

COUNCIL OF GOVERNORS' MEETING

A meeting of the Harrogate and District NHS Foundation Trust Council of Governors will take place on Tuesday 23rd June 2020 (via video conferencing / Dial in facility)

Start: 1.00pm Finish: 2.30pm (Private discussion for Governors and the Board will commence at 2.30pm)

		AGENDA			
Time	Item No.	Item	Lead	Paper No.	
1.00	1.0	Welcome and apologies for absence Welcome to the public, set the context of the meeting and receive any apologies for absence.	Angela Schofield, Chairman	-	
1.00	2.0	Declarations of Interest To declare any interests relevant to the agenda and to receive any changes to the register of interests	Angela Schofield, Chairman	2.0	
1.05	3.0	Minutes of the meeting held on 22 January 2020 To review and approve the minutes	Angela Schofield, Chairman	3.0	
1.10	4.0	Matters arising and review Action Log To receive updates on progress of actions	Angela Schofield, Chairman	4.0	
1.20	5.0	Chairman's written update on key issues To receive the written update for consideration	Angela Schofield, Chairman	5.0	
1.35	6.0	Chief Executive's Strategic and Operational Update, including: Integrated Board Report Covid 19 Update BAME update To receive the update and report for comment	Steve Russell, Chief Executive	6.0	
2.05	7.0	Question and Answer Session for Governors and members of the public To receive and respond to questions from the floor	Clare Cressey, Lead Governor		
2.20	8.0	Any other relevant business not included on the agenda By permission of the Chairman	Angela Schofield, Chairman		
2.25	9.0	Evaluation of meeting	Angela Schofield, Chairman		
2.30	10.0	Close of meeting	Angela Schofield, Chairman		

COUNCIL OF GOVERNORS DECLARATION OF INTERESTS

The following is the current register of the Council of Governors of Harrogate and District NHS Foundation Trust and their declared interests. The register is maintained by the Foundation Trust Office, and holds the original signed declaration forms. These are available for inspection by contacting the office on 01423 554489.

Name	Governor Status	Interests Declared			
Angela Schofield	Chairman	A position of Authority in a charity or voluntary organisation in the field of health and social care	Volunteer with Helping Older People (charity).		
Dr Pamela Bagley	Stakeholder	Other	Dean of the Faculty of Health Studies, University of Bradford. Deliver education for NHS Trust staff		
Ian Barlow	Public elected	Other	Owner of non-profit website 'Harrogate Guide'		
John Batt	Public Elected	Other	Member of the Conservative Party		
Cath Clelland MBE	Public elected	Directorships, including non-executive directorships held in private companies or PLCs (with the exception of those of dormant companies)	Owner/Director - Canny Consultants Ltd Non-Executive Director - York St John University, York		
		Ownership, part-ownership or directorship of private companies, business or consultancies likely or possibly seeking to do business with the NHS	Owner/Director - Canny Consultants Ltd Owner/Director – City Kipping Ltd (dormant)		
		A position of Authority in a charity or voluntary organisation in the field of health and social care	Non-Executive Director - York St John University (Involvement/Link with Mental Health Provision in York)		



Name	Governor Status	Interests Declared			
Robert Cowans	Public elected		NONE		
Clare Cressey	Stakeholder		NONE		
Martin Dennys	Public elected	Other	Employed by NHS Digital, The Health and Social Care Information Centre, an arms length body to the Department of Health and Social Care.		
Tony Doveston	Public elected	A position of Authority in a charity or voluntary organisation in the field of health and social care	Volunteer for Yorkshire Air Ambulance		
Sue Eddleston	Public elected		NONE		
William Fish	Public elected	Directorships, including non-executive directorships held in private companies or PLCs (with the exception of those of dormant companies)	Owner/Director – Manulytica Ltd		
Carolyn Heaney	Stakeholder	A position of Authority in a charity or voluntary organisation in the field of health and social care	None. However, for transparency, I would like to put on record that I am employed by the Association of the British Pharmaceutical Industry (ABPI), which is the trade body for the British pharmaceutical industry. My role as NHS Engagement Policy partner involves representing the interests of the pharmaceutical industry in the context of strategic engagement with Government and related health bodies such as NICE and other ALBs and NHS organisations. ABPI does deliver NHS services and therefore does not contract with NHS organisations.		
Samantha James	Public elected		NONE		
Dr Loveena Kunwar	Staff elected		NONE		
Neil Lauber	Staff elected		NONE		



Name	Governor Status	Interests Declared			
Cllr John Mann	Stakeholder	Position of authority in a local council or Local Authority	Harrogate Borough Council Councillor for Pannal North Yorkshire County Council for Harrogate Central		
Sam Marshall	Staff Governor		NONE		
Doug Masterton	Public elected	Position of authority in a local council or Local Authority	Member of Harewood Parish Council		
Kathy McClune	Staff Governor		NONE		
Cllr Samantha Mearns	Stakeholder	Directorships, including non-executive directorships held in private companies or PLCs (with the exception of those of dormant companies)	Director of RHM Pension Trust Limited		
		Position of authority in a local council or Local Authority	Councillor – Harrogate Borough Council Councillor – Knaresborough Town Council		
		Any connection with a voluntary or other organisation contracting for NHS services or commissioning NHS services	Self-employed consultant to Stockwell Road Surgery, Knaresborough		
Dr Christopher Mitchell	Public elected	V	NONE		
Heather Stuart	Staff elected		NONE		
Dave Stott	Public elected	Other	Patient and Carer Representative at the Royal College of GPs Lay Member at the Academy of Medical Royal Colleges (Involved as a simulated patient in the training and assessment of trainee doctors in the following Medical Schools: Norwich, Leeds, Liverpool, Hull and York)		



Name	Governor Status	Interests Declared			
Steve Treece	Public elected	Any connection with a voluntary or other organisation contracting for NHS services or commissioning NHS services Other	Employee of NHS Digital (until 30/06/2020) Chair of Institute of Risk Management Health and Care Special Interest Group (The IRM is a professional body, providing risk management qualifications, education etc.)		



Paper 3.0



Council of Governors' Meeting

Minutes of the public Council of Governors' meeting held on 22 January 2020 at 17:15 at the Pavilions of Harrogate, Great Yorkshire Showground, Harrogate, HG2 8NZ

Present:	Angela Schofield, Chairman Sarah Armstrong, Non-Executive Director Ian Barlow, Public Governor John Batt, Public Governor Cath Clelland, Public Governor Clare Cressey, Stakeholder Governor Jeremy Cross, Non-Executive Director Martin Dennys, Public Governor Tony Doveston, Public Governor Sue Eddleston, Public Governor William Fish, Public Governor Jill Foster, Chief Nurse Rob Harrison, Chief Operating Officer Samantha James, Public Governor Neil Lauber, Staff Governor Doug Masterton, Public Governor Sam Marshall, Staff Governor Samantha Mearns Stakeholder Governor Laura Robson, Non-Executive Director Steve Russell, Chief Executive Dr David Scullion, Medical Director Richard Stiff, Non-Executive Director Maureen Taylor, Non-Executive Director Steve Treece, Public Governor Dr Pam Bagley, Stakeholder Governor
In attendance	Elaine Culf, Interim Corporate Affairs and Membership Manager Andrew Forsyth, Observer Lynn Hughes, Interim Company Secretary Shirley Silvester, Learning & Development Manager

1. Welcome and apologies for absence

Angela Schofield welcomed members of the Council of Governors and noted the good attendance at this first meeting of the New Year. Angela commented that there were a few new faces at Council, and welcomed two new Governors, William Fish, Public Governor for Harrogate & Surrounding Villages, and Sam Marshall, non-clinical Staff Governor, an IT Team leader. Kathy McClune, our new Staff Governor for Nursing & Midwifery was unable



to be present. Angela congratulated Sue Eddleston, Public Governor for Ripon & West District, and Steve Treece, Public Governor for Wetherby, Harewood and surrounding villages on their re-election to Council. Angela also welcomed Jeremy Cross, the Trust's new Non-Executive Director to the meeting.

Angela apologised that some papers for the meeting were late, owing to technical problems.

Apologies were received from Jonathan Coulter, Deputy Chief Executive/Finance Director; Robert Cowans, Public Governor; Carolyn Heaney, Stakeholder Governor; Dr Loveena Kunwar, Staff Governor; Cllr John Mann, Stakeholder Governor; Kathy McClune, Staff Governor; Dr Chris Mitchell, Public Governor; Dave Stott, Public Governor; Heather Stuart, Staff Governor; Angela Wilkinson, Director of Workforce and Organisational Development.

2. Declarations of Interest

There were no further declarations of interest in addition to those in paper 2. The Non-Executive Directors interest in the Remuneration, Nominations and Conduct committee relating to pay and appraisals was noted.

It was noted that Mr Thompson is a Director of Harrogate Healthcare Facilities Management (HHFM), trading as Harrogate Integrated Facilities (HIF), and Clare Cressey, Lead Governor also has an interest in HIF.

3. Minutes of the last meeting held on 6 November 2019

The minutes of the last meeting held on 6 November 2019 were agreed as a true and accurate record, subject to the following amendments:

- Dr Chris Mitchell attended the first part of the meeting, and left early, therefore his name should be removed from the Apologies for Absence.
- Angela Schofield asked Council to consider an amendment to the Minutes, relating to Dave Stott's question on patient feedback. He had commented that he was disappointed with the written response to his question which had sought judgements about the quality of practice and its enhancement, whereas he felt the Trust's response mostly listed sources of information relating to patient feedback.
- Angela commented this was a fair amendment to the minutes. Both Jill Foster, Chief Nurse, and Laura Robson, Chairman of the Quality Committee, confirmed they would be happy to have a discussion with Dave, particularly as the question posed would have varied responses. It was agreed that Jill and Laura would meet with Dave and report back to the next CoG meeting, with a short presentation on the Agenda. David Scullion confirmed he would also be happy to be involved.

ACTION: Elaine Culf to arrange a meeting between Dave Stott, Jill Foster, Laura Robson and David Scullion. Any other Governor is welcome to attend, and should advise Elaine if they wish to do so.

Minor typographical errors were noted on Page 7 of the Minutes:

- "Heather Stuart asked about the consultant vacancies two new posts and that even *thought*" should read "even though".
- "Item 5: HARA "Angela *Mrs* Schofield..." should read "Angela Schofield".



4. Matters arising and review of action log

The following points were discussed, and the Action Log would be updated accordingly.

- Item 3 (was 16). Rob Harrison confirmed that the Integrated Board Report (IBR) is under consultation with Board Members, and once consolidated will be shared with Governors.
- Item 6. Several Governors took part in the meeting relating to Governor Induction, with a number of suggestions to consider. It was noted that Governors would like to meet Non-Executive Directors in the induction process, and Angela Schofield confirmed that the process will be kept under review, and further noted that Governor Development is a topic for the proposed sub-committee which was on today's agenda for discussion.
- William Fish commented that his induction day earlier in the week was fantastic, and gave him so much valuable information.
- Item 7. Membership Newsletter. It was noted that there had not been a newsletter for a long time, and Angela Schofield has discussed further with Clare Cressey and Elaine Culf to re-establish the Newsletter, with a four page edition to be produced as soon as possible. Angela asked if Governors had any contributions, to advise Elaine Culf.
- Item 11 (was 4). Time to Hire. Shirley Silvester updated Governors on the timescales from interview to conditional offers, and from conditional offer to start date. She explained that there had been a Rapid Process Improvement Workshop (RPIW) and explained the processes. Shirley confirmed that improvements had been seen against key performance indicators, with reduced timescales:
 - From advertisement to start improved by 9%, from 79 days to 71 days
 - From verbal offer to start improved by 12%, now 45 days
 - Conditional offer to start improved by 10%, now 21 days.

Shirley Silvester confirmed planned purchase of a recruitment management system, "TRAC", which automates processes to free HR personnel from certain tasks.

Martin Dennys asked when this would be live, and Shirley Silvester confirmed once finances are approved, an implementation plan would be finalised, though exact timescale was not available as yet.

Cath Clelland suggested leaving this item on the Action Log, to receive a further update at the August CoG meeting.

In response to a question from Laura Robson relating to whether timescales for DBS checks and references were still a barrier, Shirley Silvester said the HR team are working hard with references which are now more manageable, and the issues with both areas are that the Trust is reliant on third parties to take action.

Sarah Armstrong commented that it was a shame Trusts cannot work together more, to perhaps encourage a portable DBS, Shirley Silvester confirmed HDFT work with West Yorkshire Alliance on collaboration, for example with mandatory training and



she will check whether DBS is also part of the process. **ACTION: Shirley Silvester to check DBS as part of the alliance.**

Rob Harrison suggested the RPIW information is sent to Governors, and Shirley Silvester would forward to Elaine Culf for circulation.

ACTION: Elaine Culf to circulate RPIW information to Governors.

• Item 12: Sue Eddleston asked about Podiatry services, and it was confirmed that this will be discussed at the May 2020 meeting.

Matters Arising:

Item 1 on page 2, wheelchairs. Steve Russell reported that preferred model wheelchairs had been purchased, though not enough. The Charity team is seeking sponsorship, and a couple of contacts are happy to have conversations about these. It was agreed to leave this item on the Action Log. Cath Clelland commented this is for the Trust as a whole, not just Harrogate.

5. Chairman's verbal update on key issues

Angela Schofield updated everyone on recent changes to the Council, and wished Clare Cressey well on her appointment as Lead Governor, and thanked her for her work so far. Andrew Forsyth was thanked for acting as Interim Company Secretary, everything he had achieved was appreciated. Lynn Hughes has now joined the Trust as Interim Company Secretary, and she brings lots of experience of working in Foundation Trusts and is looking forward to getting to know everyone. Angie Colvin has now moved to her new role in Equality, Diversity and Inclusion, and Elaine Culf was welcomed to the role of Corporate Affairs & Membership Manager. Elaine will be the main point of contact for Governors. Laura Robson is now Senior Independent Director, and Maureen Taylor becomes Vice Chair from the 1st March 2020.

Angela noted that this would be Chris Thompson's his last Council of Governors meeting, and she gave her wholehearted thanks for his commitment to the Trust over the years, he has always been courteous, kind and constructive. He has chaired the Audit Committee skilfully, and been a great support as Vice Chairman. Angela reminded Governors that Philip Severs had stepped down from HIF, and to ensure immediate continuity, Chris Thompson had kindly and generously agreed to be the Chairman of HIF until the end of June this year. Active recruitment for his replacement is underway.

Angela Schofield updated Governors about the format for the CoG meetings and minutes, and confirmed that now written answers to Governor Questions are provided for the meeting. As a matter of record both the questions and responses will be attached to the minutes as an Appendix, with any further discussion at the meeting recorded separately. In addition, Angela confirmed that Clare Cressey, Lead Governor will lead on the Governors Questions topic and also the meeting evaluation at the conclusion of both the Public and Private meetings.

Angela confirmed that the schedule of Governor meetings for 2020 have been set, with the exception of the Annual Members Meeting, the date for which will be confirmed soonest.

Finally, Angela noted this is the last CoG of this financial year, and it was important to understand where the Trust's current position and plans for the next year.



6 Chief Executive's Strategic and Operational update

Steve Russell gave a presentation of the Quarter 3 review, which included the West Yorkshire & Harrogate partnership; work with Harrogate CCG on clinical and financial sustainability; a summary of Quarter 3 performance and key strategic and operational risks, and confirmed he was happy to receive feedback from Governors. The following key points were noted:

i. North Yorkshire CCG (which includes the current Harrogate & Rural District CCG) will be created on 1st April 2020. NHS England has decided that the new CCG will sit within one Integrated Care System (ICS). HaRD CCG is currently in West Yorkshire & Harrogate ICS, as is HDFT. NHS England have decided the new CCG should sit within Humber, Coast & Vale (HCV) instead of West Yorkshire & Harrogate.

The Trust has expressed its concern about the implications of this change as key relationships and patients flows are largely with organisations in West Yorkshire, including maternity services, education and research. Discussions with the CCG, NHSI/E and the 2 ICSs are taking place to seek assurances about the position of HDFT in the light of this change. Steve Russell confirmed that the Trust will remain part of WYAAT, and colleagues are supportive and positive about our continuing relationship.

In response to a comment from Cath Clelland about the financial and services implications, Steve Russell confirmed that the funds received should not change but many of the programmes which are important for HDFT and our work within WYAAT are funded through WY&H ICS. The recommendations of the Carnall Farrar review encourages development of the relationship with Leeds.

Cath Clelland asked whether, as Governors, there was something that we should be adding to the argument, and Steve Russell confirmed Governor support would be enormously helpful. He reminded everyone that the Trust is not the decision maker.

Martin Dennys commented that he absolutely understood what had been articulated, and asked if it was feasible to keep relationships in more than one ICS. Steve Russell responded that this would be necessary but not easy as capacity was needed to maintain effective contributions within two ICSs. Angela Schofield commented that it would be really useful to be able to say that the CoG was fully briefed and there was understanding of the concerns about patient about patient flows. Tony Doveston commented that if the Trust were to move into HCV ICS it may be difficult to achieve the goals that everyone has been striving for.

Steve Russell concluded this section by saying that if the Trust is in HCV, there will still be a need to work with WYAAT. It was agreed this had been a helpful discussion, was still a work in progress, and Governors' concerns, and support, were fully noted.

- ii. Steve Russell provided an update on the Carnall Farrar work, relating to clinical and financial sustainability for Harrogate, and confirmed that both Leeds and York are supportive of HDFT undertaking some of their work. Discussions are continuing on a list of specialties to explore.
- iii. Turning to Quarter 3 performance, Steve Russell reported there had been a continued high level of activity, with A&E broadly in line with plan, whilst there was a concern that Emergency admissions activity had remained 10% higher every month. In terms of workforce, sickness levels were above target at 4.8%, but substantive



recruitment is as planned, and appraisal rates are improving. Mortality rates are lower, with fewer deaths than expected. Cancer performance is largely on target. The challenges are with A&E performance for the quarter which ended at 88%, which is low for Harrogate, though we remain in the top 10% in the country, which gives an idea of how challenged the rest of the country is. On Finance, at the last meeting, the Trust was £200k behind plan, but has now hit the financial plan on a year to date basis, and earned PSF for the quarter. It was noted that Quarter 4 will be a challenge, as the size of the potential risks has not changed and there are internal actions to be taken.

- iv. Planning for 2020/21 is underway, and it is inevitable that there will be gaps in the positions between providers and commissioners, which is always the case at this stage. It is still early in the process, which is likely to be difficult.
- v. Steve Russell briefed everyone on the key strategic and operational risks, focusing on the operational risks. There will be work in terms of support for patients with mental health needs once TEWV move away from the Harrogate site and there are some specialties where recruitment of consultants is difficult. He confirmed that though there are no 52 week waiters, some waiting times are longer than the Trust would like.

Sarah Armstrong asked about the flu season and vaccination campaign, and Jill Foster confirmed the Trust had seen a higher than normal seasonal pattern in December and January, with more admissions, although this is now reducing. Flu vaccinations stand at 68.11% for front line staff and the aim is still to achieve 75%, now targeting stragglers.

The Integrated Board Report had been circulated.

7. Question and Answer session for Governors and members of the public

The Chairman moved to the questions from Governors which had been submitted prior to the meeting. Clare Cressey confirmed Governors had met on 6 January 2020 and everyone had the opportunity to discuss and agree the questions to be submitted. In addition to the responses which were part of the papers for the meeting, and will be circulated with the Minutes as Appendix 1, the following points were made in discussion of each question:

Question 1 – Raised by Tony Doveston, relating to tax issues affecting income/pensions:

Tony Doveston asked whether the money which appeared to have been found applied to GPs, and Steve Russell confirmed it is in place for this financial year only, for any registered clinician. He further commented that consultations for the future ended at the end of November 2019, no announcements have been made as yet. It was noted that an impact assessment is underway, and Rob Harrison confirmed that the Trust had seen a reduction in underlying capacity for those who have chosen to undertake less work, e.g. with diagnostics for breast cancer.

Question 2 – Raised by Cath Clelland, relating to HIF.

Cath Clelland noted that one question remained, that of other financial benefits.



Chris Thompson acknowledged this, and confirmed that HIF had not yet developed external work, whilst Airedale hospital had made more progress. There had been an impact relating to clinical waste, and these issues had dominated at HIF board with the team focused on resolving those issues. This had diverted management capacity away from business development. A new business development manager has now been appointed, and there are two new external Non-Executive Directors as well, adding to the resources going forward. He further commented that there is focus on new opportunities.

Cath Clelland suggested an update be requested for the meeting after next.

ACTION: Revisit this question at the August 2020 meeting.

Question 3 – Raised by Steve Treece, relating to the change of leadership of the HIF Board.

It was noted that the response provided explains the plan for recruitment of a permanent replacement as Chair. Clare Cressey commented that, personally speaking, there had been no impact and the Managing Director feels he has more support going forward. Chris Thompson commented that the HIF Board is ensuring the MD receives full support.

Question 4 – Raised by Doug Masterton, relating to medical staff and application of latest medical research findings:

Doug Masterton commented that he hoped his question had been perceived as supportive of staff, as clearly skills and development is as precious and important as any kind of resource. He had not been aware of the professional networking with the hospital and colleagues in larger centres like Leeds, and felt this should be included in the remit of Non-Executive Directors (NED), as this could contribute to the culture of the organisation.

Dr David Scullion confirmed that the question had indeed been taken in a supportive way, and the Trust has a good track record with long established links, and Harrogate is very active for its size, and he gave Governors complete reassurance that work continues to keep the research agenda live. He further commented that there is good support from the Board for staff to grow professionally, and though there is not a dedicated Non Executive Director.

Sarah Armstrong commented that this topic is seen in Quality Committee, and the Trust is very supportive of shared learning and keeping up to date with developments in research and technology.

Laura Robson commented that this is the business of all NEDs, and further reflecting on the question, mentioned the clinical excellence awards, where amazing examples of our staff undertaking ground-breaking work and research. The maternity team recently received a Unicef Gold award for breastfeeding in hospital, which was a good example of putting evidence into practice. This is a major award which HDFT were the first in the country to achieve. Governors can therefore be reassured that we are 'punching above our weight' in terms of research, innovation and practice.

Maureen Taylor commented that the Resources Committee discusses workforce in more detail, and the ongoing training of staff to fill AHP roles creates further opportunities for staff in nursing.



Angela Schofield commented that there are so many staff studying for extra qualifications and demonstrating extra levels of clinical practice, but it was not always clear from reporting that there is so much going on, and perhaps the Trust should think about how we celebrate the success there is. Sarah Armstrong agreed that the quality account has many such examples, and Rob Harrison commented that non clinical roles were also really important to remember in staff development.

Question 5 – Raised by Steve Treece, relating to cost saving options, in particular through collaborative working.

Steve Treece commented his question had been prompted by his attendance at Audit Committee, and procurement, and noted the range of different ways to achieve assurance. He asked about how much may be at risk from a change in ICS. Steve Russell commented that the activity levels had grown and the change of ICS should not in itself be a risk.

Cath Clelland said she was satisfied the discussions were good, and questions had been answered, all agreed.

Sue Eddleston raised one quick question. She commented she was delighted to be reelected as a Governor. She would like to say thank you to the people of Ripon through the medium of the newsletter, and was looking forward to working hard with them for the next three years. It was suggested that Sue could provide a profile as a Governor for a future newsletter.

8.1 Governor Development & Membership Engagement Committee

Angela Schofield summarised Paper 8.1, which requested Council to consider amendments to the previous Governor Working Group on Membership to form a Sub-Committee, the Terms of Reference for which had been circulated. The previous GWG had not met for some time, and it was felt appropriate to have a more focused group with a regular cycle of quarterly meetings, then reporting back to the Council, with the Lead Governor acting as Chair. The CoG agreed with the formation of the sub-committee, and the next Governor Bulletin would ask for nominations to stand on the committee.

Approved: The Council of Governors approved the formation of the new Sub-Committee.

8.2 Remuneration, Nominations and Conduct Committee (RNCC)

The minutes from the RNCC meeting held on 18th November 2019 and a proposed process for NED appraisal had been circulated.

Angela Schofield summarised the notes from the meeting, and highlighted the disparity between payments to NEDs in Foundation Trusts and NHS Trusts, which had paid significantly less than Foundation Trusts. There has been a lobby for many years to try and equalise the payment and guidance has now been received from NHSE&I. The RNCC had agreed to recommend that our Trust arrangements are left as they are until the next NED recruitment, and confirmed that the Trust is largely complies with the guidance. Angela also confirmed that the Chairman's salary is in line with the guidance, and there is no need to review at present.



Approved: The Council of Governors accepted the Minutes of the RNCC meeting held on 18th November 2019.

Angela Schofield then summarised the appraisal process, and confirmed that Lesley Webster (ex NED), Emma Edgar (ex Lead Governor) and Angela Wilkinson, Director of Workforce & Organisational Development) had worked on a new draft proposal, which had been circulated. It was noted that the previous questionnaire had a very disappointing response from Governors, with only six responses. It was felt that a Survey Monkey Tool could be used instead, as this is both anonymous and quick for people to contribute.

Angela Schofield asked Governors to support the principles and try to see if response rates can be improved this year. Martin Dennys commented that more time to undertake reviews would be useful, and it was agreed to allow a month.

Cath Clelland said she would like to have reassurance about the appraisal feedback that Governors were asked to provide, as she felt a degree of dismissiveness around the contributions, further commenting that whatever processes are in place, Governors should have reassurance that feedback is valued and used. Angela Schofield responded by saying that wasn't the case at all, it was purely the disappointing return of responses from only six Governors that was the concern, as the Trust had wanted a more representative view.

Martin Dennys commented that new governors should not feel they can't make a contribution because they are new. It is useful to gain the views of everyone.

Approved: The Council of Governors agreed with the proposal on NED Appraisal process.

9. Update on Quality Account Process

Jill Foster, Chief Nurse, updated the Council on the production of the Annual Quality Account, which is a mandated requirement, supplying information about the Trust. There is a timetable to follow, and Governors have involvement relating to the quality priorities that they would like to see as subject matters. For example, do we as a Trust calculate ED performance appropriately, and can include a further look into some of priorities already discussed, drawing on any feedback received from previous Accounts in order to set the priorities for the coming year. There are key dates in the timetable to consider, and it was felt this could be discussed further at the Informal Governor Briefing, on the 4 March 2020.

10. Non-Executive Director Verbal Update

Laura Robson, the newly appointed Senior Independent Director (SID) gave a brief update. She commented that this new role had been taken on from Lesley Webster. Her handover from Lesley detailed some issues that she had been involved with and Laura had undertaken some research into how the role should be performed, although she was unsure about the fact that some documentation suggests the post should be held by an "elder statesman of the Board"! The SID role is an essential part of the Board functions, and would tackle issues about performance of the Chairman and CEO if necessary, as well as having a role in the Chairman's appraisal. Laura confirmed she would work with Clare Cressey, Lead Governor, to obtain Governor feedback on the Chairman's performance, as well as working separately with the NEDs.



The other part of the role is that of a Freedom To Speak Up (FTSU) Champion, so that staff members can approach her with concerns, such as whistleblowing, or treatment of a member of staff. As an organisation, the Trust is keen the FTSU is managed well, and assists in creating the right culture, and having an independent viewpoint is an important part of the role. Laura said she hoped she could fulfil the requirements well, and would enjoy performing the role, and Angela Schofield thanked her for taking it on.

Sue Eddleston noted that Governors are volunteers, rather than members of staff and asked how Laura would envisage the role helping them. Laura responded by saying that Governors are giving to the organisation and should have similar treatment as anybody working in the organisation, and she would expect to be available to them.

11. AUDIT COMMITTEE TERMS OF REFERENCE

The Audit Committee Terms of Reference had been circulated for consideration, and Chris Thompson, on behalf of the Committee reassured Governors that the only changes proposed are to individual job titles and certain entities such as NHS Counter Fraud, which did not exist for the last ToR. He confirmed there were no substantive changes to the ToR.

Approved: The Council of Governors approved the Audit Committee Terms of Reference.

12. Re-appointment of the External Auditors

The Paper relating to the re-appointment of the External Auditors had been circulated, and was presented by Chris Thompson, Non-Executive Director and Chairman of the Audit Committee. This recommended that KPMG should be reappointed for a further 2 years when the service would be retendered. He reminded the Governors there had been some discussion at the August CoG meeting about the performance of the external auditors during the 2018/19 audit, caused largely by the scope of the audit and audit assurance provided. Chris Thompson reassured Governors that a complete repeat of the assessment process had been carried out in September, which considered KPMG's effectiveness, and though there was a reduction in the average score they achieved, the score of 3.8 - 3.9 was still good. He further commented that the Executive team have held discussions, so that Governors can have reassurance, and a further debate had been held at the last two meetings of the Audit Committee to ensure it was appropriate to recommend re-appointment to Governors

Chris Thompson firmly believes that the process for 2019/20 will be far smoother and the recommendation is that KPMG should be reappointed for 2019/20 and 2020/21 after which the contract would be put out to tender.

Ian Barlow noted that KPMG were under investigation by the FCA, and problems had been caused for at least two hospitals, in Liverpool and the Midlands, when the construction company Carillion failed, and commented that a recent BBC report was highly critical.

Chris Thompson commented that there has also been focus on every other large firm of auditors, and the Trust is confident that, in the health sector in particular, KPMG knowledge is excellent, and he has no concerns about their work.

In reply to a further comment from Ian Barlow about heavy fines and other ongoing investigations, Chris Thompson commented that if the Trust were to put its external audit out



to tender at this stage, he felt there would be little interest, as audit firms are struggling with staffing levels to carry out audits, and this would be reflected in the price.

William Fish asked if we change external auditors, whether this would cause more work, but Chris Thompson did not feel there would be a significant impact.

Angela Schofield confirmed with Chris Thompson that the contract is awarded for three years, with a two year extension, and the retender process should commence in late summer 2021. Chris further confirmed that Clare Partridge has taken over as lead, and he had worked with her before, as the lead in the health sector, Steve Russell noted that had Jonathan Coulter been present, he would make a similar comment.

Ian Barlow agreed that it is a little late to change now, but if the process goes out to tender after two years, he would be happy. Cath Clelland asked that the minutes of this meeting record the Governors concerns as discussed.

Approved: The re-appointment of KPMG as External Auditors for a two year period.

13. Any other Relevant Business not included on the Agenda

There were no other items of business.

14. Evaluation of the Meeting

Clare Cressey, as Lead Governor, invited comments about the meeting, noting that this meeting overran by twenty minutes.

All agreed that in relation to the Questions and Answers, unless a supplemental question is needed, that section of the meeting should be to verify that Governors are happy with the responses. Angela Schofield commented that questions should perhaps be finalised earlier, to provide Governors with the answers earlier.

Steve Treece noted no members of the public were present again, and felt this issue should be discussed further as part of the new subcommittee of Council. Samantha Mearns commented that there were frequent occasions when there were no members of the public present at meetings of Harrogate Borough Council.

Sue Eddleston commented that the venue may be a little awkward. Many other venues had been considered and tried and there were some shortcomings with all of them. Any suggestions would be welcome.

Sarah Armstrong suggested that we should ask Members at the Annual Member meeting their views, as part of the round table discussions.

Action: Elaine Culf to investigate alternative venues for CoG meetings.

15. Close of meeting

Angela Schofield closed the meeting at 8.00pm, thanking everyone for attending and confirmed the next public meeting would take place on Wednesday, 13th May 2020, currently scheduled to take place in Cover Room, at The Pavilions.



Paper 4.0



HDFT Council of Governor Meeting Actions Log – January 2020

This document logs items agreed at Council of Governor meetings that require action following the meeting. Where necessary, items will be carried forward onto the Council of Governor agenda in the relevant agreed month. The Director/Manager responsible for the action will be asked to confirm completion of actions or give a progress update at the following Council of Governor meeting when they do not appear on a future agenda.

When items have been completed they will be marked as such and transferred to the completed actions schedule as evidence.

Ref	Meeting Date	Item Description	Director/Manager Responsible	Date due to go to Council of Governor meeting or when a confirmation of completion/progress update is required	Detail of progress
3 (prev 16)	1 May 2019	Review Integrated Board Report (IBR)	Rob Harrison, Chief Operating Officer	13 May 2020	 7 August 2019 – Governor Briefing provided. Views to be sought from Governors as part of the process. 6 November 2019 – detailed processes underway but more analysis required – likely to be out for comment end December 2019 22 January 2020 – Board now considering, once consolidated, will be brought back to Governors.
6	7 August 2019	Review Governor induction process	Elaine Culf, Interim Corporate Affairs	13 May 2020	22 January 2020 Further discussion to take place at newly formed Sub-Committee –



			and Membership Manager		Governor Development and Membership Engagement.
7	7 August 2019	Review membership newsletter content and frequency	Elaine Culf, Interim Corporate Affairs and Membership Manager	13 May 2020	22 January 2020 – As above, short newsletter to be produced as soon as practical.
11	6 November 2019	Time to Hire – report timescale from interview to conditional offer, as well as conditional offer to start date	Angela Wilkinson, Director of Workforce and Organisational Development	13 May 2020	22 January 2020 – update provided by Shirley Silvester, who is to check whether DBS provision is part of the collaborative alliance within West Yorkshire.
12	6 November 2019	Podiatry service to evaluate new way of booking appointments and report outcome	Rob Harrison, Chief Operating Officer	13 May 2020	
13	22 January 2020	Patient Feedback – Meeting between Dave Stott, Jill Foster, Laura Robson and David Scullion, together with any other Governor who wishes to attend.	Elaine Culf, Interim Corporate Affairs and Membership Manager	13 May 2020	
14	22 January 2020	Time to Hire – information gathered by recent RPIW to be circulated to Governors.	Elaine Culf, Interim Corporate Affairs and Membership Manager	13 May 2020	
15	22 January 2020	Revisit the question of other financial benefits to the Trust since the creation of HIF	Rob Harrison, Chief Operating Officer	August 2020	
16	22 January 2020	Investigate alternative venues for the CoG meetings	Elaine Culf, Interim Corporate Affairs and Membership Manager	13 May 2020	





Date of Meeting:	23 June 2020		Agenda item:	5.0		
Report to:	Council of Governors					
Title:	Chairman's Report					
Sponsoring Director:	Mrs Angela Schofield, Chairr	man				
Author(s):	Mrs Angela Schofield, Chairr	man				
Report Purpose:	Decision Discussion/ Consultation	Assur	ance 🗸	Information 🗸		
Executive Summary:	This report sets out key updates from the Chairman					
Related Trust Objectiv	res					
To deliver high quality care	✓ To work with partners to deliver integrated care: ✓ To ensure clinical and financial sustainability: ✓					
Key implications						
Risk Assessment:	None					
Legal / regulatory:	None					
Resource:	Not applicable					
Impact Assessment:	Not applicable					
Conflicts of Interest:	None identified					
Reference documents:	Not applicable					
Assurance:	Not applicable					
Action Required by Co	ouncil:					
The Council of Governors is asked to note the content of this report.						



Council of Governors – 23 June 2020 Chairman's Report

Coronavirus Pandemic

As we all know the Trust, along with all other NHS organisations, in March 2020 was required to comply with measures to support patients with Coronavirus and work to prevent the spread of infection. The Trust put in place an incident command structure to oversee the decision-making and actions necessary in these complex circumstances.

Throughout this period, the governors have received briefings related to a wide range of issues. A weekly written report has been provided and telephone and video conferences have provided governors with the opportunity to ask questions.

National guidance was received in March which indicated that governance arrangements should be reduced to the essential required to ensure that there were the appropriate levels of support, scrutiny and accountability. The meeting of the Council of Governors which was planned to have taken place on 13 May was postponed. A meeting is now being held on 23 June and it is intended to hold the next meeting in September.

The purpose of this report is to summarise the impact on the Board and Council governance arrangements resulting from the actions required to address Coronavirus.

Meetings of the Board of Directors have taken place monthly from March. To comply with the requirements for social distancing these have taken place via video conferencing. This is a change from the usual pattern of formal board meeting alternating with a board workshop. As directed nationally agendas have been reduced to ensure that management time was not diverted from the main priority of the leadership required for the pandemic. The Board has received reports from Gold Command on the actions which have been agreed. Appropriate delegations were approved to enable decisions about funding to be made.

Board subcommittees have continued to take place, again with reduced agendas and via video conferencing. The Quality Committee has received reports from the Clinical Advisory Group which advises Gold Command on key clinical decisions.

Appraisals of non executive directors by the Council has been delayed and will now commence in early July with a report going to the Nominations, Remuneration and Conduct Committee in August, prior to the next Council meeting in September.

The Annual Members meeting has been postponed. The date for the production of the Annual Report and Accounts was extended and these will now be considered by the Board on 24 June. It is not possible yet to set a date for the AMM. I have written to members twice providing information about the Trust's management of the pandemic. A more extensive newsletter is planned for early July.

The Trust's Charity, Harrogate Hospital and Community Charity, has been managing the relationships with the very many individuals, organisations and businesses who have offered support and donations over the last three months. The generosity shown to the Trust has been overwhelming and we are most grateful to all those who have come forward in a wide variety of ways.

Other Matters

I regret to inform the Council that the Patient Voice Group have decided to discontinue. They made their decision before the pandemic measures were put in place. In recent years they have found it difficult to recruit new members and sustain the momentum of their support. They have been an integral part of the Trust for many years and have been an extremely effective conduit for the views of and feedback from patients. I have thanked them individually for their commitment and care for patients and staff.

I am pleased to welcome Dr Jackie Andrews as the Trust's new Medical Director from 15 June and Mark Chamberlain as the Chairman of Harrogate Integrated Facilities from 1 July (subject to pre-employment checks).

The Trust is now officially a part of the Humber Coast and Vale Integrated Care System. We are still very actively involved with the West Yorkshire and Harrogate Integrated Care System and the West Yorkshire Association of Acute Trust.

Angela Schofield Chairman June 2020





COUNCIL OF GOVERNORS MEETING 23rd June 2020

GOVERNOR QUESTIONS

TOPICS RAISED:

- Elective Surgery Backlog
- Assurance for NEDs
- PPE Guidance
- CQC Rating
- Other

ELECTIVE SURGERY BACKLOG:

Martin Dennys:

 Following the extended pause in elective procedures, can you give us and the public assurance as to how HDFT will be restarting the elective pathways and how they plan to reduce the now much larger backlog / waiting list of people needing treatment? (news headlines are indicating a doubling of the size of waiting lists)

Steve Treece:

2. What are the Trust's plans to deal with the backlog of elective surgery and other treatment that has built up as a result of needing to focus on addressing the COVID-19 situation and how might these plans be impacted by winter pressures?

Tony Doveston:

3. As a result of the COVID-19 situation the pressure on HDFT waiting lists for surgery and clinic visits will have increased dramatically. Much of the work in our clinics is to provide regular monitoring and testing of patients with ongoing conditions such as the eye clinic. If these type of tests are further delayed in may well result in rapid deterioration or even sight loss. Can the Board provide assurances that every effort will be made to reduce these backlogs at the earliest opportunity and possibly by use more innovative changes to some current work practices.

ASSURANCE FOR NEDS

Steve Treece:

4. How are the NEDs obtaining assurance on decisions taken during the COVID-19 crisis, recognising that a number of these will have had to be made at pace and may require retrospective assurance?



PPE GUIDANCE

Doug Masterton:

5. I did not spot anything in the guidance or the presentations by the Exec team at our last briefing about whether or not outpatients or other visitors entering the hospital might also be required to follow the same procedures for wearing masks. To me it would appear prudent to require people coming from outside to wear masks like staff for the same reasons. I wondered if this had been considered as part of the changed procedures that came into place on Monday 15th June.

CQC RATING

Dave Stott:

6. The Trust has indicated that it is seeking to be 'one of the best of the best' healthcare providers nationally. What then is it planning to do more of, less of, new or differently that would justify CQC grading the Trust overall as 'Outstanding'?

OTHER

Bob Cowans:

7. Is the Trust discriminating against older people when allocating appointments to see specialist care? A person that I know has been suffering from a medical problem which is causing quite severe pain. Their GP has referred the patient to our hospital.

Upon receipt of a letter from the appointments department the person rang and was told that they would probably have to wait about 23 weeks and then asked to state the year of birth. Why ask for this when their records must have their date of birth unless it is to be used to categorise her as a low priority for an appointment?

Ian Barlow:

8. There is a post on Twitter relating to a stolen bike from outside Harrogate Hospital, which means the member of staff can't do on-call shifts so the rest of the team are 'mucking in'. My question is that if staff are using a bike that they have bought for NHS work, should the Hospital either provide a bike or give any member of staff using their bike an allowance towards upkeep & insurance?