

Minutes of the Public Council of Governors Meeting held on Wednesday 17th
November 2021, MS Teams, 6.00pm – 8.00pm

Present:

Public Governors:

Pam Brown, Luton	Linda Grant, Central Bedfordshire
Judi Kingham, Luton	Pat Quartermaine, Central Bedfordshire
Marie-France Capon, Luton	Dr Jim Thakoordin, Central Bedfordshire
Sean Driscoll, Luton	Yvette King, Bedford Borough
Theresa Driscoll, Luton	Robert Oakley, Bedford Borough
Malcolm Lea, Luton	Chris Williams, Bedford Borough
Wendy Cook, Luton	Jenny Gallucci, Central Bedfordshire
Helen Lucas, Hertfordshire	Michael Carter, Central Bedfordshire
Jacquie Farhoud, Bedford Borough	Debbie Gardiner, Central Bedfordshire
Teena Ferguson, Bedford Borough	

Staff Governors:

Janet Graham, Volunteers
Noreen Byrne, Volunteers
Thomas Moss, Ancillary and Maintenance
Sunny Patel, Professional and Technical
Dimpu Bhagawati, Medical and Dental
Steve Morgan, Admin. Clerical & Management
Terence Haynes-Smith, Professional and Technical
Belinda Chik, Nursing, HCA & Midwifery
Hina Zafar, Nursing, HCA & Midwifery
David Simms, Nursing, HCA & Midwifery
Matthew Borg, Nursing, HCA & Midwifery

Appointed Governors:

Board of Directors:

Simon Linnett, Chair	David Carter, Chief Executive
Steve Hone, NED	Cathy Jones, Deputy Chief Executive
Gordon Johns, NED	Matt Gibbons, Director of Finance
Ian Mackie, NED	Catherine Thorne, Director of Quality & Safety
Dr Annet Gamell, NED	Angela Doak, Director of HR
Mark Prior, NED	Fiona MacDonald, Director of Culture
Simon Barton, NED	
Pam Bhachu, Associate NED	

In attendance:

Donna Burnett, Trust Board Secretary (minutes)
Victoria Parsons, Associate Director of Corporate Governance
Anne Thevarajan, FT Membership
Jenny Kelly, Corporate Governance Manager

1. Chair's Welcome and Note of Apologies

The Chair welcomed members to the Council of Governors meeting.

Apologies were received from Charles Royden, Paul Tisi, Danielle Freedman, Dilan Joshi, Richard Mintern, Gill Lungley, Liz Lees, M Farooq, Louise Grant and Javed Hussain.

2. Any Urgent Items of Business and Declarations of Interest

There were no declarations of interest.

H Lucas raised two items arising from the governor pre-meeting:

- Where relatives wished to bring in food or clothing for inpatients, they incurred parking charges despite it being a short space of time to drop off the items. How could this be addressed? Governors were informed that due to food hygiene regulations, bringing in food was discouraged; and that parking would be difficult to manage over how to police the system which would be complex and challenging.
- Governors requested assurances that security plans be reviewed on the site which was a recommendation following a security incident at an NHS hospital. D Carter agreed to take this away as an action.

ACTION: To look into the security plans and arrangements; and how often they are reviewed on site.

3. Minutes of the previous meeting held on 25th August 2021:

The minutes of the previous meeting held on 25th August 2021 were APPROVED as a true and accurate record.

4. Action Log

The Council of Governors noted the progress that had been made around the actions within the action log. The Chair drew attention to the number of actions that remained outstanding. D Burnett provided assurances that many of those actions had been hampered by Covid restrictions and would likely be progressed and closed by spring 2020.

5. Chair's Report

The Chair provided an update to governors on key areas of note from the Board which included:

- The progression with healthcare system partners within the Integrated Care Board (ICB) and the Bedfordshire Care Alliance (BCA). L Grant queried how Healthwatch may contribute to the conversations. S Linnett replied that as systems moved into new ways of working this would provide an opportunity for both governors and external partners to make contributions.

- The Trust had organised a Staff Wellbeing Event running from 6th – 13th December at each hospital site, with a bus stationed to provide both food and a small gift for staff.
- There had been extensive site development work going on both at Bedford and the L&D site. S Linnett praised the redevelopment and finance teams for the vast amount of work undertaken to support the submission of the full business case which was expected to be fully approved in January 2022.

6. Chief Executive's Report

The Chief Executive highlighted a number of key areas of activity for governors to note which included:

- **Integrated Care Board and Bedfordshire Care Alliance Update**

D Carter reported that there had been extensive conversations around the membership of the board, and that Felicity Cox had recently been appointed as CEO. As the largest acute trust on the board, it was not yet clear what board representation would mean for the Bedfordshire Hospitals. Further executive roles and appointments were still being worked on.

S Linnett pointed out the strategic importance of working with healthcare partners such as the mental health and community care health providers to enable the ICB and BCA to represent the region as a whole, and that this was important step for the Trust in terms of the direction of travel.

D Bhagawati queried the BLMK relationship with the BCA. D Carter replied that the BLMK are the Clinical Commissioning Groups (CCG) and the relationship at present was that of commissioner – provider.

- **Operational Pressures**

D Carter stated that the operational pressures on the Trust were on par with the rest of the NHS and East of England, seeing higher levels of acuity and pressures, mostly non-Covid related. The Trust was now focussing on how to manage winter and a response to the anticipated pressures. D Carter added that the Trust had recently focussed attention on wards and emergency flow to redirect clinicians, and support services to release pressure on staff.

7. Covid-19 Update/ Recovery Plans

C Jones reported that Covid rates had fallen from 129 the previous week to 116, and there appeared to be a drop in community prevalence.

Short term staff absences and a lack of availability of bank/support staff had impacted at a time when there had been increased pressure on the critical care units during end October to November. The clinical support on wards to drive a turnaround on imaging requests and to focus on driving down occupancy had provided help.

R Oakley queried what would happen for those booked in for surgery and then cancelled. C Jones replied that this was a valid concern, and that additional lists had been set up to ensure that those patients are relisted at the earliest opportunity. Preventative action was being taken to ensure that elective surgery was not cancelled.

J Farhoud sought assurances that staff booked annual leave was being honoured; and stressed the importance to see management working alongside staff during these times. C Jones assured governors that no annual leave had been cancelled but some training had been suspended, and that this would continue to be evaluated and monitored.

A Doak reported that many staff had already received booster jabs and that the Trust was now awaiting the terms of the new guidance around all front line NHS staff being fully vaccinated. Engagement work with management and staff side representation had been undertaken with 1-1 meetings planned with individual members of staff. Governors noted that these could be difficult conversations to understand why some members of staff did not wish to have the vaccination, but provided assurances that staff would be fully supported.

B Chik drew attention to a number of staff having missed the Covid jab booster as the website information was not clear on the location of jabs. J Kingham queried how vaccination take up at the Trust was compared to other trusts. D Carter replied that although the Trust was in the lower quartile, this reflected the diverse make-up of the staff demographics.

L Grant sought assurances that all staff knew when to get their first vaccine to ensure compliance by spring. A Doak replied that a small working party would undertake the plans to ensure the dates were clear including any implications.

8. Performance Reports:

Quality

C Jones drew attention to the slight increase in both falls and pressure ulcers on the Bedford site. Death rates had stabilised; 62 day cancer wait times had improved and the Trust continued to prioritise cancer patients and pathways; 2 week waits had been challenging due to the increase in referrals with an uplift in demand for high resource use equipment; and the focus now remained on reducing waiting times and the backlog.

C Jones assured governors that the Trust was working hard through improvements to pathways to get back on target and ensure that no patient waited longer than two years by 31st March 2022.

D Carter reported that the L&D Hospital had the best A&E performance in the country and year to date had performed well. Bedford hospital had maintained the top best ambulance handovers and it was pleasing to note that high standards had been maintained.

Finance:

M Gibbons reported that the Trust had achieved a surplus in line with plans for month 6 and month 7. There had been constraints in terms of delivery with initial concern around the financial allocation; but the outcome had been positive with the same amount of funds being allocated.

The capital spend had remained low which was usual for the time of year, but much of the capital funding had been allocated for numerous redevelopment works across the hospitals.

Workforce:

A Doak reported that training compliance was now at 77% so although heading in the right direction, had some way to go to achieve 90%. This was in part due to pressures in the organisation. The trajectory had been reviewed and would be monitored going forward.

F MacDonald explained that there had been positive developments in the Staff Health and Wellbeing areas on both hospital sites with new furniture and artwork in rest areas. The Trust would continue to support staff to understand what facilities were in place to support staff. A staff engagement event would take place in November, the feedback from which would inform plans going forward.

9. Audit Reports

- **Audit and Risk Committee Report**

S Hone drew attention to the report which contained the work undertaken by the Audit and Risk Committee and the outcomes from that work. The work of the A&R Committee was not only about gaining assurance around the annual report and accounts, but to ensure that the control and governance process to reach the results were accurate.

S Hone reported that the investigations by both the internal and external auditors had been thorough despite the challenges of the merger, Covid and operational issues, and that the Trust had been issued a clean audit. With regard to internal audit the Trust had performed well; and a good opinion had been issued in terms of fraud. Overall it had been a very satisfactory report for the year and had provided excellent assurances.

- **Independent Auditor's Report to the CoG**

The Independent Auditor's Report to the Council of Governors was received.

DECISION: The Council of Governors RECEIVED and APPROVED the Independent Auditor's Report.

- **Appointment of the Trust's External Auditor**

S Hone confirmed that the tender process had been well managed; there had been a clear gap following the process between the two companies which had applied, both in terms of both price and quality. BDO had been the preferred choice, and it was recommended to the Council of Governors to appoint BDO to the role of external auditor for a 3 year term.

DECISION; The Council of Governors APPROVED the appointment of BDO as the Trust's External Auditors for a 3 year term.

10. Lead Governor Report

H Lucas welcomed Robert Oakley, who had recently been appointed to the role of Joint Deputy Lead Governor.

11 Board Secretary Report

The Board Secretary Report had been taken as read.

D Burnett drew attention to the revised list of governors on Council Sub-Committees and Working groups.

12. Report from the Membership and Communications Group

P Brown stated that there had been good progress with a number of membership recruitment events planned including at the Rotary Club, There had been 142 members recruited between May to September primarily from the Bedford constituency.

The next Ambassador magazine would be issued in March 2022; the Annual Members Meeting had been planned for 7th September and the next Medical Lecture would be in May 2022 on diabetes.

13. Report from the Constitutional Working Group

H Lucas drew attention to the report for approval which listed the updates to the Constitution which reflected the agreed amendments at the February Council of Governors meeting related to the reduction in the governor numbers, and included a number of minor formatting amends. The report had already received Board approval. The updated Constitution showed the transition within the non- clinical groups and the volunteers and this would enable tracking of all decisions and clarity in the future. The next Constitutional amendments at the latest would be in April 2023 when all transitions would be completed.

DECISION: The Council of Governors APPROVED the amendments to the Constitution as listed in the report.

14. Report from the CoG Remuneration and Nomination Committee

J Gallucci reported that following a competitive tender process to select an agency for the recruitment of a NED and Chair, it had been agreed to award Veredus the contract. There had been 25 applications to the NED role; longlisting had been undertaken and 8 candidates moved forward and on 26th November the committee would shortlist 4 candidates for interview on 3rd December. The Chair recruitment process would commence in January 2022.

Y King thanked J Gallucci for the effective chairing of the committee and reported that Veredus had been very good as part of the committee, which had been very productive.

W Cook sought assurances on the diversity of the applicants; J Gallucci confirmed that Veredus had looked at candidates from a diverse range of backgrounds and experience.

15. Governor Working Group Reports

The Governor working group reports were received and noted.

N Byrne expressed concern that there had been no meeting of the Outpatient's Assurance group meeting for a considerable period. D Burnett agreed to action and progress.

ACTION: To progress a meeting of the Outpatients Assurance Group

16 Any Other Business

- ISS – H Lucas had undertaken discussions with M F Capon and N Byrne as leads on the Patient Experience Group, and had identified a difference in methodologies on each site. This had been picked up with the Director of Estates and assurances had been received that there would be improved processes to align the processes on each site, and that governors would be informed of the new standards going forward.

- J Kingham queried if there had been any update on the collection of wheelchairs and equipment. G Johns replied that he had not heard back from the CCG and advised that this was not in the Trust's control but was aware that it should be pursued.
- Volunteer Car Parking: J Graham was concerned that there were no designated parking places for Trust volunteers. It was noted that the Car Parking Group would meet next week and this would be discussed. V Parsons agree to take this forward.

ACTION: To look at securing designated parking for Trust volunteers on the L&D site

- Equality and Diversity: J Thakoordin queried how many colleagues had read the interesting reports that had been issued to the EDHR Committee as this was vital to improve understanding. S Linnett replied that the Trust had an active BAME network and was given a strong voice; and acknowledged that to get the best from staff; success had to be about the ability to take on board the views of all the people it serves. Y King added that she would be happy to signpost any interested governors to a website from an expert lady who published articles around social care and the ED agenda.

18. Time and Date of Next Meeting:

Council of Governors Meeting: Wednesday 23rd February 2022

Close of Meeting: 8.00pm