council noted the Chair's recent schedule of meetings and events.

CG17/17 **Chief Executive's Briefing (Enclosure M)**

The Council noted the following information from the update:

CG17/17(i) **Children's Surgery and Anaesthesia Services**

The consultation had been extended until 14 February 2017. Mrs N Smith would circulate appendix A of the report to Governors.

NS

CG17/17(ii) **Car parking**

The changes to patient, visitor and staff parking – including the introduction of charges for Blue Badge permit holders - were noted.

CG17/17(iii) **Flu Vaccination**

76% of staff had been vaccinated to date. This was an excellent achievement and put the Trust 15th of acute providers in the country in take up rates.

CG17/17(iv) **Freedom to Speak Up Guardian**

Sister Jenni Fellows had been appointed to the role. Arrangements would be made for her to be introduced to the Governors in the near future.

NS

Mrs N Smith would circulate appendix A of the report to Governors.

NS

CG18/17 **Governor Feedback**

No additional feedback was received from Governors.

CG19/17 **Items for information (Enclosures N – P)**

CG19/17(i) **High level risk report (Enclosure N)**

The Council received and noted the high level risk report for information.

CG19/17(ii) **Minutes of the PPI Committee held on 6 December 2016 (Enclosure O)**

The Council received and noted the minutes of the PPI Committee for information.

CG19/17(iii) **Work Programme (Enclosure P)**

The Council received and noted the programme for information.

CG20/17

Date and Time of Next Meeting

The next meeting of the Council was scheduled for:

Date: Wednesday 5 April 2017
Time: *12.30pm – 4.00pm
Venue: Lecture Rooms A and B, Education Centre

*The open session would commence at 1.30pm.

CG21/17

Any Other Business (Verbal)

CG21/17(i)

Induction of Governors

Governors commented on the quality of the induction programme and thanked the Board Members for their input.

The work of Mrs N Smith in arranging and facilitating the programme was acknowledged.

As the event was relevant to both existing and new governors, it would be rebranded for future years as a development programme.

NS

CG22/17

Review of the Meeting (Verbal)

Governors felt that the two meetings had been managed well – giving more time in the closed session to allow for focus on important issues.

The hour provided for the Governor pre-meet had not been required and the allocation would be reduced for future sessions.

NS

CG23/17

Collation of Written Questions from Members of the Public

There were no written questions from members of the public.

CG24/17

Close of Meeting

The meeting closed at 3.30pm.