

Bundle Council of Governors (public) 30 October 2023

Agenda attachments

00 A – front cover public

00 B – membership

00 C – register October 2023

00 D – Agenda Public October 2023 FINAL

54.23 16:00 – Welcome, apologies, declarations of interest and eligibility, confirmation of quoracy
Jackie Smith, Trust Chair

55.23 16:03 – Draft minutes of the public meeting held on 17 July 2023
Jackie Smith, Trust Chair

55–23 Minutes– PUBLIC CoG– 17 July 2023 DRAFT V2

56.23 16:05 – Matters arising and actions pending from previous meetings
Jackie Smith, Trust Chair

56–23 PUBLIC Matters arising October 2023

57.23 16:05 – Update from Trust Chair
Jackie Smith, Trust Chair

58.23 16:10 – Update from chief executive officer
James Lowell, chief executive officer

59.23 16:15 – Strategy update
James Lowell, chief executive officer
Abigail Jago, director of strategy and partnerships

60.23 16:25 – Constitutional variation– continuity of QVH Chair service
Clare Pirie, director of communication and corporate affairs
60–23 Constitutional variation

61.23 16:30 – Deputy lead governor role
Clare Pirie, director of communication and corporate affairs

61–23 Deputy lead governor role

61–23.1 Appendix one– deputy lead governor role description 2023 DRAFT V1

62.23 16:35 – Appointment of external auditor
Paul Dillon–Robinson, audit committee Chair
Maria Wheeler, chief finance officer

63.23 16:40 – QVH financial position
Maria Wheeler, chief finance officer

63–23.1 Governors – QVH Financial Position version 0.1

63–23 QVH financial position

64.23 16:50 – Update from governor working group on public engagement
Louise Thompson, public governor and working group Chair

65.23 16:55 – Quality and safety committee
Karen Norman, committee Chair

65–23 Q&S assurance report

66.23 17:05 – Audit and risk committee
Paul Dillon–Robinson, committee Chair

66–23 Audit committee assurance report Final

67.23 17:15 – Strategic development committee
Jackie Smith, committee Chair

67–23 SD committee assurance report

68.23 17:25 – Finance and performance committee
Paul Dillon–Robinson, senior independent director

68–23 F&P assurance report

69.23 17:35 – Any other questions for non-executive directors
All members of Council of Governors

70.23 17:50 – Any other business
By application to the Chair

We welcome relevant, written questions on any agenda item from our staff, our members or the public. To ensure that we can give a considered and comprehensive response, written questions must be submitted in advance of the meeting (at least three clear working days). Please forward questions to Leonora.may1@nhs.net clearly marked "Questions for the Council of Governors". Members of the public may not take part in the Council of Governors discussion. Where appropriate, the response to written questions will be published with the minutes of the meeting.

Council of Governors Meeting in public

Monday 30 October 2023

**16.00-18.00
Education Centre, QVH**



Queen Victoria Hospital NHS Foundation Trust Council of Governors

Membership October 2023

Members	
Jackie Smith	Trust Chair
Chris Barham	Public governor
Jo Davis	Staff governor
Niamh Gavin	Staff governor
Janet Hall	Public governor
Oliver Harley	Public governor
Julie Holden	Stakeholder governor for EG Town Council
Denise Holland	Public governor
Bob Lanzer	Stakeholder governor for WS County Council
Chris Parrish	Staff governor
Julia Searle	Public governor
Ken Sim	Public governor
Linda Skinner	Stakeholder governor for League of Friends
Roger Smith	Public governor
Jonathan Squire	Public governor
Margo Taskiran	Public governor
Louise Thompson	Public governor
Invited attendees	
Paul Dillon-Robinson	Senior independent director
Karen Norman	Non-executive director
Peter O'Donnell	Non-executive director
Shaun O'Leary	Non-executive director
Russell Hobby	Non-executive director
James Lowell	Chief executive officer
Abigail Jago	Director of strategy and partnerships
Maria Wheeler	Chief finance officer
Nicky Reeves	Chief nurse
Tania Cubison	Medical director
Rob Stevens	Interim chief people officer
Clare Pirie	Director of communications and corporate affairs
Leonora May	Deputy company secretary (minutes)

Annual declarations by governors 2023/24

As established by section 22 of the Trust's Constitution, if a governor of the Trust has a relevant and material interest, or a pecuniary, personal or family interest, whether that interest is actual or potential and whether that interest is direct or indirect, in any proposed contract or other matter which is under consideration or is to be considered by the Council of Governors, the governor shall disclose the nature and extent of that interest to the members of the Council of Governors as soon as he/she becomes aware of it.

To facilitate this duty, governors are asked on appointment to the Trust and thereafter at the beginning of each financial year, to complete a form to declare any interests or to confirm that the governor has no interests to declare (a 'nil return'). Governors must request to update any declaration if circumstances change materially. By completing and signing the declaration form governors confirm their awareness of any facts or circumstances which conflict or may conflict with the interests of QVH NHS Foundation Trust. All declarations of interest and nil returns are kept on file by the Trust and recorded in the following register of interests which is maintained by the Company Secretary.

	Directorships, including non-executive directorships, held in private companies or public limited companies (with the exception of dormant companies).	Ownership, part ownership or directorship of private companies, businesses or consultancies likely or possibly seeking to do business with the NHS or QVH.	Significant or controlling share in organisations likely or possibly seeking to do business with the NHS or QVH.	A position of authority in a charity or voluntary organisation in the field of health or social care.	Any connection with a voluntary or other organisation contracting for NHS or QVH services or commissioning NHS or QVH services.	Any connection with an organisation, entity or company considering entering into or having entered into a financial arrangement with QVH, including but not limited to lenders of banks.	Any "family interest": an interest of a close family member which, if it were the interest of that director, would be a personal or pecuniary interest.
Public governors							
Barham, Chris	Transcend Talent consultancy Limited- Non Executive Director	NIL	NIL	NIL	NIL	NIL	NIL
Hall, Janet	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Harley, Oliver							
Holland, Denise	Director and secretary of Temple West Management Limited Director of Ashdown Place Drive Limited	NIL	NIL	NIL	NIL	NIL	NIL
Searle, Julia	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Sim, Ken	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Smith, Roger	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Squire, Jonathan	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Taskiran, Margo	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Thompson, Louise	CEO of Myfolks Limited CEO of Louise Thompson Mediation & Commerce Limited	I am the CEO and founder of Myfolks Limited. It is a digital, subscription based platform that introduces those needing extra support to those who can provide it. Since I applied to become a governor, I am exploring a trial in the north east to use this service to support elderly people as they are discharged from hospital. I have had and will have no dealings with QVH in this regard	NIL	NIL	NIL	NIL	My husband is a senior manager in Vodafone. I have no visibility of any arrangements the QVH may have with Vodafone

Directorships, including non-executive directorships, held in private companies or public limited companies (with the exception of dormant companies).	Ownership, part ownership or directorship of private companies, businesses or consultancies likely or possibly seeking to do business with the NHS or QVH.	Significant or controlling share in organisations likely or possibly seeking to do business with the NHS or QVH.	A position of authority in a charity or voluntary organisation in the field of health or social care.	Any connection with a voluntary or other organisation contracting for NHS or QVH services or commissioning NHS or QVH services.	Any connection with an organisation, entity or company considering entering into or having entered into a financial arrangement with QVH, including but not limited to lenders of banks.	Any "family interest": an interest of a close family member which, if it were the interest of that director, would be a personal or pecuniary interest.
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Staff governors							
Davis, Jo	.NIL	NIL	NIL	NIL.	NIL	NIL	NIL
Gavin, Niamh	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Parrish, Chris	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Appointed governors							
Holden, Julie	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Lanzer, Bob	Director of Southeast Communities Rail Partnership CIC (Communities Interest Company)	NIL	NIL	NIL	Member of West Sussex County Council and Cabinet Member for Public Health and Wellbeing Member of the Sussex Health and Care Assembly	NIL	NIL
Skinner, Linda	NIL	NIL	NIL	NIL	NIL	NIL	NIL

Fit and proper persons declaration

As established by regulation 5 of the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 ("the regulations"), QVH has a duty not to appoint a person or allow a person to continue to be a governor of the trust under given circumstances known as the "fit and proper person test". By completing and signing an annual declaration form, QVH governors confirm their awareness of any facts or circumstances which prevent them from holding office as a governors of QVH NHS Foundation Trust.

Categories of person prevented from holding office							
	The person is an undischarged bankrupt or a person whose estate has had a sequestration awarded in respect of it and who has not been discharged.	The person is the subject of a bankruptcy restrictions order or an interim bankruptcy restrictions order or an order to like effect made in Scotland or Northern Ireland.	The person is a person to whom a moratorium period under a debt relief order applies under Part VIIA (debt relief orders) of the Insolvency Act 1986(40).	The person has made a composition or arrangement with, or granted a trust deed for, creditors and not been discharged in respect of it.	The person is included in the children's barred list or the adults' barred list maintained under section 2 of the Safeguarding Vulnerable Groups Act 2006, or in any corresponding list maintained under an equivalent enactment in force in Scotland or Northern Ireland.	The person is prohibited from holding the relevant office or position, or in the case of an individual from carrying on the regulated activity, by or under any enactment.	The person has been responsible for, been privy to, contributed to, or facilitated any serious misconduct or mismanagement (whether unlawful or not) in the course of carrying on a regulated activity, or discharging any functions relating to any office or employment with a service provider.
Public governors							
Barham, Chris	NA	NA	NA	NA	NA	NA	NA
Hall, Janet	NA	NA	NA	NA	NA	NA	NA
Harley, Oliver	NA	NA	NA	NA	NA	NA	NA
Holland, Denise	NA	NA	NA	NA	NA	NA	NA
Searle, Julia	NA	NA	NA	NA	NA	NA	NA
Sim, Ken	NA	NA	NA	NA	NA	NA	NA
Smith, Roger	NA	NA	NA	NA	NA	NA	NA
Squire, Jonathan	NA	NA	NA	NA	NA	NA	NA
Taskiran, Margo	NA	NA	NA	NA	NA	NA	NA
Thompson, Louise	NA	NA	NA	NA	NA	NA	NA
Staff governors							
Davis, Jo	NA	NA	NA	NA	NA	NA	NA
Gavin, Niamh	NA	NA	NA	NA	NA	NA	NA
Parrish, Chris	NA	NA	NA	NA	NA	NA	NA
Appointed governors							
Holden, Julie	NA	NA	NA	NA	NA	NA	NA
Lanzer, Bob	NA	NA	NA	NA	NA	NA	NA
Skinner, Linda	NA	NA	NA	NA	NA	NA	NA

Meeting of the QVH Council of Governors
Monday 30 October 2023
16.00-18.00

Agenda: meeting session held in public		
Standing items		
Ref	Item	purpose
54-23	Welcome, apologies, declarations of interest and eligibility, confirmation of quoracy <i>Jackie Smith, Trust Chair</i>	-
55-23	Draft minutes of the public meeting held on 17 July 2023 <i>Jackie Smith, Trust Chair</i>	Approval
56-23	Matters arising and actions pending from previous meetings <i>Jackie Smith, Trust Chair</i>	Review
Council business		
57-23	Update from Trust Chair <i>Jackie Smith, Trust Chair</i>	Information
58-23	Update from chief executive officer <i>James Lowell, chief executive officer</i>	Information
59-23	Strategy update <i>James Lowell, chief executive officer</i> <i>Abigail Jago, director of strategy and partnerships</i>	Information
60-23	Constitutional variation- continuity of QVH Chair service <i>Clare Pirie, director of communication and corporate affairs</i>	Approval
61-23	Deputy lead governor role <i>Clare Pirie, director of communication and corporate affairs</i>	Approval
62-23	Appointment of external auditor <i>Paul Dillon-Robinson, audit committee Chair</i> <i>Maria Wheeler, chief finance officer</i>	Approval
Know your Trust		
63-23	QVH financial position <i>Maria Wheeler, chief finance officer</i>	Information
Representing the interests of the members and members of public		
64-23	Update from governor working group on public engagement <i>Louise Thompson, public governor and working group Chair</i>	Information
Holding non-executive directors to account for the performance of the board of directors		

65-23	Quality and safety committee <i>Karen Norman, committee Chair</i>	<i>Information</i>
66-23	Audit and risk committee <i>Paul Dillon-Robinson, committee Chair</i>	<i>Information</i>
67-23	Strategic development committee <i>Jackie Smith, committee Chair</i>	<i>Information</i>
68-23	Finance and performance committee <i>Paul Dillon-Robinson, senior independent director</i>	<i>Information</i>
69-23	Any other questions for non-executive directors <i>All members of Council of Governors</i>	<i>Discussion</i>
Meeting closure		
70-23	Any other business <i>By application to the Chair</i>	<i>Discussion</i>
Questions		
71-23	<p>To receive any questions or comments from members of the foundation trust or members of the public</p> <p><i>We welcome relevant, written questions on any agenda item from our staff, our members or the public. To ensure that we can give a considered and comprehensive response, written questions must be submitted in advance of the meeting (at least three clear working days). Please forward questions to Leonora.may1@nhs.net clearly marked "Questions for the Council of Governors". Members of the public may not take part in the Council of Governors discussion. Where appropriate, the response to written questions will be published with the minutes of the meeting.</i></p>	<i>Discussion</i>
Date of next meeting		
Next meeting of the council of governors to be held in public		
29 January 2024		

Quoracy

Any meeting of the Council of Governors requires a quorum of at least half of the total number of Governors to be present, with a majority of those present being Public Governors. No business shall be carried out at a meeting which is not quorate.

Document:	Minutes DRAFT & UNCONFIRMED		
Meeting:	Council of Governors session in public 14.00-16.00 17 July 2023 Education Centre, QVH		
Present:	Paul Dillon-Robinson (PDR)	Non-executive director (meeting Chair)	
	Chris Barham (CB)	Public governor (lead governor)	
	Janet Hall (JH)	Public governor	
	Denise Holland (DH)	Public governor	
	Julia Searle (JS)	Public governor	
	Ken Sim (KS)	Public governor	
	Roger Smith (RS)	Public governor	
	Jonathan Squire (JSQ)	Public governor	
	Margo Taskiran (MT)	Public governor	
	Louise Thompson (LT)	Public governor	
	Linda Skinner (LS)	Stakeholder governor LoF	
	Jo Davis (JD)	Staff governor	
	Niamh Gavin (NG)	Staff governor	
	Chris Parrish (CP)	Staff governor	
In attendance:	Leonora May (LM)	Deputy company secretary (minutes)	
	Peter O'Donnell (POD)	Senior independent director	
	Shaun O'Leary (SOL)	Non-executive director	
	Russell Hobby (RH)	Non-executive director	
	Karen Norman (KN)	Non-executive director	
	Kevin Gould (KG)	Non-executive director	
	Abigail Jago (AJ)	Director of strategy and partnerships and acting CEO	
	Maria Wheeler (MW)	Chief finance officer	
	Nicky Reeves (NR)	Chief nurse	
	Tania Cubison (TC)	Medical director	
	Shane Morrison-McCabe (SMM)	Director of operations	
	Rob Stevens (RS)	Interim chief people officer	
	Apologies:	Jackie Smith (JS)	Trust Chair
		Bob Lanzer (BL)	Stakeholder governor WSCC
Did not attend:	Oliver Harley (OH)	Public governor (excluded)	
	Julie Holden (JWH)	Stakeholder governor for EGTC	
Members of the public:	Two members of staff		
Ref.	Item		
Standing items			
25-23	Welcome, apologies and declarations of interest and eligibility The Chair opened the meeting and welcomed all present, including governors and non-executive directors who joined the Trust on 1 July 2023 and MW and RS to their first Council meeting. He acknowledged that this would be KG's last Council meeting as a non-executive director for the Trust as his second and final term comes to an end at the end of August 2023. The Chair reminded all present that the meeting was a meeting in public and not a public meeting, therefore members of public were invited to observe the meeting but not participate in discussions. Apologies were received from JS and BL and the meeting was declared as being quorate. There were no declarations of interest other than those already recorded on the register of interests.		
26-23	Draft minutes of the public meeting held on 17 April 2023 Council agreed that the minutes of the public meeting held on 17 April 2023 were a true and accurate record of that meeting and approved them on that basis.		

	LT challenged the diversity amongst the non-executive directors, particularly in relation to recent appointments. In response, PDR confirmed that candidates that were shortlisted and considered for the roles were diverse, and that the three candidates recommended for appointment were recommended because of the skills and experience that they bring to the role. LT reiterated the view that there is a lack of diversity amongst the non-executive directors and that the process should be improved to ensure diversity in future.
27-23	Matters arising and actions pending from previous meetings <u>70-22 (Federation of Specialist Hospitals (FSH))</u> AJ reported that the Trust has reinstated its membership with the FSH, and that it will be helpful to support the development of the Trust strategy. The action will be marked as completed.
Council business	
28-23	Update from Trust Chair PDR provided the verbal update in the absence of the Trust Chair. He reported that: <ul style="list-style-type: none"> - Board recruitment is progressing; three new non-executive directors, a chief executive, chief finance officer and interim chief people officer have been appointed. Interviews for a substantive chief people officer are being held at the end of July - At its meeting on 6 July 2023, the Board approved the establishment of the strategic development committee as a sub-committee of the Board. This committee will provide strategic oversight and direction regarding the planning and development of the Trust wide organisational strategy. The digital committee will report into the strategic development committee - The Board are working to address the recommendations within the recent well-led review. An action plan is being developed and progress will be reported to the Board through the strategic development committee - Governor working groups aligned to the Board sub-committees will be established from late autumn as a mechanism for governors to hold the non-executive directors to account and seek assurance. There are no plans to establish an audit committee working group - Board sub-committee membership arrangements are being reviewed Council noted the updates.
29-23	Update from acting chief executive officer AJ provided the following verbal update: <ul style="list-style-type: none"> - She gave an update on strike action which is becoming regular, thanking staff who are involved in planning and ensuring mitigations are in place and that services are safely maintained - In response to a question, AJ confirmed that there is an operational and financial impact of strike action which is being assessed after each strike. She described the impact as not insignificant - The executive team remain focussed on delivering the 2023/24 operational plan - The Trust has recently held a celebration for the 75th birthday of the NHS, and its annual staff awards, both events were well received by staff Council noted the updates.
30-23	Trust Chair and non-executive director appraisal process KS presented the report to Council who noted the contents.
31-23	Composition of the Board LM presented the report to Council which had been requested to provide assurance that the changes to the makeup of the Board are in line with the Trust's constitution. She confirmed that the constitution states that the number of non-executive director should always be greater than the number of executives, and that the increase in the number of non-executive directors is in line with that requirement. Council ratified the change to the number of non-executive directors, and noted that this is in line with the Constitution.
Representing the interests of the members and members of public	

32-23	<p>Assessment of the auditor's work and fees 2022/23 KG presented the report to Council, reporting that there were some challenges with completing the audit which is not unusual, and that the annual report and accounts 2022/23 were filed by the deadline.</p> <p>Council noted the update.</p>
33-23	<p>FT membership strategy review LM presented the report to Council who noted the contents.</p>
Holding the non-executive directors to account for the performance of the Board of Directors	
34-23	<p>Finance and performance committee PDR presented the reports from the meetings held on 24 April and 26 June 2023, highlighting that:</p> <ul style="list-style-type: none"> - Capital expenditure for 2023/24 is a challenge, and work to prioritise accordingly is ongoing - The committee is focussed on seeking assurance regarding improvements in theatre utilisation and activity, staff appraisals and statutory and mandatory training <p>Council considered and discussed the contents of the report as follows:</p> <ul style="list-style-type: none"> - A governor asked what impact strike action will have on finances. In response, MW confirmed that the impact of recent strike action had been c. £400k for each strike, and that this is not unique to QVH. This remains one of the Trust's biggest financial risks and it is being monitored - A governor sought clarity regarding the Trust's financial position and asked about the likelihood that the Trust will break even at the end of the financial year. In response, PDR confirmed that the risk to the Trust's financial position is moderate, and that there is a reasonable degree of confidence that the Trust will break even for 2023/24, although the executive team continues to seek opportunities to improve efficiencies and ensure good value. PDR thought that it will become increasingly difficult for Trusts and systems to break even in the future. POD added that capital prioritisation is a challenge with spend required on infrastructure, for example, and limited capital resources available - A governor asked what procedures are in place to ensure that staffing levels are safe during strike action. TC gave an example, explaining that during the junior doctors' strike, all elective activity was cancelled, with consultants covering for junior doctors where possible making clear that one person could not undertake two roles at the same time. A safe level of care was maintained for emergencies. Some members of staff were asked to come in on their days off. The consultant strike was more challenging because more junior members of clinical staff are not able to act up - A governor asked how patients whose care is being delayed due to strike action are being communicated with. SMM confirmed that the Trust are proactively contacting patients whose appointments will be rescheduled and this approach is set out on the Trust's social media platforms. CP, in his capacity as patient experience manager, confirmed that generally these messages are being received - Governors requested that abbreviations such as 'WDES' and 'WRES' are not used in reports unless they are defined <p>Council noted the finance and performance committee update.</p>
35-23	<p>Digital committee KG presented the reports from the meetings held on 13 March, 17 April and 19 June 2023, highlighting that the electronic patient record (EPR) system is not progressing as quickly as planned due to factors outside of the Trust's control, such as funding and supply and demand challenges. He confirmed that although there will be some interoperability, there will not be one single EPR system across the country.</p> <p>Council agreed that it will be important for the Board to ensure that best value for money is achieved for the EPR system, given the high costs involved. Council noted that quotations had been sought and are being worked through to identify an affordable solution.</p> <p>JS suggested that the Trust explores what interoperable system the police force are using and ascertain whether it is a viable option for the Trust. KG explained that the main purpose of the system will be to minimise the use of paper records at the Trust, not interoperability between organisations.</p>

	<p>Council noted that the digital committee continues to closely monitor progress of digital projects, including risks, opportunities and ensuring alignment with the digital strategy and wider Trust strategy development.</p> <p>Council noted the digital committee update.</p>
36-23	<p>Quality and governance committee</p> <p>KN presented the reports from the meetings held on 27 February, 30 March, 17 April 15 May and 26 June 2023. She highlighted that the committee held its annual reports meeting in May. The committee had generally taken good assurance from the information within the annual reports. Waiting lists remain an area of focus for the committee, ensuring that long waiters are not coming to harm. Harm reviews are undertaken for these patients who are then prioritised accordingly.</p> <p>Council noted the quality and governance committee update.</p>
37-23	<p>Audit committee</p> <p>KG presented the reports from the meetings held on 15 March and 15 June 2023, reporting that the committee had approved the annual report and accounts 2022/23 and that it has now been submitted to the regulator and to parliament. The committee will sign off its annual internal audit plan during July; this has been delayed to ensure alignment with the Trust strategy development and ongoing governance and risk priorities.</p> <p>Council noted the audit committee update.</p>
38-23	<p>Any other questions for non-executive directors</p> <p>Governors were offered the opportunity to ask any other questions to non-executive directors as part of their role in holding the non-executive directors to account for the performance of the Board.</p> <p>One governor asked KG if he has any concerns to pass on to the remaining non-executive directors upon completion of his second and final term at the end of August 2023. KG explained that he has no concerns, but highlighted the importance of the Board determining the Trust's strategy and effective engagement regarding the strategy to ensure support as a priority and the Trust securing its own sustainable future, whilst maintaining focussed on the financial and operating plans and patient safety.</p> <p>A governor referenced the recent patient stories received at the last two public Board meetings where patients had told the Board about a negative patient experience at QVH. He asked what the Board are doing to ensure that these issues are not repeated or experienced by other patients. Another governor highlighted the importance of embedding learning for years to come and ensure sustained improvements. Governors sought assurance regarding processes and patient support groups in place to support patients and ensure that learning is embedded and action taken. Governors suggested EPR as a mechanism to add a note to an individual's file if they had complained or had a negative experience to ensure it does not happen again. The non-executive directors responded as follows:</p> <ul style="list-style-type: none"> - KN confirmed that following the recent patient stories the Board have initiated a review of the complaints process and also requested a detailed review of action undertaken since the stories have been received. These will be reported to the quality and governance committee. She explained that Trust wide governance meetings and consultant networks act as good opportunities to embed learning - PDR explained that the Trust's inpatient survey results have continued to be very good in recent years, and that the issues described by patients in recent Board meetings are unusual. The non-executive directors agreed that patient and staff stories at Board meetings offer helpful insight and opportunities for learning, but that it is important to ensure that the Board receives positive stories too, to ensure that feedback is proportionate - The non-executive directors confirmed that the Trust has a number of patient support groups, and the medical director regularly meets with families of patients who have been linked to a death or serious incident to ensure feedback is sought and learning is taken forward for the future
Meeting closure	
39-23	<p>Any other business</p> <p>PDR stated that this was KGs last Council meeting as a non-executive director at QVH and thanked him for all that he had contributed to the Trust during his six years in post.</p>

	There was no further business and the Chair closed the meeting.
40-23	<p>Trust Chair and non-executive director remuneration for 2023/24</p> <p>KS presented the report to Council which set out the recommendation of the appointments committee that the Trust Chair's remuneration is increased by 5% to £52,500 from 1 July 2023, recognising the considerable time commitment to the role, the size of the Trust and the challenges it faces.</p> <p>The appointments committee recommended that non-executive director remuneration remains at £15k until further national guidance is received.</p> <p>Council:</p> <ul style="list-style-type: none"> - Approved the recommendation that non-executive director remuneration will remain at £15k per annum until further guidance is received - Approved the recommendation that the Trust Chair's remuneration is increased by 5% to £52,000 from 1 July 2023
Questions	
41-23	<p>Questions or comments from members of the foundation trust of members of the public</p> <p>There were none.</p>

Matters arising and actions pending from previous meetings of the Council of Governors - PUBLIC								
ITEM	MEETING Month	REF.	TOPIC	AGREED ACTION	OWNER	DUE	UPDATE	STATUS

Report to: Council of governors
Agenda item: 60-23
Date of meeting: 30 October 2023
Report from: Clare Pirie, director of communication and corporate affairs
Report author: Leonora May, deputy company secretary
Date of report: 19 October 2023
Appendices: None

Constitutional variation- continuity of Trust Chair service

Introduction

This paper seeks approval from Council for a Constitutional variation of S33 of the Trust's Constitution to allow continuity of the Trust Chair's service until the end of her three year term.

Background and proposal

Jackie Smith was appointed as Trust Chair by Council at its meeting on 27 April 2022 for a period of three years from 11 July 2022.

The Trust's Constitution states that: 'A person may be appointed as a Non-Executive Director only if he/she... is a member of the Public Constituency' (S33). Public Constituency is defined as 'An individual who lives in the area specified in Annex 1 as the area for Public Constituency may become or continue as a Member of the Foundation Trust'. The following electoral wards are specified as the area for public constituency:

Kent County Council
West Sussex County Council
East Sussex County Council
Surrey County Council
Medway Unitary Authority
Brighton and Hove City Council
London Borough of Croydon
London Borough of Kingston
London Borough of Merton
London Borough of Richmond
London Borough of Sutton
London Borough of Bexley
London Borough of Bromley
London Borough of Greenwich
London Borough of Lambeth
London Borough of Lewisham
London Borough of Southwark
London Borough of Wandsworth

At the time of the appointment, the Trust Chair resided within one of the London borough's listed, and no constitutional variation was required for the appointment. The Trust Chair still has a London address where she stays when on site at QVH, but spends the majority of her time in Derbyshire.

Council are asked to consider and agree that the current Trust Chair is not required to reside in the specified membership geography. This will amount to a Constitutional variation of S33 of the Trust's Constitution which the Board will also need to agree.

This variation would only be for the current Trust Chair and would allow the Trust continuity of Board and Council leadership.

Recommendation

Council is asked to **approve** a constitutional variation of S33 of the Trust's Constitution to allow the current Trust Chair to continue in role.

Report to: Council of governors
Agenda item: 61-23
Date of meeting: 30 October 2023
Report from: Clare Pirie, director of communication and corporate affairs
Report author: Leonora May, deputy company secretary
Date of report: 19 October 2023
Appendices: Appendix one: draft deputy lead governor role description

Deputy lead governor role

Introduction and background

All NHS foundation trusts are required to have a lead governor role in order to facilitate direct communication between the Council of Governors and NHS England in the limited circumstances where it may not be appropriate to communicate through the normal channels, which in most cases will be the Trust Chair or Company Secretary.

At QVH the lead governor is appointed for a tenure of 12 months from 1 July each year, with the option for re-election in accordance with due process, for up to the full tenure period of the governor.

This paper seeks approval from Council to establish a deputy lead governor role to support the lead governor in their duties and deputise when required.

Proposal

It is proposed that a deputy lead governor role is established to support the lead governor in their duties, acting as a sounding board, sharing workload and deputising for the lead governor as required, undertaking any of the responsibilities within the lead governor's role description when the lead governor is unavailable.

The deputy lead governor will be a public governor and the tenure for the role will be the same as for the lead governor role; for 12 months from 1 July each year, with the option for re-election in accordance with due process, for up to the full tenure period of the governor. The deputy lead governor will have served one year in post to be appointable to the role. For this election, it is proposed that this requirement is waived due to the majority of public governors being appointed from July 2023. The Trust Secretary will administer an annual nomination and election/ re-election procedure.

It is proposed that a deputy lead governor is appointed from mid-November until 30 June 2024, following a nomination and election process which will then take place annually at the same time as the lead governor nomination and election process.

The draft deputy lead governor role description is appended to this report as appendix one.

The establishment of the deputy lead governor role is not a statutory requirement although many other trusts have a deputy lead governor. The establishment of this role does not require any update to the Trust's Constitution.

Recommendation

Council is asked to **approve** the establishment of the deputy lead governor role, the deputy lead governor role description and the process to elect a deputy lead governor.

Queen Victoria Hospital NHS FT deputy Lead Governor Role Description

Role Description

Accountability:

The deputy lead governor is accountable to the Council of Governors as a serving member of the Council.

The Role:

- Deputise for the lead governor as required, undertaking any of the responsibilities within the lead governor's role description as required in their absence
- Work closely with the lead governor, act as a sounding board as appropriate and share workload, taking ownership of particular work streams as agreed with the lead governor
- To represent views of governors and work with the lead governor to facilitate a good working relationship between the governors and Board of Directors
- To take an active role in the activities of the Council of Governors and escalate relevant issues to the lead governor, or Trust Chair and Company Secretary in their absence

Person specification

To fulfil this role effectively, the deputy Lead Governor will need to:

- Be a publicly-elected Governor that has been in post for at least one year
- Have the confidence of governor colleagues, members of the executive management team and the non-executive directors
- Have the ability to forge constructive working relationships with colleagues
- Understand the guidance and the basis upon which NHS England may take regulatory action
- Be committed to the success of the Trust and understand the Trust's Constitution
- Have the ability to influence and negotiate
- Be able to present a well-reasoned, unbiased argument
- Demonstrate ability to maintain confidentiality of information.

Deputy Lead Governor RD

The Appointment:

The tenure is for 12 months from 01 July each year, with the option for re-election in accordance with due process, for up to the full tenure period of the governor.

In accordance with a process agreed by the Council of Governors, the Secretary will administer an annual nomination and election/re-election procedure that will require:

- Submission of an expression of interest (for re-election and for new election candidates).
- Submission of a statement for support of no more than 250 words supporting candidature (only for NEW nominations and/or contested elections);
- Election by ballot of governors; individual voting choices will remain confidential.

QVH Financial Position 2023/2024

Council Of Governors meeting 30 October 2023

Presented by Maria Wheeler Chief Finance Officer



Introduction

Historic Financial Position

QVH moved from a financially stable position in 2017/18 to a position with a significant financial deficit by 2019/20, was declared unsustainable, but has returned to a stable and sustainable financial position in 2023/24.

Why did we have a deficit in 2019/20

- From a surplus £3m in 2017/18, the Trust's financial position deteriorated over two years recording a deficit of £9m in 2019/20.
- This was caused by investment in excess of income received and some changes to commissioned activity over the same period. The adverse position was also partly resulting from a failure to achieve efficiencies during this period and in subsequent years. The high level breakdown of this is as follows
 - Staffing c£3.7m
 - Non Delivery of efficiencies - £3.5m
 - Activity changes - £2.1m

What happened thenWhy did the financial position recover

- The COVID funding regime was introduced for 2020/21 which covered the costs of running services to allow Trusts to focus on the Covid Challenge. This meant all the Trust's costs were covered including the c£9m deficit.
- The same financial envelope was rolled forward into 2021/22 and then again in 2022/23. The later year saw the return to formal contracting, but income remained under a block arrangement.
- In 2023/24 saw a partial return to payment by results funding regime for elective activity only. However this was based on 2019/20 tariff priced activity only, all other income has remained on a block basis. This included the funding cover for the £9m deficit of 2019/20



Historical Financial Position – How we got here

I&E Account	Actual 2017/18	Actual 2018/19	Actual 2019/20	Actual 2020/21	Actual 2021/22	Actual 2022/23	Plan 2023/24
	£m	£m	£m	£m	£m	£m	£m
Income	70,409	70,741	71,102	83,054	84,789	95,880	95,933
Expenditure	-67,409	-75,674	-80,275	-80,037	-82,871	-95,880	-95,933
(Surplus)/Deficit	3,000	-4,934	-9,173	3,017	1,918	-0	0
Plan	1	2	-7,445	-0	1	0	0

Expenditure in excess of available Income leads to deficit.

NHSE provides additional income of approx. £9m during the pandemic to write off the deficit. The additional funds were classified as non-recurrent i.e are not part of the financial baseline and there was a higher level of risk that these funds may not be available in future years.

Recurrent Funding now includes the additional £9m funding in the overall allocation of funds from Sussex and Other ICBs. Risk of cessation of this funding is largely removed.



2023/24 Financial Position (Plan)

Statement of comprehensive income	Plan
	31/03/2024
	£'000
Operating income from patient care activities	93,074
Other operating income	2,859
	<u>95,933</u>
Employee expenses	(60,500)
Operating expenses excluding employee expenses	(33,957)
	<u>(94,457)</u>
OPERATING SURPLUS/(DEFICIT)	<u>1,476</u>
FINANCE COSTS	
Finance income	7
Finance expense	(102)
PDC dividends payable/refundable	(1,658)
NET FINANCE COSTS	<u>(1,753)</u>
SURPLUS/(DEFICIT) FOR THE PERIOD/YEAR	<u>(277)</u>
Adjusted financial performance	
Remove capital donations/grants/peppercorn lease I&E impact	277
Adjusted financial performance surplus/(deficit)	<u>0</u>

National Planning assumptions have been applied where appropriate

Income

- Tariff uplift (net of efficiency and convergence) of 1.1%
- COVID Support reduced by 65%
- ERF value based on 22/23 values
- ERF included for all commissioners
- CDC Funding included
- Increased respiratory devices £0.5m assumed funded by ICB
- No Growth included

Expenditure

- Inflation as per National Guidance 2.9% net
- Incremental Drift £0.3m
- Identified CIPS £3.5m
- Unidentified CIPs of £2.1m
- Costs to deliver 109% of 19/20 activity including McIndoe centre activity £2.8m
- CDC Expenditure £2.6m

Risks

- Unidentified CIP £2.1m represents a significant risk to achieving financial balance in 23/24.
- Excess Inflation (e.g Energy costs) may increase above planned levels - will need to increase CIP
- Failure to meet the ERF target will result in a reduction in Income and a deterioration of the Trust financial position.



2023/24 Month 5 (August) Financial Position

Financial Metric	Period	Result Month 5
Income and Expenditure	YTD	Breakeven
	Year End Forecast	Breakeven
Cash at Bank	YTD	£10.1m
Capital spend	Plan YTD	£4.12m
	Actual YTD	£1.47m
BPPC (Combined NHS & Non NHS)	YTD Volume (%)	95.7%
	YTD Value (%)	94.6%
Efficiencies	Plan YTD	£2.27m
	Actual YTD	£2.27m
	Year End Forecast	£5.5m (5.5%)

Breakeven on Income and Expenditure is GOOD NEWS

The Trust has Cash in the Bank to pay wages and goods and services

The Capital Expenditure programme (Money spent on the Buildings, Medical Equipment and IT) will be fully spent by the end of the financial year.

The Trust is delivering 5.5% efficiency improvement this year



2023/24 Capital Programme

Capital Spend

- Estates Maintenance
- Medical Equipment
- IT
- Electronic Patient Record Project (National Funding)
- Community Diagnostic Centre (CDC) (National Funding)

Report to: Council of governors
Agenda item: 63-23
Date of meeting: 30 October 2023
Report from: Maria Wheeler, chief finance officer
Report author: Jeremy Satchwell, interim deputy chief finance officer
Date of report: October 2023
Appendices: Appendix one: QVH financial position 2023/24

QVH financial position

Introduction and background

The purpose of this report is to present an overview of the historic and current financial position of the Trust in 2023/24.

QVH moved from a financially stable position in 2017/18 to a position with a significant financial deficit by 2019/20, was declared unsustainable, but has returned to a stable and sustainable financial position in 2023/24.

The Trust is planning to achieve a breakeven position on income and expenditure at the close of the financial year, has cash in the bank and is planning to fully spend the agreed capital programme.

Recommendation

Council is asked to **note** the contents of the report.

Report cover-page					
References					
Meeting title:	Board of Directors				
Meeting date:	07/09/2023	Agenda reference:		93-23	
Report title:	Quality and safety assurance				
Sponsor:	Karen Norman, non-executive director and committee Chair				
Author:	Karen Norman, non-executive director and committee Chair Ellie Simpkin, governance officer				
Appendices:	None				
Executive summary					
Purpose of report:	The purpose of the report is to provide assurance on matters considered and discussed by the quality and governance committee at its meeting on 21 August.				
Summary of key issues	<ul style="list-style-type: none"> The committee has reviewed the letter sent by NHS England regarding the verdict in the trial of Lucy Letby, noting actions and further assurance where required The committee received the antimicrobial annual report 2022/23, taking assurance on progress made. Further assurance was sought on poor compliance with antimicrobial prescribing guidelines, noting the impact of staff vacancies Deep dive into patient complaints received, noting lessons learned and further actions required The committee received a verbal update on preparation for Trust's next Care Quality Commission visit, took assurance on progress made and noted risks, where identified 				
Recommendation:	The Board is asked to note the contents of the report, the assurance where given and risks identified.				
Action required	Approval	Information	Discussion	Assurance	Review
Link to key strategic objectives (KSOs):	KSO1:	KSO2:	KSO3:	KSO4:	KSO5:
	<i>Outstanding patient experience</i>	<i>World-class clinical services</i>	<i>Operational excellence</i>	<i>Financial sustainability</i>	<i>Organisational excellence</i>
Implications					
Board assurance framework:	KSO3- outstanding patient experience- quality and supply issues with providers, ongoing workforce challenges KSO2- World class clinical services- restricted facilities to manage more complex patients				
Corporate risk register:	The committee continues to review the patient safety risks.				
Regulation:	Health and Social Care Act 2008 CQC standards of quality and safety				
Legal:	As above				
Resources:	None				
Assurance route					
Previously considered by:	Quality and governance committee				
	Date:	21/08/23	Decision:		
Next steps:					

Report to: Board Directors
Agenda item: 93-23
Date of meeting: 07 September 2023
Report from: Karen Norman, non-executive director and committee Chair
Report author: Karen Norman, non-executive director and committee Chair
Ellie Simpkin, governance officer
Date of report: 23 August 2023
Appendices: None

Quality and governance committee assurance

Introduction

This purpose of this report is to provide the Board with assurance on matters considered by the quality and governance committee at its meeting on 21 August 2023.

Raising concerns

The committee reviewed the letter sent by NHS England regarding the verdict in the trial of Lucy Letby. Noting the work already being undertaken by the Trust in relation to the implementation of the new Patient Safety Incident Response Framework, there is confidence in the mechanisms and processes which are in place for staff to raise concerns. Discussion was had on the need to create a culture in which QVH staff at all levels feel able to raise concerns, even if they are based on 'a feeling'. Staff should not be afraid of their concerns turning out to be unfounded. It is important that feedback is provided to staff who raise concerns to create confidence that they are taken seriously and listened to. The committee recognises its role in seeking assurance in this area on behalf of the Board and will be giving further consideration to the actions which QVH is taking to ensure a culture of openness and accountability.

Patient experience

The Trust received twenty three formal complaints during quarter one 2023/24. The main themes are treatment, perceived delays and staff behaviour. No cases were reopened or referred by the Parliamentary and Health Service Ombudsman (PHSO) for consideration during this period. The Trust has an overall inpatient Friends and Family Test (FFT) recommendation rate of 99%.

The committee considered a deep dive into the patient complaints which had been shared at Board in May and July 2023. The report summarised the learning and improvements to processes identified, acknowledged that there is further work to do on the culture within the organisation and noted the development of the patient engagement strategy. The importance of ensuring that the policy for having 'conversations of concern' with staff is being followed was raised. The committee has asked that relevant policies are reviewed to ensure that the framework for addressing staff behaviour can be applied equally to all clinical and medical staff. Further assurance was sought on the triangulation of information and that processes are being applied consistently.

Antimicrobial annual report 2022/23

The committee received partial assurance that antimicrobial stewardship activities are embedded at QVH. The use of restricted antimicrobials is monitored and national antibiotic shortages have been managed without compromising patient care. There is ongoing work to reduce the total usage of antibiotics and improve clinician engagement with antimicrobial stewardship. The lack of an antimicrobial pharmacist has impacted on the ability to progress these improvements. There is concern that

further audits of compliance with drug chart documentation are not being completed due to a lack of staff resources. Consideration needs to be given to how the antimicrobial steering group can be further supported to progress improvements to compliance with antibiotic prescribing. Further assurance was sought on the provision and monitoring of the microbiology services contract.

Clinical quality and patient safety

There have been no new serious incidents declared. Following investigation, a request to downgrade an incident declared has been agreed and two incidents have been approved and closed by the Integrated Care Board scrutiny committee.

The committee received an update on clinical harm reviews. The 2021 clinical harm reviews are 99.5% complete and 89% of the 2022 patient cohort has now been reviewed with one case identified as severe harm which was investigated and confirmed as unavoidable. 43% of the 2023 cohort (from 1 January to 31 July 2023) have been reviewed with no cases of severe harm identified. The medical director advised that further work with NHS Sussex on the harm review tool is underway to improve its effectiveness.

Care Quality Commission (CQC) preparation

Preparation has commenced with work streams on evidence and information, staff engagement, and awareness and preparedness. The committee will consider how to ensure the Board is prepared ahead of the next CQC visit.

Risk

Recognising that improvements to corporate risk process are ongoing, the committee emphasised the importance of ensuring that risks are regularly reviewed and updated.

Other

- The committee has undertaken its annual effectiveness review and will consider the feedback and action at its seminar in November 2023.
- Positive progress is being made against the Trust's quality priorities for 2023/24.
- All Commissioning for Quality and Innovation (CQUIN) indicators were achieved in quarter one 2023/24.
- The committee received the infection prevention and control report for quarter one 2023/24, noting that no updates have been received on progress made on the risk relating to antimicrobial prescribing.
- The committee is not yet fully assured on the concerns in respect to surgical patients who do not fall under the referral to treatment waiting time targets. Further information on this will be provided to the committee at its next meeting.
- Further assurance on the prosthetic waiting list was also sought.

Recommendation

The Board is asked to **note** the contents and recommendations of the report, the assurance where given and the risks identified.

Report cover-page

References

Meeting title:	Board of Directors		
Meeting date:	07/09/2023	Agenda reference:	86-23
Report title:	Audit committee assurance		
Sponsor:	Kevin Gould, committee Chair		
Author:	Ellie Simpkin, governance officer		
Appendices:	None		

Executive summary

Purpose of report:	To provide assurance to the Board in relation to matters discussed at the Audit committee meeting on 03 August 2023				
Summary of key issues	<ul style="list-style-type: none"> - The committee is satisfied with the overall quality and output of the external audit for 2022/23, despite some last minute challenges - Raising concerns has been added to the 2023/24 internal audit plan during quarter four - The committee would like to see improvement in compliance with tendering processes, reducing the need for single tender waivers and ensuring value for money 				
Recommendation:	The Board is asked to note the contents of this report.				
Action required	Approval	Information	Discussion	Assurance	Review
Link to key strategic objectives (KSOs):	KSO1:	KSO2:	KSO3:	KSO4:	KSO5:
	<i>Outstanding patient experience</i>	<i>World-class clinical services</i>	<i>Operational excellence</i>	<i>Financial sustainability</i>	<i>Organisational excellence</i>

Implications

Board assurance framework:	None
Corporate risk register:	None
Regulation:	None
Legal:	None
Resources:	None

Assurance route

Previously considered by:	Audit committee			
	Date:	03/08/2023	Decision:	
Next steps:	None			

Report to: Board Directors
Agenda item: 86-23
Date of meeting: 7 September 2023
Report from: Kevin Gould, committee Chair
Report author: Ellie Simpkin, governance officer
Date of report: 22 August 2023
Appendices: None

Audit committee assurance

Introduction

This purpose of this report is to provide the Board with assurance on matters considered by the Audit committee at its meeting on 3 August 2023.

Assurance on Board Assurance Framework KSO 1 & 2

The committee received assurance of the governance arrangements and committee architecture which support the delivery of KSO 1 and 2. It noted that further assurance is required in the areas of the planned care waiting list and raising concerns which are being prioritised in the internal audit plan for 2023/24. Discussion was had on the assurance received on the clinical audit processes. The role of the Board sub-committees in overseeing the clinical audit programme needs to be considered as part of the quality improvement and strategy development work which the Trust is currently undertaking.

External audit

The committee is satisfied with the overall quality of output and performance of KPMG as the Trust's external auditor for 2022/23, despite challenges completing the audit which led to submission of the accounts at the last minute. The accounts were submitted on 30 June 2023.

Internal audit

RSM presented an update on the Internal Audit plan. Three reports had been completed since the previous meeting:

- Emergency Planning and Business Planning (Reasonable Assurance, three medium priority actions)
- Financial Assumptions (advisory)
- Data Security and Protection Toolkit (Substantial Assurance)

The committee reviewed the revised Internal Audit plan 2023/24 which was approved with further amendments, including an internal audit on the effectiveness of processes related to raising concerns at QVH which has been scheduled for quarter four of 2023/24.

Counter fraud

The Committee received a report on the progress of Counter Fraud activity and the annual reactive benchmarking report.

Financial reporting

The Committee reviewed financial reports demonstrating compliance with the Trust's standing financial instructions and scheme of delegation and reservation of powers which included details of waivers, contracts over £30k and invoices with no purchase order, and received assurance on the use of the Trust's contracts register. The

committee would like to see improvement with compliance with tendering processes, reducing the need for single tender waivers and ensuring value for money.

Risk

The corporate risk register was reviewed. The committee noted that improvements to the strategic risk management processes are ongoing and raised concern regarding risks not being update in a timely manner.

This was Kevin Gould's last meeting as Audit committee Chair, and the committee thanked him for his valuable contribution. Paul Dillon-Robinson will take over the role of Chair of the committee from 1 September 2023.

Recommendation

The Board is asked to **note** the contents of the report.

Report cover-page					
References					
Meeting title:	Board of Directors				
Meeting date:	07/09/2023	Agenda reference:	85-23		
Report title:	Strategic development committee assurance				
Sponsor:	Jackie Smith, Trust Chair				
Author:	Leonora May, deputy company secretary				
Appendices:	None				
Executive summary					
Purpose of report:	To provide the Board with assurance regarding the development of the Trust strategy and an update on the first meeting of the strategic development committee				
Summary of key issues	<ul style="list-style-type: none"> - Good progress has been made against the first phase of strategy development - Key risks include securing a sustainable future for the Trust and engagement with stakeholders - An engagement plan is in place and to date 109 engagement sessions have been completed 				
Recommendation:	The Board is asked to note the contents of the report				
Action required	Approval	Information	Discussion	Assurance	Review
Link to key strategic objectives (KSOs):	KSO1: <i>Outstanding patient experience</i>	KSO2: <i>World-class clinical services</i>	KSO3: <i>Operational excellence</i>	KSO4: <i>Financial sustainability</i>	KSO5: <i>Organisational excellence</i>
Implications					
Board assurance framework:	NA				
Corporate risk register:	The committee reviewed the strategy development risks, issues and opportunities, noting delivering a sustainable future for the organisation and engagement with system and regional stakeholders as the key risks. The committee will continue to monitor controls and mitigations in place to address these risks				
Regulation:	Well led review				
Legal:	NA				
Resources:	NA				
Assurance route					
Previously considered by:	NA				
	Date:		Decision:		
Next steps:	NA				

Report to: Board Directors
Agenda item: 85-23
Date of meeting: 7 September 2023
Report from: Jackie Smith, Trust Chair
Report author: Leonora May, deputy company secretary
Date of report: 18 August 2023
Appendices: None

Strategic development committee assurance

Introduction

The strategic development committee was established by the Board to provide assurance regarding Trust strategy development and implementation as recommended in the Trust's recent well-led review. The committee held its first meeting on 19 July 2023.

Trust strategy development

The committee received an update on Trust strategy development. Good progress has been made against the first phase and plans are broadly on track. The committee supported the proposed financial model and recognised it as being an important tool for decision making going forward. The committee recognised a need to maintain pace to keep on track in the second phase given the amount of work involved.

An engagement plan related to the development of the Trust strategy is in place and feedback from engagement activities to date is positive, with recognition that this may become more challenging in the next phase as the Trust develops proposals for change. To date, 109 engagement sessions have taken place with approximately 450 stakeholders. The committee agreed that transparency regarding the financial position will remain an important part of engagement.

A stakeholder engagement assurance group has been established to oversee engagement activities with key stakeholders. Members include two governors.

A clear timeline for the development and implementation of enabling strategies is being developed and will be presented to the committee at a future meeting for review.

Other

- The committee reviewed the strategy development risks, issues and opportunities, noting delivering a sustainable future for the organisation and engagement with system and regional stakeholders as the key risks. The committee will continue to monitor controls and mitigations in place to address these risks
- The well led review recommendations and action plan will become a standing agenda item for monitoring by the committee

The next meeting of the committee will be held on 27 September 2023, and I will provide a further committee assurance report for the Board at its meeting on 2 November 2023.

Recommendation

The Board is asked to **note** the contents of the report.

Report cover-page					
References					
Meeting title:	Board of Directors				
Meeting date:	07/09/2023	Agenda reference:	90-23		
Report title:	Financial, operational and workforce performance assurance				
Sponsor:	Paul Dillon-Robinson, Non-executive director, Chair of Finance & Performance Committee				
Author:	Paul Dillon-Robinson, Non-executive director, Chair of Finance & Performance Committee)				
Appendices:	None				
Executive summary					
Purpose of report:	Assurance on financial, operational and workforce performance as discussed at the latest Finance & Performance Committee (24 July 2023)				
Summary of key issues	<p>Operational performance: Cancer standard performance reviewed, as well as productivity through theatre utilisation</p> <p>Workforce: Progress on appraisal completion noted and next focus on quality. Actions to address issues from Gender Pay report, WRES and WDES, discussed</p> <p>Finance: Break-even reported year-to-date and forecast, but need to understand the system financial risk</p>				
Recommendation:	The Board is asked to note the matters discussed and seek further clarification.				
Action required	Approval	Information	Discussion	Assurance	Review
Link to key strategic objectives (KSOs):	KSO1:	KSO2:	KSO3:	KSO4:	KSO5:
	<i>Outstanding patient experience</i>	<i>World-class clinical services</i>	Operational excellence	Financial sustainability	Organisational excellence
Implications					
Board assurance framework:	KSO3, KSO4 and KSO5 are relevant to this area. No BAFs were reviewed, given the work being done to revise them				
Corporate risk register:	Corporate risks allocated for oversight by the committee were reported upon and deep dives undertaken on two				
Regulation:	Some KPIs link into the oversight framework of reporting to NHSE and CQC. Issues within Estates have regulatory impacts				
Legal:	No specific legal implications				
Resources:	Resources are fundamental to the delivery of performance				
Assurance route					
Previously considered by:	Finance, operational and workforce reports go through a variety of routes to reach the committee				
	Date:		Decision:		
Next steps:	Review by board				

Report to: Board of Directors
Agenda item: 90-23
Date of meeting: 7 September 2023
Report from: Paul Dillon-Robinson, Non-executive Director and Committee Chair
Report author: Paul Dillon-Robinson, Non-executive Director and Committee Chair
Date of report: 23 August 2023
Appendices: None

Financial, operational and workforce performance assurance report

Introduction

This report covers the matters discussed at the Finance & Performance Committee meeting on Monday 24 July 2023. The committee does not meet during August, but the current Chair and the future Chair will have met with the three lead executives at the end of August and can provide an update at the Board meeting.

Executive summary

Operational performance: The performance against the current cancer standards was noted, as just below target, and the reasons for them (patient choice, complexity of cases, late referrals) explored. The changes to the standards, subsequently announced, were discussed and will be the subject to review in October, whilst recognising the importance of the patients' experience.

Work is underway on validating the overall waiting lists, to ensure that the (currently 17,000+) list is still a complete and accurate record. Funding for this work, which supplements regular validation, has been received from NHS Sussex.

Theatre utilisation remains a focus for the committee, given the need for productivity to meet activity targets. The committee discussed the impact of industrial action and the need to understand the case mix being referred to the McIndoe Centre, to gain a holistic view of performance.

The committee continued to review the performance of the sleep service and the sterile services contract.

Workforce: The committee were provided with assurance that the issue with overdue annual appraisals had now been addressed, subject to a few areas that are being focused on. Work will now continue on the quality of appraisals, and will return to the committee in December.

The increase in agency usage / spend was reviewed and assurance given that we remain below the agency cap and national target, but industrial action (along with vacancies in substantive posts) has been a factor.

The committee reviewed the Gender Pay Gap Report for 2023, as well as an update on Workforce Disability Equality Standard (WDES) and Workforce Race Equality Standard (WRES) actions. Work on the Gender Pay Gap is focussed on understanding the data (for instance on the gap in the median average hourly rate), as well as improving equality at consultant recruitment. The update on the WRES and WDES followed a report from the Hiro Collective from conversations with staff,

and the committee welcomed the priorities that had been identified and the need for actions.

Finance: The Trust continues to report and forecast a break-even position on revenue, being able to absorb the financial impact of industrial action for the moment, although noting the impact operationally and on patient experience.

The capital programme for this year, and the medium term, was discussed noting the key areas were in estates, information management & technology (IM&T) and medical devices, and that a process for prioritisation had to be in place. Assurance was given that high risk areas would be addressed in this year (especially electrical infrastructure).

Assurance was also provided that the Trust remains in line to deliver the level of efficiencies in 2023/24 and that planning for 2024/25 will commence shortly.

The committee also noted the Sussex system's financial position, both year-to-date and year-end forecast, and the risk to the Trust from the shared duty of NHS organisations for the ICS to break-even. It was agreed that this strategic risk needed to be captured and its management discussed.

Risk deep dives: The committee reviewed two risks; compliance with national cleaning specification and the need for an Eye Bank quality manager. It also noted the wider work on corporate risk management and the importance of separating "risks" from "issues".

Policies: A number of policies, within the schedule for review, were reviewed and agreed.

Recommendation

The Board is asked to **NOTE** the matters above and discuss any issues.