

Report to:	Council of Governors	Agenda item:	9
Date of Meeting:	7 June 2018		

Title of Report:	CoG Annual Review including Away Day Summary
Status:	For information
Board Sponsor:	Brian Stables, Chairman
Author:	Janet Adeyemi, Interim Membership & Governance Manager
Appendices	None

1.	Executive Summary of the Report
A number of priorities were agreed during the Governor Away Day on 26 th February 2018. This paper provides a summary of the feedback from the 2018 review process and updates following the Governor Away Day on 26 th February 2018.	

2.	Recommendations (Note, Approve, Discuss)
The Council of Governor is asked to note the report and agree priorities for 2018/19	

3.	Legal / Regulatory Implications
N/A	

4.	Risk (Threats or opportunities, link to a risk on the Risk Register, Board Assurance Framework etc.)
N/A	

5.	Resources Implications (Financial / staffing)
N/A	

6.	Equality and Diversity
N/A	

7.	References to previous reports
N/A	

8.	Freedom of Information
Public	

Summary of key points from Annual Review Process – 2018

- The Council of Governors is generally good and working well – recent personnel changes will need time to embed but are bringing some new enthusiasm. The Council of Governors performs well and is continuing to improve.
- Some Governors see the Council of Governors as effective but perhaps a little stagnant – they feel it could be moving forward in a more focused manner by agreeing clearer objectives that better relate to demonstrating the effectiveness of the Council of Governors.
- Meeting structure is good and less agenda items works better. Need to balance the time given to detailed and personal feedback with more focus on key strategic issues and identification of potential trends that may need further assurance. Still there are occasionally some elements of confusion between the role of a Governor and that of a NED and the need to act corporately, not just as individuals.
- A number of Governors would like to see some more focused presentations from clinicians (e.g. speciality leads or heads of divisions) to help better understand the challenges through the eyes of both clinicians and patients.
- The feedback from the Board Monitoring Group is useful but a number of Governors suggest that we could all engage more by reading board papers as part of the overall preparation for Council of Governors meetings. There are still a relatively small number of Governors perceived as doing the “heavy lifting”.
- Working Groups are generally working well but the Away Day might like to review whether we have the right working groups to meet our objectives in the future. NB do working groups all have to start during the clinical day?
- We should regularly review the objectives for all of the working groups and review their effectiveness and review the overall effectiveness of the Council of Governors.

Key opportunities for improvement – in order of frequency raised

1. Governor involvement

- How can we encourage all Governors to read all relevant papers (especially Board papers)?

2. CoG , Working Groups and Away Day

- As a measure of the effectiveness of the Council of Governors should we be focusing on all aspects of how we can preserve, enhance and develop the patient experience, for example?
- Do we have the right working groups for the future – can we look again at meeting times?
- Council of Governors meetings are seen as being effective with well-balanced agendas – could we look to include more clinical input from time to time?
- Generally working groups are working well – could we look at ways that could more formally report back from their meetings to the Council of Governors? We should revisit the objectives for all working groups.
- The Away Day should look to decide on the objectives for the Council of Governors and how governors hold themselves accountable for delivery.

3. External interface

- How can we better engage with our members through constituency meetings etc. – should we have some form of “content standardisation” across constituency meetings?
- How do we become more involved in the external interface especially Councils and CCG’s (same comment as previous years) and especially the STP. This is seen as another key element contributing to our effectiveness.

4. Membership

- How can we better engage with our members through constituency meetings etc. – should we have some form of “content standardisation” across constituency meetings?
- How can we target an increase in membership, especially from underrepresented sectors and hard to reach groups? – This is also seen as a key component of measuring our effectiveness.

Feedback on progress from 2017 actions for improvement

- Governors need to take more ownership and be more proactive in taking member issues to the Working Groups– and WG’s pushing more items back to CoG. Seems to be improving with more of a link between Working Groups with the feedback to CoG and vice versa. The additional agenda item – what would we like the WG’s to consider is starting to assist.
- Could we look to identify one or two areas/themes from the member feedback where we ask Working Group’s to do more of a “project deep dive” Working Groups are picking up key issues in more depth (e.g. WoS at S&BP) – can be encouraged through WG chairs group which can be restructured if desired.
- How do we get more Governors involved in CoG activities e.g. Board Monitoring Group etc. How can we encourage individual Governors to bring their individual skills and experiences to help develop the CoG. Improving in terms of Governors attending Board meetings and good attendance from governors as observers on the assurance committees (except Audit where there is a current vacancy).
- How can we encourage all Governors to read all relevant papers (especially Board papers). Will be interesting to ask how many CoG members read Board papers and how regularly?
- Governors could be more involved in the external interface especially Councils and CCG’s (same comment as last year). Some Governors have attended CCG meetings and are following up with a further meeting with BaNES CCG.
- This also links to potential Governors involvement in the STP process as it evolves. BJS has pushed and now there is session for some Governors planned in April – but limited numbers at first.

Update following the Governor Away Day

CoG Priorities for 2018/19

1. Strengthen our relationships with stakeholders:
 - a. Arrange visits to/from Governors of other hospitals
 - b. Governors to attend council meetings, CCG's etc.
2. Devise ways to better understand the STP's and potential effect on patients, staff members and the RUH as a corporate body:
 - a. Governor attendance at STP stakeholder events and feedback to CoG
3. More interaction with NED's:
 - a. Further develop seminar interaction.
 - b. NED questions as a part of CoG meetings
 - c. More presence of NED's at working groups
 - d. Arrange joint NED/Governor walkabouts/ward visits
4. Measures of CoG effectiveness;
 - a. Focus on how the CoG impacts patient experience
 - b. Reviews terms of reference for the working groups/composition
 - c. Effectiveness of constituency meetings
 - d. Visit other FT's to see best practice
 - e. Explore a governors' sharing forum/arrange informal get-togethers

Feedback from the Away Day

EFFECTIVENESS

- Impact of CoG actions on the patient experience
- "Quality" of interaction with members –Reinvigorate – numbers attending constituency meetings, consistency of message across meetings, visit other hospitals to see good practice, review the Annual members Report – we said, they did...
- Better identify individual Governor's skills and allocate responsibilities accordingly
- More "clinical" subjects like Caring For You at constituency meetings to contribute to improving wellbeing of members
- Use meetings to recruit friends and family members
- Use the individual skills of Governors more
- Improve the public narrative – more of a story approach

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ASSURANCE

- “Grill” a NED as part of CoG meeting/more formal interactions with NED’s
- NED’s more frequent at WG meetings
- NED walkabouts with Governors
- Governor hospital visits – interface with external governors
- Regular questions to Board/NED’s to contribute to assurance
- Governors “sharing” forum e.g. blog/WhatsApp group
- Add financial measures to Governor dashboard

EXTERNAL ENGAGEMENT

- STP and NED assurance in the process
- Governors engagement with Councils, CCG’s and STP and the wider health community

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