

**Minutes of the Public Meeting of the Council of Governors of the
Royal United Hospitals Bath NHS Foundation Trust
Tuesday 5th December 2017
RUH Boardroom, Oasis Centre, RUH**

Present:

Brian Stables, Chairman		
Public Governors	Staff Governors	Stakeholder Governors
Amanda Buss Chris Callow James Colquhoun Chris Hardy Nick Houlton Jacek Kownacki Anne Martin Mike Midgley Michael Welton	Mike Coupe Kate Fryer Julie Scriven	Julian Hughes Johnny Kidney Vic Pritchard

In attendance:

Razi Ahmed, NED Insight Programme
 Xavier Bell, Board of Directors' Secretary
 Jeremy Boss, Non-Executive Director
 Brian Gubb, Interim Director of Estates and Facilities (*item 23 only*)
 Joanna Hole, Senior Independent Director
 Roxy Poultney, Membership & Governance Manager
 Francesca Thompson, Chief Operating Officer (*item 22 only*)
 Sarah Truelove, Deputy Chief Executive (*Deputising for CEO – left after item 6*)

CG/17/12/01 Chairman's Welcome and Apologies

The Chairman welcomed the newly elected Governors to the meeting and everyone introduced themselves. He welcomed Cllr Johnny Kidney, the new Stakeholder Governor for Wiltshire Council.

The Chairman confirmed that a by-election was in progress for the Rest of England and Wales constituency which began on 26th October and would conclude on the 21st December.

The Chairman noted that apologies had been received from James Scott, Chief Executive and:

Public Governors	Staff Governors	Stakeholder Governors
Helen Rogers	Dave Chodkiewicz Darrin King	Andrew Girdher Ian Orpen

CG/17/12/02 Declarations of Interest in items on the agenda

There were no declarations of interest noted.

**CG/17/12/03 Minutes of the Council of Governors Meeting held on 5
September 2017**

The minutes were approved and would be signed by the Chair as a true record of the meeting.

CG/17/12/04 Action List and Matters Arising

All action updates were agreed as presented, the following items were discussed:

CG131 – The Chairman confirmed that progress on the STP was still slow, and that Chris Bown had now been appointed as Senior Responsible Officer.

CG143 – The Chairman stated that objective CG143 would be revisited at the February Council of Governors Away Day in 2018.

CG/17/12/05 Chief Executive’s Update Report

The Deputy Chief Executive and Director of Finance presented the update report and highlighted:

- 4 hour performance remained below the national standard of 95% (89.9% in October) but reduced in November, partly as expected due to the implementation of the new system but also as a result of the high levels of activity. 4 hour performance remained the Trust’s key focus and work was ongoing with the Emergency Care Improvement Team.
- High levels of Urgent Care activity had impacted on elective activity and caused issues for the RTT target. This had an effect on the Trust’s operational and financial performance.
- C difficile performance to October was 17 cases (worst case) or 13 cases (best case).
- Finance was on target to deliver the control total plan to achieve a surplus of £7.4m by September. The main issue related to urgent care performance as the Trust was unable to deliver elective activity as well as it should. Confident that the Trust would deliver this year, but concerned about the underlying position moving into next year.
- The Big 3 which was rolled out in November which included electronic prescribing, Order Communications and the new Emergency Department system First Net. It had so far been a success with approximately 1900 staff trained and the work would continue to be embedded over the next few weeks.
- There had been the following changes within Senior Management:
 - Helen Blanchard, Director of Nursing and Midwifery was undertaking a secondment to NHS Improvement and Lisa Cheek, Deputy Director of Nursing and Midwifery would be Acting Director of Nursing and Midwifery.
 - Dr Tim Craft, Medical Director was undertaking strategic work for the Trust’s Research and Development Department and Dr Bernie Marden, Head of Women and Children’s Division would be Acting Medical Director.

- Suzanne Wills, Divisional Manager for Medicine was leaving the Trust, Sarah Hudson Deputy Divisional Manager for Medicine would be acting up into the role of Divisional Manager and Denise Moorhouse, Senior Specialty Manager would be acting up into the role of Deputy Divisional Manager.
- Libby Walters had been appointed as the Director of Finance and would take up her post in the summer. The Trust was now looking to secure an Interim.

James Colquhoun, Public Governor questioned what the benchmark was for the 4 hour target and how the RUH compared to other Trusts. The Deputy Chief Executive stated that there were a couple of Trusts that delivered over 95% but the average for the majority of Trusts was 85-90%. Our performance can be quite variable compared to other organisations but we would like to be able to sustain performance. She added that it was linked to ambulance conveyances and the high number of patients that attended the Emergency Department. She also noted that there was also a lot of norovirus in the hospital at the moment which had also affected performance.

James Colquhoun, Public Governor expressed his appreciation for the changed management and for the Trust's achievements in relation to the Big 3. He noted the huge amount of anticipation and forward planning had resulted in the successful roll out and was really proud that the RUH had done so well.

James referred to the DTOCs and questioned whether 53 patients in 11 days is typical for the Trust as the numbers seemed very high. He also questioned whether this affected patient pathways. The Deputy Chief Executive stated that the Trust had seen some improvement in November, but performance was outside of what was planned for. She added that DTOCs were related to four hour performance, when there was an acceleration of patients through the front door, even if there had been improvement through the back door it wasn't always possible to sustain performance which was the reason for the variability of DTOC results.

Nick Houlton, Public Governor questioned what the logic was for setting the target of 2.5% when the national target was 3.5%. The Deputy Chief Executive confirmed that the stretch target was set locally by our CCG and the national target came with additional funding that went out to local authorities. Nick Houlton questioned whether there were financial repercussions for the Trust as a result of not achieving the target. The Deputy Chief Executive stated that there was currently no formal process to issue fines.

Vic Pritchard, Stakeholder Governor stated that money came to the local authority and that additional money was given by the Government to improve the Better Care Fund which concentrated around DTOCs. He confirmed that where the target had not been met, the Government was threatening to take money away from the local authorities and CCGs and give it to acute hospitals.

Mike Welton, Public Governor stated that he had attended several Board of Directors meetings that included updates on C Difficile and at each meeting the Board was

informed that the Trust was learning from each case. He questioned whether the Trust was still experiencing issues with C Difficile as a result of accountability or whether it was something that would always be present no matter what work was done to try and eliminate it. The Deputy Chief Executive stated that an RCA (root cause analysis) was undertaken whenever the Trust had a case of C Difficile to try and understand what the underlying issues were, but that there wasn't one thing that could be identified that could eliminate C Difficile. She added that NHS Improvement had undertaken a review that identified lots of small issues and that the Trust had developed an action plan to address them. One of the main themes related to the use of antibiotics and more work was being done around this. She stated that this was also apparent in the wider healthcare system as people who had received antibiotics were more susceptible to C Difficile.

Mike Coupe, Staff Governor added that everyone had C Difficile within their body but the issue was with people who received antibiotics inappropriately and this was where improvements could be made. He added that it was unlikely that C Difficile could be eliminated. The Deputy Chief Executive states that the introduction of electronic prescribing would allow the Trust to better monitor the use of antibiotics.

Mike Welton, Public Governor also questioned whether the Trust was happy with the level of cleanliness and ensured that nursing staff were time efficient in taking stool samples. Professor Julian Hughes, Stakeholder Governor highlighted that his previous experience of another Trust was that C Difficile had been reduced as a result of the Microbiology Team who had initiated a clamp down on the use of strong antibiotics and that cleanliness was linked more to norovirus. He added that he often found that the alcohol gel was empty on the wards at the RUH and questioned whether this could be addressed.

Mike Coupe, Staff Governor stated that antibiotic stewardship had vastly improved since he had first joined the Trust. The Chairman added that when he joined the Trust in 2010 there had been approximately 180 cases of C Difficile per year and that this had reduced significantly.

The Chairman requested that the Council of Governors received an update on C Difficile and how the RCAs were being actioned.

Action: Acting Director of Nursing & Midwifery

Jacek Kownacki, Public Governor stated that the New Governors had been shown around the new Pathology Lab that included the machine that identified C Difficile in 15 minutes and another machine that identified norovirus and that this seemed like a fantastic piece of equipment for the Trust. The Deputy Chief Executive confirmed that as the Trust did not have as many side rooms as modern hospital, it was important to be able to identify infections as quickly as possible so that the correct care and treatment could be put in place.

Mike Coupe, Staff Governor stated that electronic prescribing was a quirky system and was pleased to see that the work undertaken by RUH staff was recognised in the report. He questioned whether there was a robust mechanism in place to capture the incidents

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that slipped through the system. The Deputy Chief Executive confirmed that Datix was a way of capturing any incidents which were then reviewed and addressed.

Mike Coupe questioned whether there had been any incidents of patient harm. The Deputy Chief Executive confirmed that there had not been any cases to date.

Amanda Buss, Public Governor recognised the significant amount of work that had been done to improve flow through the Emergency Department but stated that the problem did not seem to be within the Emergency Department itself as people were being assessed relatively quickly. She added that over the last five years it seemed that the Trust was being pinched from contract point of view and questioned whether there was assurance that there was work to be done in finding a contract that did not financially disadvantage the Trust. The Chairman confirmed that ED admissions were up 7% on last year which was 12% above contract. The Deputy Chief Executive stated that the difficulty was that the NHS did not have the funding to meet the demand and that there was a responsibility for the Trust and the Commissioners to work together to think about how to reduce that demand. The strategic direction was not about increasing size of acute hospitals, but how could we more quickly make preventative measures and community solutions happen in a way that ensured that the Trust operated in the appropriate way. She added that this was part of the work being done with the STP and the Accountable Care System. She confirmed that there was more traction in Wiltshire as a result of Wiltshire Health and Care and that initiatives like Home First had already helped make improvements. She added that it was important to reach this point in BaNES to ensure similar issues were addressed.

The Council of Governors noted the update report.

CG/17/12/06 Sustainability and Transformation Plan (STP) Update

The Deputy Chief Executive and Director of Finance provided a verbal update on the Banes, Swindon and Wiltshire STP and highlighted:

- Chris Bown had been appointed to lead the Bath, Swindon and Wiltshire STP on 6th November 2017
- Discussions within the overarching STP were to look to create three Accountable Care Systems for each area
- Chris Bown was keen to engage our STP and Clinical Board in a discussion on the more radical transformation plans to take forward as our STP could be looking at a deficit of £25-30 million this year
- Swindon were the most advanced in conversations on Accountable Care System as Great Western Hospital had taken over the Community Services in early 2017
- Wiltshire Health and Care was working well, the Strategy was going forward and work was being done with Councillor Jerry Wickham on how services could be brought together
- Work was being done in BaNES with Bath University School of Management looking at collaborative leadership and focusing on developing relationships
- Supporting work around Mental Health and elderly care, looking at what was currently being spent and what could be done differently to redirect the funds

Mike Coupe, Staff Governor questioned what the percentage was for the £25-30 million deficit in the overall budget. The Deputy Chief Executive confirmed that it was within 1% so it was fairly small but up until now there was a surplus so this signalled that things would be tougher financially going forward.

The Chairman stated that he was conscious that the discussion had not included the Mendip STP as he understood this had been paused for two months but that it would be useful to have an update on this. Mike Welton, Public Governor agreed and stated that it was important for both patients and the organisation to hear how the Trust viewed interfacing with the Mendip STP.

Action: Chief Executive

The Deputy Chief Executive confirmed that a meeting with Mendip STP had taken place and that they recognised that more needed to be done to engage with out of area stakeholders.

The Council of Governors noted the update.

CG/17/12/07 2017 Election Results

The Chairman presented the election results and highlighted:

- Official report from ERS on voting was included in the report
- The successful candidates were:
 - Amanda Buss, City of Bath (re-elected)
 - Helen Rogers, North East Somerset (re-elected)
 - Mike Welton, Mendip (re-elected)
 - Jacek Kownacki, North Wiltshire
- Chris Hardy was confirmed as the new Governor for South Wiltshire through an uncontested election
- A by-election was being held for the Rest of England and Wales constituency as no nomination forms had been submitted previously, the election was due to close on 20th December 2017

Kate Fryer, Staff Governor stated that Governors were informed that they would receive all Governor email address but that she had not received this information. The Membership and Governance Manager confirmed that this information had been sent out to all Governors in the monthly roundup email.

Mike Coupe, Staff Governor questioned whether an investigation had taken place into the reason for the high number of staff not receiving their election paperwork. The Membership and Governance Manager confirmed that an investigation was currently underway and she would update the Council of Governors with the response.

Action: Membership & Governance Manager

The Council of Governors noted the update.

CG/17/12/08 Annual Register of Governors Interests

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The Chairman presented the Annual Register of Governors Interests and highlighted that this was a working document. He requested that Governors informed the Membership and Governance Manager of any changes to their interests throughout the year.

The following Governors confirmed the following changes to their interests:

- Mike Midgley, Public Governor - member of the Labour Party
- Vic Pritchard, Stakeholder Governor – member of the Conservative Party
- Johnny Kidney, Stakeholder Governor - member of the Conservative Party
- Kate Fryer, Staff Governor – member of the Liberal Democrats

The Chairman stated that all Governors were required to declare their political party affiliations.

The Council of Governors approved the register.

CG/17/12/09 Council of Governors Terms of Reference

The Chairman presented the Council of Governors terms of reference and highlighted that the document had not been reviewed since the organisation became an NHS Foundation Trust in November 2014 and that it highlighted mainly small changes.

Chris Callow, Lead Governor questioned whether NHS Improvement would know that he was the Lead Governor as referenced in the Terms of Reference. The Chairman confirmed that NHS Improvement would be aware.

Anne Martin, Public Governor stated that it was not referenced on page 5 for Governors to attend the Board of Directors meetings. The Chairman confirmed that as this was not a statutory duty, it did not need to be included in the Terms of Reference. Mike Welton, Public Governor questioned whether section 7.6 could include this. The Chairman suggested adding in wording around “Governors to observe Board of Directors meetings to provide assurance to sub committees”.

Action: Board of Directors’ Secretary

Mike Welton, Public Governor stated that a process and dialogue with the Board of Directors had never been established and suggested that a formal written procedure should be developed and what this would encompass. The Board of Directors’ Secretary stated that this would involve the Executive Directors attending the Council of Governors meetings to provide assurance. Mike Welton agreed to draft this process with the help of the Board of Directors’ Secretary.

Action: Mike Welton, Public Governor

Mike Welton, Public Governor requested that the word ‘quality’ be added into the 9th bullet point on page 5 to read “strategic, quality and annual plans”. The Chairman approved the suggestion.

Action: Membership & Governance Manager

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Mike Welton, Public Governor stated that there should be a forum in place to evaluate performance and what it was measured against. The Chairman confirmed that he undertook this as part of the Council of Governors 1:1 reviews and the Away Day in February. The Board of Directors' Secretary highlighted that there were a set of questions that the Board and Board committees used to evaluate themselves and suggested that these could be looked at during the Away Day in February.

Action: Board of Directors' Secretary / Membership & Governance Manager

Amanda Buss, Public Governor requested that the Council of Governors objectives be circulated. The Chairman stated that the objectives were looked at as part of the Away Day and then reviewed at the Council of Governors meeting in March. He suggested that it needed a review process and asked Mike Welton, Public Governor and the Board of Director's Secretary to look at this and bring back to March meeting.

Action: Mike Welton, Public Governor & Board of Directors' Secretary

The Chairman requested that Chris Callow, Lead Governor ensured that there was a specific agenda item on the Council of Governors Away Day agenda in February that focused on the objectives.

Action: Chris Callow, Lead Governor

The Chairman suggested that the Terms of Reference were approved subject to further discussion between Mike Welton, Public Governor and the Board of Director's Secretary for the final review in March.

Action: Membership & Governance Manager

CG/17/12/10 Staff Governor Feedback

Julie Scriven, Staff Governor presented the report on behalf of all Staff Governors. She highlighted:

- The following three Staff Governors were elected following the election:
 - Kate Fryer, Senior Buyer
 - Mike Coupe, Consultant Anaesthetist
 - Darrin King, Restaurant Supervisor

She also highlighted that a number of staff working in the Surgical Division had asked for assurance that the RUH was sufficiently prepared for an increase in emergency workload over the winter period and questioned whether this could be addressed by the Council of Governors. The Chairman confirmed that a detailed Winter Plan had been developed and had been presented at the Board of Directors meeting in October and was available on the intranet. Mike Coupe, Staff Governor stated that this was positive but questioned how widely the Winter Plan had been circulated. The Board of Directors' Secretary stated that staff would have been informed via intheweek but would look into how to disseminate the information more widely.

Action: Board of Directors' Secretary

Kate Fryer, Staff Governor questioned what the process was for identifying topics that were not available for members of the public. The Chairman confirmed that the process

agreed by the Board of Directors was to include as much information as possible in the public domain and that only information that related to individual patients or members of staff, commercial in confidence or private financial information would not be available for members of the public. He added that this was the reason for the confidential pre meet with the Council of Governors prior to the meeting. Kate stated that she did not feel assured that this process was robust. The Chairman noted her comments and confirmed that he sent out a monthly Governors report following the Board of Directors meeting and that the Board of Directors tried to include as much information in the public domain, especially that which related to patient safety. He added that Governors are also given the opportunity to discuss issues with the Non-Executive Directors as part of the Seminar session which gave an extra level of assurance.

Chris Callow, Lead Governor stated that he had been encouraging people to have the flu jab and questioned whether there was more that could be done to prevent people coming into the hospital and spreading flu. The Deputy Chief Executive stated that the Local Authority and CCGs were working on communication messages to “keep yourself well” and use alternative methods such as pharmacies.

The Chairman asked the Council of Governors to take every opportunity to reiterate Public Health messages to members.

The Council of Governors noted the feedback from the Staff Governors.

CG/17/12/11 Public Governor Feedback

The Chairman stated that the report provided the Council of Governors with an overview of the feedback received from public members and the general public during the past 3 months.

Nick Houlton provided feedback following the North East Somerset Constituency meeting held on 7th September 2017:

- We focused on nutrition and topics that people could control themselves.

James Colquhoun provided feedback following the South Wiltshire Constituency meeting held on 13th September 2017:

- We found that people understood prevention and were able to amplify this. There was a sense of the general public being more proactive in their own health.

Jacek Kownacki, Public Governor confirmed that he attended the North Wiltshire Constituency meeting on 23rd October 2017 as a member as the election was still running at that time. He stated that he was very encouraged by the attendance and interest from members. He added that the topic of Dementia was well received and suggested that this topic be regurgitated to other meetings or as a presence in the Atrium to talk to people. The Chairman recommended that the other Public Governors considered Dementia as a topic for future Constituency meetings and that Maggie Depledge, Dementia Co-ordinator may be able to support the Governors in holding a session on Dementia in the Atrium.

Action: Membership & Governance Manager

The Council of Governors noted the Public Governor feedback.

CG/17/12/12 Stakeholder Governor Feedback

The Chairman asked the Stakeholder Governors present to inform the Council of Governors about any issues pertinent to the RUH.

Prof Julian Hughes, Stakeholder Governor, University of Bristol

- No updates from University of the West of England or Bath
- Professor Sarah Purdy, Head of Bristol Medical School passed on thanks to the Trust for their support after submitting a bid for 30 more medical students from year 2019
- Like to thank the Trust for supporting two RUH University of Bristol Clinical Academics with recent grants in fellowship applications – Professor Esther Crawley, Child Health and Dr Emily Henderson, National Institute for Health Research

Vic Pritchard, Stakeholder Governor, BaNES Council

- Improvements to the existing working arrangements between the CCG and the Council. Joint governance decision making frameworks had been through the Council’s Cabinet and work was ongoing on how this would to work
- The CCG had given a report on a number of topics to the Health and Wellbeing Select Committee and had proposed to restrict access to fertility treatment, female sterilisation and vasectomy in a bid to save money, this had gone out to the public and the closing date was 27th December. The proposal had not been well received and there had been a number of complaints from the public. The Chairman questioned where this information could be found. Vic confirmed that a link was available on the CCG’s website.

Cllr Johnny Kidney, Stakeholder Governor, Wiltshire Council

- No updates

The Council of Governors noted the update.

James Colquhoun, Public Governor left the meeting at 11:55

CG/17/12/13 Working Group Actions arising out of feedback

The Chairman asked the Council of Governors if there were any concerns raised by members which should be passed to a working group to look at in more detail.

The Council of Governors identified no additional issues that should be passed to the working groups.

CG/17/12/14 Update from the South West Governors Exchange Network

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The Chairman asked those who attended the South West Governors Exchange Network whether they had any feedback.

Amanda Buss, Public Governor stated that there had been a debate on the meaning of membership and engagement and that the consensus was that the general public was more important than members and that the public’s perspective was that they weren’t interested in where the care came from, just that they received the correct care.

Anne Martin, Public Governor stated that they had been informed of the new CQC inspection system.

The Council of Governors noted the update.

CG/17/12/15 Lead Governors Update Report and AMM Feedback

Chris Callow, Lead Governor presented the update report and feedback from the Annual Members Meeting that was held on 27th September 2017. He highlighted:

- The two questions that were asked at the AMM were:
 - What changes have you seen at the RUH over the last years?
 - What would an outstanding RUH mean for you?
- The responses received from the members was expected and would be used as part of the Strategy item at the Away Day on 14th December
- Shared a quote from a member “it’s not a case of what you can offer members, more what could members help the RUH with.”

The Council of Governors noted the update.

CG/17/12/16 Strategy & Business Planning Working Group Update Report

The Chairman presented the working groups update report as the Chair of the meeting had sent apologies.

The Council of Governors noted the update report.

CG/17/12/17 Quality Working Group Update Report

Amanda Buss, Public Governor presented the report and highlighted:

- Thanks to Jan Taylor for previously chairing the working group

The Council of Governors noted the update report.

CG/17/12/18 Membership & Outreach Working Group Update Report

Chris Callow, Interim Chair of the working group presented the update report. He highlighted:

- Thanks to Phill Lunt for previously chairing the working group
- To note the appendices of the AMM feedback and Governor survey
- Decided the following topics for future Insight magazines as a result of the members feedback
 - How representative the Membership was (March 2018)

- o Progress on the RNHRD and Therapies Centre (March 2018)

The Council of Governors noted the update report.

CG/17/12/19 Board Monitoring Group Update Reports

Amanda Buss, Public Governor presented the report and suggested that the format of the report be changed to focus on the patient story, areas of concern and the recommendations. She added that Governors could get the detail from the Board of Directors reports. Chris Callow, Lead Governor highlighted that the Board of Directors papers were not available online until after the meeting. The Chairman stated that the reports would not be available online until after the meeting but suggested that Chris received an electronic version of the papers.

Action: Board of Directors' Secretary

The Council of Governors approved the revised format.

Amanda Buss also highlighted concerns that related to the procedure and how the Council of Governors received the information. She referred to a report that was submitted by the Governors on 30th October that was then amended by the Trust on 21st November. She stated that the Governors were not happy that the report was amended by the Trust as it contained factually accurate information and that they would like to look at a new procedure where the report could be circulated directly. The Chairman asked the Board Monitoring Group to devise a recommendation because there would need to be a safeguarding mechanism that ensured that sensitive information was not inadvertently made available in the public domain.

The Board of Directors' Secretary stated that the document needed to be fact checked to ensure that information from the Board was being communicated correctly. He stated that the amendments were suggested as a way to ensure the language focused on assurance and was not a challenge of Governors opinions. He agreed to look at the process with the Chairman and the Board Monitoring Group outside of the meeting.

Action: Board of Directors' Secretary, Board Monitoring Group

Mike Welton, Public Governor questioned whether he had a have his comments vetted before reporting back to his constituents following his attendance at the public Board of Directors meeting. The Board of Directors' Secretary stated that this was only necessary in the formal report as it was necessary for information to be checked for factual accuracy and that this did not affect personal opinion.

Amanda Buss, Public Governor expressed concern around the discharge process and asked whether the Trust could investigate whether more detailed metrics were required to measure the process. The Chairman suggested that this question be passed to the Non-Executive Directors.

Action: Board of Directors' Secretary

Amanda Buss also requested that a similar mechanism be looked at for Sepsis and AKI. The Chairman suggested that this was also passed to the Non-Executive Directors to investigate.

Action: Board of Directors' Secretary

The Chairman asked the Council of Governors to approve the following proposed recommendations for the working groups:

- Quality Working Group:
 - Seek reassurance that the Nursing shortage is not affecting Quality
 - Obtain reassurance that the Trust is initiating a plan to tackle patients left alone/in isolation for extended periods
- Strategy and Business Planning Working Group:
 - Receive briefing on content and progress of Transformation QIPP
 - Be briefed on any alteration to the capital program

Action: Membership & Governance Manager

The Council of Governors approved the recommendations and noted the update report.

CG/17/12/20 Governors as Observers – Assurance Committee Update

Amanda Buss, Public Governor attended the Non-Clinical Governance Committee on 15th November and highlighted that the process for learning from complaints and feedback was very good, but that she was less assured that the Trust was taking learning points from complaints and that the “evidence and change” as a result of investigating complaints was a challenge. The Chairman suggested that this was looked at by the Quality Working Group.

Action: Membership & Governance Manager

Appointment of Audit Committee Observer

The Chairman questioned whether any other Governors would like to observe the CGC and NCGC on a rotational basis with Nick Houlton and Amanda Buss. Anne Martin, Public Governor agreed to observe CGC and Kate Fryer, Staff Governor said she would be happy to observe NCGC.

The Chairman questioned which Governor would volunteer to observe the Audit Committee as there was currently no Governor sitting on this committee. Kate Fryer, Staff Governor said she would be happy to either observe Audit Committee or NCGC.

The Council of Governors noted the report.

CG/17/12/21 Working Group Actions Arising Out of Update Reports

The Chairman asked the Council of Governors whether there were any working group actions arising from the reports presented. It was agreed that there were no further recommendation other than those already agreed.

CG/17/12/22 Operational Delivery (taken after item 12 on the agenda)

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The Chairman welcomed Francesca Thompson, Chief Operating Officer to the meeting. She presented the update and highlighted:

- The Single Oversight Framework had been modified slightly but the standards remained similar:
 - 4 hour emergency access standard was 95%
 - 18 week referral to treatment incomplete standard was 92%
 - Cancer standards 62 day was 85%
 - Diagnostics access was 99%
 - In addition there were 14 Quality Indicators which were shown on the integrated balance scorecard and included C Difficile of which there were 22 cases

4 hour was a challenge for the RUH and this was recognised nationally but the Trust continued to work on the improvement plan that is monitored through the Urgent Care Collaborative Board. She added that delivery was managed via the A&E Delivery Board that was now chaired by James Scott, Chief Executive who replaced Tracey Cox, Chief Executive, BaNES CCG.

The three key things that the workstreams were focused on were:

- Ambulatory Care and rapid assessment e.g. Frailty Flying Squad
- Senior review and timely discharge
- Simplified discharge pathways and Home First. The Trust had just won a leadership bid to help all senior operational managers with the Home First initiative

She stated that the national mandate for DTOCs was 3.5% and that this was not being met but confirmed that the Home First initiative had helped make improvements in DTOCs. She added that Wiltshire were doing very well with DTOCs and was pleased with their engagement.

She stated that the Emergency Department continued to be overcrowded but that the Trust continued to monitor the safety and escalation procedures very carefully. She added that staffing levels were scrutinised and confirmed that Agency nurses were not used within the Emergency Department.

She stated that the Trust had struggled with 18 week RTT demand and management of waiting lists but a lot of work had been done to maximise productivity in outpatients and theatres. There had been particular pressures in Medicine, Cardiology and Dermatology. She added that the Trust continued to meet all the cancer targets.

She stated that the Trust was ahead of the improvement plan for diagnostics, particularly in Cardiology.

Vic Pritchard, Stakeholder Governor questioned how the DTOCs graph was split between the two principal authorities that the RUH served and how the BaNES figures were determined. The Chief Operating Officer confirmed that all the detail was at CCG level and was included in the 4 hour performance report that went to the Board of

Directors meetings. She stated that BaNES ranged between 4-10% of our bed base and that Wiltshire was more encouraging at 4-8% and sometimes down as low as 5%. She added that South Gloucester was small numbers but that it could be as high as 20% so it did vary for each CCG. She also stated that DTOCs in Wiltshire community hospitals was up at 25%.

Kate Fryer, Staff Governor questioned how confident the Executive Directors were that staff were being managed. The Chief Operating Officer stated that this was part of the well-led domain and that the Acting Director of People was currently working on this as part of the appraisals process. She confirmed that the Medical workforce appraisals were exceeding the national standard, but internally it varied per division. She added that the formal measure was an annual measure but managers had the opportunity to undertake interim appraisals.

Nick Houlton, Public Governor questioned why Wiltshire engagement was better than BaNES. The Chief Operating Officer stated that Wiltshire took a long time to get to a place where we needed to work differently but they've put in a lot of strategic thought and insight into how to would work differently and we now have the joint venture through Wiltshire Health and Care which has helped. She added that although engagement was disappointing in BaNES, they were still working on the relationship with the new provider, Virgin Care but that they seemed committed and were trying to iron out current issues. She also added that they were very committed to Home First and recognised that they were behind on engagement.

Mike Coupe, Staff Governor stated that he had heard a couple of negative stories from patients in the community that related to delayed ambulances and questioned whether this was monitored. The Chief Operating Officer confirmed that the Trust did measure time for ambulances and that the Trust was in the top decile for performance and ambulance handovers in less than 15 mins and less than 30 mins which is exceptionally good. She added that the Trust had very good relationships with the Paramedics at handover but that situations did happen which were out of our control and when this happened the Trust found it difficult to cope with the demand. She confirmed that ambulance handover figures were included in the monthly Operational Performance Report that went to the Board of Directors meetings.

The Council of Governors noted the update.

CG/17/12/23 Estates

The Chairman welcomed Brian Gubb, Interim Director of Estates and Facilities to the meeting. He presented the update and highlighted:

- The Trust had recently invested in refurbishing ward kitchens, ward toilet and shower facilities and new catering equipment and structural improvements in the main patient kitchen
- The Lansdown Restaurant had been refurbished and achieved a Soil Association "Food for Life" Silver Award

- The 2020 Sustainability Performance Targets had been set and the Vision was to act as a national pilot site to drive positive changes within the NHS.
- The Estates Team had been re-structured which included the appointments of a new Waste and Recycling Officer and Travel Planner
- The new Multi-Faith Centre was due to open in December

Anne Martin, Public Governor questioned whether there were any plans for additional Park and Ride services or more parking spaces. The Interim Director of Estates and Facilities stated that more parking spaces wasn't an option as the Trust was already limited in this area and that the remit for the travel planner was to look at all possible options for the Trust and which would be the most efficient and cost effective.

Kate Fryer, Staff Governor questioned whether the Trust had challenged the Council on providing additional parking spaces. The Interim Director of Estates and Facilities confirmed that the Trust had asked a consultant to look at all aspects of parking (staff and visitors) and this would look at ways to maximise the capacity of current carparks and could include a further challenge to the Council.

The Council of Governors noted the update.

CG/17/12/24 Constitution Amendments for Approval

The Board of Directors' Secretary presented the Constitution and highlighted:

- The Constitution had not been reviewed in detail since becoming an NHS Foundation Trust in 2014
- The substantive change around the Board of Directors in section 27 had brought the Trust in line with what Foundation Trusts were entitled to have and the restrictions that were in the previous Constitution did not apply to Foundation Trusts and were therefore removed.
- As we move towards the STP and Accountable Care System we need to move to a place where senior leadership could sit across multiple organisations.

Kate Fryer, Staff Governor questioned whether Board members were restricted from sitting on other Boards. The Board of Directors' Secretary stated that the intention of the change was to enable Executive and Non-Executive Directors to sit on boards of other NHS, private organisations or charities such as Dorothy House or the Osteoporosis Society as the Board recognised that there was a great deal of benefit in this. Kate questioned whether this excluded private limited companies. The Board of Directors Secretary confirmed that the Executive's involvement in other organisations, private or NHS, could be managed via the employment contract, line management and conflict of interest policies, as these provided a robust framework to ensure the Trust was not disadvantaged.

Mike Welton, Public Governor expressed concern around time constraint and questioned how our Executive Directors could sit on other boards which may require a large time commitment. The Board of Directors' Secretary stated that this would be a line management discussion and used the example of the Non-Executive Directors who

worked a full time job. The Chairman added that the Director of Finance was also an Executive Director for Wiltshire Health and Care which was not an NHS organisation. Mike stated that he could not approve this without being given more explanation. The Chairman stated that this was included in the document that was circulated electronically and suggested that any Governors who had concerns about the wording to email the Board of Directors' Secretary with the clarification they required.

Action: Council of Governors

Mike Coupe, Staff Governor stated that there was a similar paragraph in the Governor role that related to the Chairman. The Board of Directors' Secretary confirmed that as the Chairman was a Non-Executive Director this did not relate to the Chairman of the Council of Governors.

He added that he was happy to discuss any concerns outside the meeting; however the Constitution was presented for approval in the form that had already been approved by the Board of Directors. He suggested that if after further discussion further changes were agreed, the Constitution could be brought back to the Council of Governors in March for approval, noting that any other changes would also require Board of Director approval.

Action: Board of Directors' Secretary / Membership & Governance Manager

The Council of Governors agreed to the approach and approved the Constitution in its current form, with further discussion to be taken forward outside the meeting.

CG/17/12/25 Governors Assurance Committee

The Chairman provided a verbal update and highlighted:

- The Council of Governors agreed to put a candidate forward

The Council of Governors approved the Constitution.

CG/17/12/26 Items for future work plan

The Council of Governors noted the future work plan.

CG/17/12/27 Meeting Review

CG/17/09/25 Resolution into private meeting

The Chairman resolved that the Council of Governors would now meet in private due to the confidential nature of the business to be transacted.

The meeting closed at 12:40

The next Council of Governors meeting is due to be held on 6th March 2018.

SignedDate

Author: Emily McConnell, Membership & Governance Administrator	Date: 23 January 2018
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