

Minutes of the Public Council of Governors Meeting held on Wednesday 24th February 2021, via Starleaf Video Conference, 6.00pm – 7.30pm

Present:

Public Governors:

Malcolm Lea, Luton Pam Brown, Luton Marie-France Capon, Luton Sean Driscoll, Luton Theresa Driscoll, Luton David Allen, Luton Brian Herbert, Luton Derek Smith, Luton Helen Lucas, Hertfordshire Dorothy Ferguson, Central Bedfordshire Chris Williams, Bedford Borough Yvette King, Bedford Borough Dr Jacqui Farhoud, Bedford Borough Robert Oakley, Bedford Borough Teena Ferguson, Bedford Borough Jenny Gallucci, Central Bedfordshire

Staff Governors:

Noreen Byrne, VolunteersMatthew Borg, Nursing, HCA & MidwiferyJanet Graham, VolunteersBelinda Chik, Nursing, HCA & MidwiferyMalik Farooq, Admin. Clerical & ManagementAnn Williams, Nursing, HCA & MidwiferySteve Morgan, Admin. Clerical & ManagementDavid Simms, Nursing, HCA & Midwifery

Appointed Governors:

Cllr Brian Spurr, Central Bedfordshire Council Louise Grant, University of Bedfordshire

Non-Voting Governors:

Judi Kingham, Luton	Keith Barter, Luton
Roger Turner, Central Bedfordshire	Malcolm Rainbow, Hertfordshire
Linda Grant, Central Bedfordshire	Susan Doherty, Luton

Board of Directors:

Doard 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
Richard Mintern, NED	Catherine Thorne, Director of Quality & Safety
lan Mackie, NED	Paul Tisi, Joint Medical Director
Dr Annet Gamell, NED	Liz Lees, Chief Nurse
Mark Prior, NED	Kandarp Thakkar, Director of Integration and Transformation
Simon Barton, NED	Fiona MacDonald, Director of Culture
	Gill Lungley, Chief Digital Information Officer
In attendance:	Donna Burnett, Trust Board Secretary (minutes) Victoria Parsons, Associate Director of Corporate Governance Anne Thevarajan, FT Membership Jenny Kelly, Corporate Governance Manager Dr T Sathiyamoorthy, Observership Placement, Medical Administration

1. Chairman's Welcome and Note of Apologies

The Chair welcomed members to the Council of Governors meeting and introduced Dr Sathiyamoorthy to the meeting.

Apologies were received from Cllr Abbas Hussain, Cllr Charles Royden Joby George Malal, Sunny Patel, Thomas Moss, Dr Ritwik Banerjee and Matthew Towner.

2. Any Urgent Items of Business and Declarations of Interest

There were no declarations of interest relevant to items on the agenda.

H Lucas brought forward from the pre meeting a request to have a regular update from NEDS on the quality of the ISS service which it was agreed to take forward.

ACTION: To take forward an update on the ISS Service for Governors from NEDs.

3. Minutes of the previous meeting held 18th November 2020 on:

The minutes of the previous meeting held on 18th November 2020 were APPROVED as a true and accurate record subject to a minor amendment: Attendees: To add Fiona MacDonald and Susan Doherty.

4. Action Log

The Council of Governors noted the progress that had been made around the actions within the action log.

5. Chair's Report

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

- Acknowledgment of how well the board and executive team, and staff had managed during this difficult period; and to note the first hints of recovery in addressing the backlog of work;
- The challenges faced by the board to balance the finances with no clear messages to date; and how the old standards with regard to performance and quality might fit in with a return to the usual timescales and the current context;
- To understand the reforms around the White Paper and the many options contained therein, inclusive of the boundary changes in terms of Sustainability Transformation Partnerships (STPs) and Boards working together, and the challenges to understand the requirements of the counties;

6. Chief Executive's Report

The Chief Executive highlighted a number of key areas of focus which included:

- Recovery work was now progressing across the Trust to address the backlogs;
- A substantial capital programme on both Trust sites was now underway and redevelopment work had been progressing well;
- Staff wellbeing remained a key priority and the staff health and wellbeing hubs were now being re-established to provide support to staff;
- Vaccinations were about to restart with the wave of second booster jabs now being issued; the Trust had been successful in vaccinating circa 83% of staff, but there remained challenges to get those who had not yet been vaccinated to receive the vaccination;

R Oakley queried why some staff did not wish to be vaccinated. P Tisi replied that this related to multiple reasons including contradictions, such as allergies, impact on fertility, but reassured governors that few staff had had any severe reaction, and a further campaign would be promoted to ensure vaccine take up by staff.

7. Covid-19 Update

C Jones reported that there had been a significant downward trend in the number of staff contracting Covid with just 13 cases in the last seven days. This was acknowledged as an excellent achievement from the position in late January when 125 cases had been reported. C Jones further reported a significant decrease in inpatient numbers from early January to date.

Ongoing challenges to manage Covid patients with switching wards from red to green required coordination and effort, but the teams had responded well, with services now slowly moving back to normal.

P Tisi reported on the community prevalence of Covid across the Trust sites with the overall trend in cases now declining in both Bedford and Luton. There had been an increase in the number of young working age adults being admitted with Covid, in part due to the increase in lateral flow testing, detecting more cases.

C Jones stated that tentative steps to map out recovery had now been established with a commitment to support regional local hospitals that may be struggling.

One of the key priorities would be to address all urgent work including endoscopy, cancer and outpatient services from March so that by April all routing services would be open to the level seen in autumn last year, given the limitations around pre-operative shielding.

The Chair queried how quickly services could be recovered. C Jones replied that the complexity of monitoring the scope of the work was difficult, but that the Trust would focus on those patients waiting longest, and the more urgent work, and endeavour to carry out activity at weekends and use the independent sector where possible.

8. Performance Reports:

Quality

Key highlights from the Quality report:

L Lees reported that there had been a small increase in the number of falls in the previous quarter which had been linked to the increase in the acuity of patients and staffing challenges which had compounded issues. L Lees provided assurances that since the merger, a specialist had been leading on falls across the hospital sites and this remained very much an area of focus for the Trust.

There had been challenges around visiting restrictions for adult inpatients, which had now been resolved in part, due to the January implementation of a next of kin and relative's helpline to ensure a more timely response to facilitate access to wards.

C Thorne informed governors that the refining of the reporting process around serious incidents (SIs) and the methodology had been positive and had resulted in improvement activity.

P Tisi reported that all deaths continued to be reviewed, coupled with thematic reviews to capture any learning from deaths to drive improvement, and outcomes shared with the Quality Committee.

C Jones highlighted the delayed pathways in the provision of cancer services and the complexity to maintain routing pathways whilst managing Covid patients on wards. Work continued to drive recovery in these services.

Governors queried the difference in the number of stroke patients between the two hospital sites. C Jones responded that stroke modelling was different with Luton being the main centre for time sensitive strokes, and assured Council governors that a good rate of patients were treated inside the hour and that stroke treatment in general continued to be good across both hospital sites.

Finance

M Gibbons reported that in Month 9 the Trust had performed against plan, and was now awaiting reimbursement against lost income from Covid, and would look to achieve a break even position as expected.

The capital spend to date was £27.6m which was noted as a significant amount of capital spend, with the remainder being spent over the next 6-9 months.

Workforce

A Doak informed governors of the continued overseas recruitment drive that had resulted in circa 20 overseas nurses, with a further 46 to arrive during February – March. The situation remained somewhat challenging with the restrictions around Covid on flights and quarantine.

There now continued to be a drive to recover the rates of mandatory training and appraisals and improve figures following the national directive earlier in the year to suspend these.

F MacDonald highlighted the steps in place to provide staff wellbeing and support. From April a dedicated resource would be put in place to provide staff with ongoing support for managers and teams to allay concerns and fears. Work also continued on the development of the staff hubs to make sure that they were fit for purpose and provided a place for relaxation to alleviate stress and address any concerns.

9. Lead Governor Report

H Lucas reported that she would be attending a regional governor meeting on 1st March and would share any key outcomes with governors.

H Lucas drew attention to the recent NHSEI briefing on the White Paper and agreed to circulate this to the Council of Governors.

Action: To circulate the White Paper briefing to the Council of Governors.

10. Board Secretary Report

D Burnett highlighted two key areas from the report to note, which included the appointment of a new governor member to the Trust's Redevelopment Programme Board; and the governor appointments to the Trust's newly established Patient Experience Council.

L Grant queried how parking permits were being managed for governor parking and what plans were being put in place for getting back to face to face governor meetings.

Action: To look into parking for governors and plans going forward for faceface governor meetings.

11. Report from the Constitutional Working Group

H Lucas informed governors that the group were seeking approval of the recommendations in the report to reduce the size of the Council of Governors, for both public and staff constituencies from 47 to 38, and as outlined in the Final Business Case (FBC). H Lucas pointed out that the reduction plans were a work in progress and that further reviews of public and staff and governor numbers would be reviewed going forward.

Key points to note included that non clinical staff groups had been amalgamated but would remain site based with the exception of the volunteer governor who will be cross site.

Going forward some posts would be staggered to ensure that not all governors were up for election at the same time to ensure stability in the Council.

A further proposal was to hold elections in September 2021.

P Brown pointed out that an outstanding action arising was for the Membership and Communications Group to have met with the CWG given that some members of the group had valid points to put forward. H Lucas agreed that this could be facilitated as the plans were work in progress.

ACTION: To set up a meeting between the Membership and Communications Group and the Constitutional Working Group. N Byrne queried whether the volunteer role had been realistically considered for a cross site role. B Chik expressed concern around the reduction in the number of staff governors for the nursing and midwifery constituency given the size of the staff group.

The Chair pointed out that considerable work had been undertaken to support the proposals by CWG members and the decisions had been difficult.

Y King assured governors that there had been challenging and robust discussions around the proposals which had not been easy and would not satisfy all governors, but the proposals had been fair in looking at the reductions.

H Lucas asked the Council of Governors to approve the recommendations as set out in the report from the Constitutional Working Group. Following a vote by show of hands the majority of governors approved the proposals.

DECISION 12: The Council of Governors APPROVED the reduction plans as set out in the CWG report and as outlined in the BHT Final Business Case.

DECISION 2: The Council of Governors APPROVED the decision to hold elections in 2021.

12 Reports for Membership and Communications Group

P Brown, Committee Chair stated that there had been no recent active recruitment due to the Covid pandemic, but that a number of membership forms had been handed out in some vaccination hubs where possible and safely.

The Interim Membership Strategy was presented to the Council of Governors and following discussion was approved by Governors.

DECISION: The Council of Governors APPROVED the Interim Membership Strategy.

P Brown advised that the 'Ambassador' membership magazine would be issued in April 2021 and asked governors to convey any suggestions for input for the group to consider.

ACTION: Governors to send any suggestions for input into the 'Ambassador' publication to the Chair of the Membership and Communications Group.

13. Governor Working Group Reports

S Driscoll highlighted key areas of interest from the Car Parking Group which included the new multi storey car parking for the Luton site; and the expansion of car parking in Bedford which was almost complete. The Trust were now in the process of synchronising the implementation of an APNR system cross site.

The Chair informed governors of a new Sustainability Group which was currently being set up and constituted as a committee of the Board.

Close of Meeting:

The Chair thanked members of the Council of Governors and Board members for their input and contribution to the meeting.

14. Time and Date of Next Meeting: Council of Governors Seminar – Wednesday

17th March 2021, 6.00-7.30pm