

COUNCIL OF GOVERNORS' MEETING (held in PUBLIC)

Monday 6th December 2021 from 4.30pm to 6.15 pm

To be held at the Pavilions of Harrogate, Great Yorkshire Showground, Harrogate, HG2 8NZ

AGENDA

Time	Item No.	Item	Lead	Action	Paper
4.30	1.0	Welcome and apologies for absence <i>Welcome to the public, set the context of the meeting and receive any apologies for absence.</i>	Angela Schofield, Chairman	Note	Verbal
	2.0	Declarations of Interest <i>To declare any interests relevant to the agenda and to receive any changes to the register of interests</i>	Angela Schofield, Chairman	Note	Attached
	3.0	Minutes of the meeting held on 6th September 2021 <i>To review and approve the minutes</i>	Angela Schofield, Chairman	Approve	Attached
	3.1	Minutes of the Annual Members' Meeting held on 6th September 2021 <i>To review and approve the minutes</i>	Angela Schofield, Chairman	Approve	Attached
	4.0	Matters arising and Action Log <i>To receive updates on progress of actions</i>	Angela Schofield, Chairman	Note	Attached
4.40	5.0	Chairman's update <i>To note</i>	Angela Schofield, Chairman	Note	Verbal
4.50	6.0	Non-Executive Directors Briefings <i>To receive updates</i>	Non-Executive Directors	Note	Verbal
5.00	7.0	Chief Executive and Executive Director strategic and operational update	Steve Russell, Chief Executive	Note	Presentation
5.25	8.0	Remuneration, Nominations & Conduct Committee – New Chairman's Recruitment <i>To receive an update</i>	Laura Robson, Senior Independent Director	Note	Attached
5.40	9.0	Governor Development & Membership Engagement Committee – Chair's Report for Meeting held 29th November 2021 <i>To receive the report for comment</i>	Clare Illingworth, Lead Governor	Note	Verbal
	9.1	Approved Minutes of Governor Development & Membership Engagement Committee <i>To receive the minutes of the Governor Development & Membership Engagement Committee held on 16th June 2021</i>	Clare Illingworth, Lead Governor	Note	Attached

5.50	10.0	Question and Answer Session for Governors and members of the public <i>To receive and respond to questions submitted or from the floor</i>	Clare Illingworth, Lead Governor	Note	Attached
6.10	11.0	Any other relevant business not included on the agenda <i>By permission of the Chairman</i>	Angela Schofield, Chairman	Note	Verbal
	12.0	Evaluation of meeting	Angela Schofield, Chairman	Note	Verbal
6.15	13.0	Date and Time of Next Meeting <i>Monday, 7th March 2022, 4.30 – 6.15pm</i>	Angela Schofield, Chairman	Note	Verbal
	14.0	Close of meeting			

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 554423

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).
Ian Barlow	Public elected	Other	Owner of non-profit website 'Harrogate Guide'. Volunteer with The Harrogate District Climate Change Coalition. Future NHS Collaboration Platform. Participation Platform of the Care Quality Commission.
John Batt	Public elected	NONE	
Donald Coverdale	Public elected	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.

1 (updated December 2021)

You matter most

Name	Governor Status	Interests Declared	
Clare Illingworth	Stakeholder	NONE	
Andrew Jackson	Staff elected	Other	Wife is employed by HDFT as Patient Safety Manager
Samantha James	Public elected	NONE	
Mary Kelly	Public elected	Other	Husband is employed by Tees Esk and Wear Valleys NHS Foundation Trust as a Consultant Clinical Psychologist
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 elected	NONE	
Doug Masterton	Public elected	Position of authority in a local council or Local Authority	Member of Harewood Parish Council.
Kathy McClune	Staff elected	NONE	
Karen Stansfield	Stakeholder Governor	Awaited	Dean of Health Studies, University of Bradford.
Dave Stott	Public elected	Other	Patient and Carer Representative at the Royal College of GP's. Simulated patient involved in the training and assessment of trainee doctors in Norwich, Leeds and Liverpool Medical Schools.
Heather Stuart	Staff elected		Partner works for Harrogate Healthcare Facilities Management trading as Harrogate Integrated Facilities (HIF).
Steve Treece	Public elected	Other	Steering Committee member of the Institute of Risk Management Health and Care Special Interest Group (The IRM is a professional body, providing risk management qualifications, education etc.)

2 (updated December 2021)

You matter most

Council of Governors' Meeting (held in Public)

Minutes of the public Council of Governors' meeting held on 6 September 2021, at 2:00pm, at The Pavilions of Harrogate, Great Yorkshire Showground, Harrogate, HG2 8NZ

- Present:**
- Angela Schofield, Chairman
 - Donald Coverdale, Public Governor
 - Tony Doveston, Public Governor
 - Sue Eddleston, Public Governor
 - Clare Illingworth, Stakeholder Governor & Lead Governor
 - Andrew Jackson, Staff Governor
 - Samantha James, Public Governor
 - Mary Kelly, Public Governor
 - Kathy McClune, Staff Governor
 - Doug Masterton, Public Governor
 - Prof. Karen Stansfield, Stakeholder Governor
 - Dave Stott, Public Governor
 - Steve Treece, Public Governor
- In attendance:**
- Jackie Andrews, Medical Director
 - Sarah Armstrong, Non-Executive Director
 - Mark Chamberlain, Chairman, Harrogate Integrated Facilities (HIF)
 - Angie Colvin, Corporate Affairs and Membership Manager (minutes)
 - Jeremy Cross, Non-Executive Director
 - Jordan McKie, Deputy Director of Finance
 - Russell Nightingale, Chief Operating Officer
 - Emma Nunez, Executive Director of Nursing, Midwifery and Allied Health Professionals (AHPs)
 - Andy Papworth, Non-Executive Director
 - Laura Robson, Non-Executive Director
 - Steve Russell, Chief Executive
 - Wallace Sampson, Non-Executive Director
 - Kate Southgate, Company Secretary
 - Richard Stiff, Non-Executive Director
 - Maureen Taylor, Non-Executive Director
 - Angela Wilkinson, Director of Workforce & Organisational Development

COG/09/2021/1.0 Welcome and apologies for absence

The Chairman, Angela Schofield, welcomed everyone to the meeting. She commented on how nice it was to see everyone face to face, albeit remaining socially distanced.

The Chairman welcomed new Governors Mary Kelly, Donald Coverdale and Andrew Jackson to their first meeting and confirmed that Prof. Karen Stansfield would be arriving as soon as possible. She also welcomed Mark Chamberlain, Chairman for Harrogate Integrated Facilities (HIF).

Everyone at the meeting introduced themselves.

Apologies were received from Ian Barlow, Public Governor, John Batt, Public Governor, Jonathan Coulter, Deputy CEO and Finance Director, Martin Dennys, Public Governor, Dr Loveena Kunwar, Staff Governor, Cllr John Mann, Stakeholder Governor, and Heather Stuart, Staff Governor.

COG/09/2021/2.0 Declarations of Interest

It was noted that Sarah Armstrong was a Director of HIF, Clare Illingworth was the nominated Stakeholder Governor of HIF and Mark Chamberlain was the Chairman of HIF. Wallace Sampson was Chief Executive of Harrogate Borough Council.

There were no further declarations noted in addition to those listed in paper 2.0.

COG/09/2021/3.0 Minutes of the last meeting held on 8 June 2021

Resolved: The minutes of the last meeting held on 8 June 2021 were agreed as an accurate record.

COG/09/2021/3.1 Minutes of the Annual Members' Meeting held on 29 September 2020

Attendees at the Annual Members' Meeting scheduled later that day would be informed that the Council of Governors had approved the minutes of the Annual Members' Meeting held on 29 September 2020 and these would be available on the Trust's website.

Resolved: The minutes of the Annual Members' Meeting held on 29 September 2020 were agreed as an accurate record.

COG/09/2021/4.0 Matters Arising and Action Log

The open actions on the Action Log were reviewed in turn:

Action: COG/06/2021/7.0 – Major quality priority for 2021/22

The Chief Executive would provide further detail in his update at item 7.0 on the agenda.

Action: COG/06/2021/8.0 – Acute stroke services

The Medical Director confirmed she had not received any further updates from the regional centre in Leeds so this item would remain on the action log.

Action: COG/06/2021/8.0 – Update on Deloitte Report

The Chief Executive would provide further detail in his update and in response to Governors' questions at item 7.0 and 10.0 on the agenda.

There were no further matters arising or actions to review.

COG/09/2021/5.0 Chairman's update

The Chairman commenced her update by thanking Governors who had recently left the Council – Cath Clelland, Public Governor, Bob Cowans, Public Governor and Neil Lauber, Staff Governor. She also provided another warm welcome to the new Governors who were attending their first meeting.

The Chairman congratulated Emma Nunez on her formal appointment as Executive Director of Nursing, Midwifery and Allied Health Professionals (AHPs).

Resolved: *The Chairman's update was noted.*

COG/09/2021/6.0 Non-Executive Director Briefings

The Chairman reminded Governors of the process in place for Non-Executive Directors who chair sub-committees of the Board to routinely provide an update at the Council of Governor meetings. Following a request from Governors, Sarah Armstrong and Andy Papworth provided an update to Governors as Non-Executive Directors who do not chair sub-committees. Wallace Sampson was unable to provide an update at this time due to a prior commitment with Harrogate Borough Council during the meeting.

Sarah Armstrong based her update on reflections over the last year, the impact of Covid-19 on patients and colleagues, and her focus for the year ahead. She described her role and responsibilities including membership on sub-committees and her role as a Non Executive Director for HIF. She highlighted her interest in people and confirmed she had been focussing on her own development around culture and equality, diversity and inclusion (EDI) related topics. She had taken on the role as the Non-Executive Lead for wellbeing and is a member of the Schwartz Rounds Steering Group.

Sarah Armstrong's other interests included complaints, recruitment, charity related work and environmental issues; she commented that she had learned so much from her work with HIF.

Andy Papworth stated that he had been a Non-Executive Director since 1 March 2020 and he was incredibly proud to be a member of the Board. He had taken up the role of Non-Executive Champion for Maternity Services in January this year.

He reflected on the past year and expressed the importance of the Trust's focus on improving the culture of the organisation and the EDI agenda. Overseeing this work was the newly established People and Culture Committee of which he was a member. He acknowledged the challenges ahead for the Trust and expressed the importance of partnership working. He welcomed the new position of Director of Strategy on the Board.

He concluded his update by talking about the different perspectives and diverse background that Non-Executive Directors brought to the Board. He referred to Non-Executive Directors' roles and responsibilities and the importance of seeking assurance; being able to triangulate what they hear, see and read. He was pleased that Non-Executive Directors were visiting staff again face to face.

The Chairman thanked the Non-Executive Directors for their updates.

Kathy McClune thanked Andy Papworth for his interest and level of commitment to maternity services.

There were no questions.

Resolved: *The Non-Executive Director's updates were noted.*

COG/09/2021/7.0 Chief Executive and Executive Director Strategic and Operational update

Steve Russell, Chief Executive, presented his strategic and operational update which incorporated responses to questions raised by Governors (Appendix 1) and was supported by the Integrated Board Report (IBR). The presentation, detailing the Chief Executive's update, would be made available on the Trust website:

<https://www.hdft.nhs.uk/about/council-of-governors/governors-meetings/>

The Chief Executive confirmed there was a huge amount of work ongoing and his update would cover the following areas:

- Our external environment and partnerships.
- An update on recovery key priority areas
- Financial performance
- HDFT colleagues
- Corporate Risk Register update
- Governors' questions.

The Chief Executive described the current structure and new NHS arrangements from April 2022 consisting of Integrated Care Partnerships and Integrated Care Boards. He provided an update on the West Yorkshire Association of Acute Trust (WYAAT) programmes in a number of priority areas and outlined other Trust strategic issues.

Moving on to key partnership risks, the Chief Executive highlighted the national requirement from 11 November 2021 that anyone working in or visiting a care home must be double vaccinated against COVID-19. He acknowledged the recruitment challenges across the care sector and the challenges for colleagues within Clinical Commissioning Groups who were subject to organisational change. On a positive note was the transfer of Northumberland 0-19 services to the Trust which was progressing at pace. Members of the Board were looking forward to welcoming new colleagues with a visit to Northumberland scheduled the following day.

The Chief Executive summarised the Trust's COVID-19 position and praised colleagues in vaccination and immunisation services for their hard work in preparing to vaccinate 12-15 year olds, as per national guidance. He provided information on the following key priority areas supported by the detail and graphs in his presentation:

- Recovery of 0-19 services.
- Recovery of elective services – activity (outpatients, day cases, inpatients).
- Recovery of elective services – cancer and diagnostics.
- Non-Covid emergency care.
- Quality and safety – (including incidents, ward accreditation, quality and safety summit, complaints).
- Quality and safety – a focus on maternity.
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A considerable amount of hard work was being undertaken across services to focus on providing high quality and safe patient care.

The Chief Executive highlighted a key message from the financial detail in his presentation that the Trust continued to break even with a slight surplus. Looking ahead, allocations for October 2021 to March 2022 were not yet known however, funding was expected to be reduced and confirmed by mid-September. The Trust was working on an internal plan to be agreed by the end September with final plans submitted for the system and the Trust by the end November. Resources Committee would continue to scrutinise financial planning on behalf of the Board.

The Chief Executive was pleased to draw attention to the wide range of projects to support the embedding of the organisation's KITE values (Kindness, Integrity, Teamwork and Equality). The Director of Workforce and Organisational Development and her team were working hard to support staff with masterclass workshops, e-learning modules, a virtual learning platform, and surveys. As part of the work to become an anti-racist organisation well-attended workshops had taken place; an important part of shaping the Trust's ambition with engagement from colleagues to help shape positive actions. The first Black, Asian and Minority Ethnic (BAME) allyship programme had commenced and would consist of six facilitated sessions over twelve weeks.

Finally, the Chief Executive summarised the Corporate Risk Register. He confirmed that most of the risks detailed in his slides remained at a score of 12 despite progress, except for 'breast two week wait' which was expected to reduce to a score of 3.

The Chairman thanked the Chief Executive for his detailed and informative update.

There were no questions from Governors.

Resolved: *The Chief Executive and Executive Director strategic and operational update was noted.*

COG/09/2021/7.1 Integrated Board Report (IBR)

The Chairman confirmed that Governors had met with the Chief Executive and the Deputy Chief Executive/Director of Finance to receive a briefing on the new style IBR.

Resolved: *The items contained within the IBR were noted.*

COG/09/2021/8.0 Annual Report and Accounts 2020/21

The Chairman referred to the significant amount of work involved in producing the Annual Report and Accounts. She thanked all staff involved for providing the information and also the former Interim Company Secretary for pulling the report together.

The Council of Governors was asked to note the Annual Report and Accounts (2020/21) which had been reviewed and approved by the Audit Committee and Board of Directors before submission to NHS England/Improvement and being laid before Parliament. She explained that the report format was determined by NHS England/Improvement and the Trust had produced a summary Annual Report and Accounts; a more accessible document which would be available at the Annual Members' Meeting and on the Trust website:

(<https://www.hdft.nhs.uk/about/trust/statutory-info/>).

The Chief Executive echoed the Chairman's comments acknowledging the huge amount of work from all colleagues across the Trust and HIF.

Resolved: *The Annual Report and Accounts 2020/21 was noted.*

COG/09/2021/8.1 Independent Auditor's Report

The Chairman introduced Rashpal Khangura, Director of KPMG.

Rashpal Khangura referred to the Auditor's Annual Report 2020/21 and Year End Report 2020/21, which had been circulated prior to the meeting and taken as read. There was also a presentation for Governors in support of the reports.

Rashpal Khangura confirmed that the role of external audit was to provide an opinion as to whether the accounts gave a true and fair view of the financial position of the Trust of its income and expenditure during the year. He added that no report was required on the Quality Account for 2020/21 due to national guidance from NHS England/Improvement.

He described the process in reaching audit outcomes including financial statements audit and value for money. The Trust received an opinion that financial statements gave a true and fair view and were prepared in accordance with the Accounts Direction. There was one unadjusted audit difference relating to classification of accruals/provisions.

Rashpal Khangura wished to record his thanks to the Trust's finance team and Audit Committee for their timely responses throughout the audit process.

The Council of Governors was asked to note the Independent Auditors Report 2020/21 which had been reviewed and approved by the Audit Committee and Board of Directors before submission to NHS England/Improvement and being laid before Parliament.

Richard Stiff, Chair of the Audit Committee, also paid tribute to the finance team and thanked External Audit for their work at the year end to reach an audit opinion.

The Chairman thanked Rashpal Khangura for his presentation and opened up the floor for questions.

In response to Doug Masterton's question about the focus on land and buildings, Rashpal Khangura confirmed that KPMG followed a financial framework in compliance with international financial reporting standards.

Steve Treece sought assurance about some Jordan McKie reported that the issues had been addressed by internal audit and the new roster system being implemented would help. Richard Stiff also clarified that most of the recommendations had been actioned.

There were no further questions.

Resolved: *The Independent Auditors Report was noted.*

COG/09/2021/9.0 Governor Development and Membership Engagement Committee - Chair's Report

Clare Illingworth, Lead Governor and Chair of the Governor Development and Membership Engagement Committee, summarised her report which had been circulated prior to the meeting and taken as read.

She highlighted key areas of activity from the Committee since its last meeting on 16 June including the Trust's new membership database and promotion of Governor Elections. The next meeting was scheduled to take on 24 August but had been postponed until 28 September due to staff availability.

There were no questions for Clare Illingworth or the Committee.

COG/09/2021/9.1 Approved Minutes of Governor Development and Membership Engagement Committee, 23 February 2021

The approved minutes of the Governor Development and Membership Engagement Committee held on 23 February 2021 were noted.

Resolved: *The Governor Development and Membership Engagement Committee Chair's Report and approved minutes from the meeting held on 23 February 2021 were noted.*

COG/09/2021/10.0 Question and Answer Session for Governors and members of the public

The Chairman thanked Governors for the questions they had submitted in advance of the meeting (Appendix 1) and noted there were no additional questions from members of the public.

The Chairman invited Non-Executive Directors to provide their insight into the questions to support the summary responses provided as part of the Chief Executive's presentation.

Question 1 from Dave Stott – HDFT Patient Safety

Laura Robson, Non-Executive Director and Chair of the Quality Committee thanked Dave Stott for his question. She had watched the BBC's Panorama programme 'Hospital Secrets Uncovered' on the back of the question submitted. She confirmed the Trust had not had any visits by the Royal College to her knowledge however, incidents requiring Royal College scrutiny would usually be due to an individual's practice. The Trust did regularly receive visits from external bodies to assess services and processes and provide accreditation status. She explained how Non-Executive Directors were closely involved in the process for investigating serious incidents, a key part of their designated responsibilities, and providing them with assurance on the process.

Laura Robson referred to the Chief Executive's detailed response in his presentation slides and confirmed that Non-Executive Directors and Quality Committee received a wide range of detail for scrutiny and, where appropriate, assurance.

In response to a further question around how the Trust decides when a serious incident requires investigation, Emma Nunez confirmed that each incident was assessed against a national serious incident framework. The Deputy Medical Director had recently presented the medical examiner role and serious incidents investigations to the Board and it was agreed to arrange a similar presentation for Governors in the autumn.

Action: Governor presentation on the Medical Examiner role and serious incident investigations.

Sarah Armstrong added a comment about serious incident action lists and the opportunity to gain softer intelligence through patient stories, listening events, safety visits etc.

The Chairman confirmed that the Board received a summary of all serious incidents at the private Board of Directors meetings.

Finally, Laura Robson offered Dave Stott the opportunity to discuss the matter further outside of the meeting.

Question 2 from Steve Treece – Recovery Plan

Maureen Taylor, Non-Executive Director and Chair of the Resource Committee thanked Steve Treece for his question. She confirmed that progress on activity and the recovery plan was reported monthly to the Resources Committee to provide assurance. The Committee would scrutinise the detailed reports, have robust discussions, and ask lots of questions. As with other sub-committees of the Board, a nominated Governor was invited to attend every Resources Committee.

Wallace Sampson commented on the evidence to support the information available to Non-Executive Directors. Following July Board, further analysis had been carried out and the IBR now provided standards information by minority groups including ethnicity and deprivation.

Question 3 from Steve Treece – Reconfiguration Plans and Progress

The Chairman asked the Chief Executive to respond to this question due to the level of operational detail.

The Chief Executive referred to his response provided within his presentation slides. The capital programme was managed through a capital group, monitored through Resources Committee with the detail and operational delivery managed through Senior Management Team (SMT). Some schemes were behind due to the complexity of organising the schemes in a way to minimise operational disruption.

Maureen Taylor confirmed that Resources Committee received regular updates on the capital programme, its progress and any impact on patient services. Post project evaluations were completed.

Sarah Armstrong confirmed she also received progress reports as a Non Executive Director for HIF and found it reassuring to be able to scrutinise at both Boards.

Looking at change from a service point of view, Laura Robson commented on a presentation given at Quality Committee about the continuity of carer scheme in maternity services. This demonstrated a new way of working for staff in maternity services across the community to benefit patients and she looked forward to receiving further updates on progress.

Question 4 from Steve Treece – Financial Regime

The Chairman confirmed that the Chief Executive's update included the annual planning process and the NHS's financial framework.

Maureen Taylor stated that the new NHS financial allocations were due to be announced in September for the second half of 2021/22; the allocation was expected to be around 3% lower resulting in a reduction of funding for the Trust of around £3.2m. Resources Committee would continue to monitor the financial plans.

Question 5 from the Council of Governors – Staff Resources, Capacity and Ability to Deliver Patient Services

In addition to the detail provided within the Chief Executive's presentation, Jeremy Cross referred to the Deloitte Report and the background and purpose of the People and Culture Committee, a sub-committee of the Board, of which he was the Chair. He talked about the

outcome of the Report and some of the recommendations and actions for the Committee to monitor including culture and staff health and wellbeing. The Committee was receiving information from the Director of Workforce and Organisational Development and her team and he was pleased that a nominated Governor attended the Committee meetings.

Andy Papworth commented on the importance of real time staff feedback on how it feels to work in the organisation received via the new Inpulse surveys and via Non-Executive Director's listening events rather than just relying on feedback received via the annual NHS Staff Survey. This timely feedback allowed the Trust to identify what was working well and what needs further improvement.

Sarah Armstrong confirmed that actions specific to HIF had been to HIF Board and HIF's equivalent to the Trust's People and Culture Committee. She confirmed it was useful for her to be engaged in both Trust and HIF Committees.

The Chairman clarified that a diverse range of colleagues contributed to the People and Culture Committee including the Freedom to Speak Up Guardians, Chairs of Staff Networks and representatives from Chaplaincy. The Committee had been in place for 15 months and Ian Barlow, Public Governor, was the current nominated Governor in attendance at Committee meetings. It was agreed that once the Committee Chair's reports had been provided to Board, they could be circulated to Governors in the weekly Governors' Bulletin.

Action: People and Culture Committee Chair's Report to be added to weekly Governors' Bulletin once they had been to Board.

Angela Wilkinson provided further information in relation to the quarterly Inpulse Surveys. The recent survey had now closed and feedback was being provided direct to line managers. These results would be routinely monitored through Directorate Boards and the People and Culture Committee. Staff would also be encouraged to complete the annual NHS Staff Survey which would be commencing in approximately four week's time.

In relation to vacancies and recruitment, Jeremy Cross referred to the detailed data within the Chief Executive's presentation and confirmed that the People and Culture Committee received regular data about staff turnover and reasons for people leaving the organisation. From recent results, the top reason for staff leaving was work life balance and he acknowledged the pressures for staff over the last couple of years.

He confirmed that the Resources Committee received regular reports on staffing forecasts and actions in place to address staff shortages including overtime, bank and agency staff. Maureen Taylor reiterated that Resources Committee were heavily focussed on staffing vacancies including any particular hot spot areas.

The Chairman referred to an issue round vacancies raised by Resources Committee which led the Committee to scrutinise 0-19 services in more detail. Wallace Sampson confirmed that Non-Executive Directors sought assurance at both sub-committees and Board around this important topic.

In response to Professor Stansfield's question about apprenticeship roles, Emma Nunez confirmed the Trust did offer apprenticeships and would be exploring this route in more detail.

On behalf of the Council of Governors, Clare Illingworth felt satisfied with the responses received from Non-Executive Directors and within the Chief Executive's presentation to the questions submitted, including question 6 from Will Fish about staff morale, health and wellbeing.

Resolved: *Responses to Governors' questions within the Chief Executive's presentation and following discussion with Non-Executive Directors was noted.*

COG/09/2021/11.0 Any other relevant business not included on the agenda

There were no other items of business raised at the meeting other than the Chairman informing the Council of Governors of her intention to retire no later than 31 March 2022.

COG/09/2021/11.1 Appointment of Chairman

Laura Robson, Senior Independent Director, thanked the Chairman for everything she had done and wished her all the best for a happy retirement.

Paper 11.0 had been circulated prior to the meeting and taken as read. Laura Robson confirmed it was now important to organise the recruitment of a new Chairman and that the appointment would be made by the Council of Governors with support from herself as SID, the Chief Executive, the Director of Workforce and Organisational Development and the Company Secretary.

A meeting of the the Remuneration, Nominations and Conduct Committee, acting on behalf of the Council of Governors, would now be convened to progress the recruitment of a new Chairman.

Doug Masterton thanked Laura Robson for her paper and commented on Governors being an integral part of the process.

Tony Doveston had been involved in the process to appointment Angela Schofield, the current Chairman, and provided assurance that fellow Governors would be fully involved throughout the process.

The Company Secretary reiterated that it was the role and responsibility of the Council of Governors to appoint or remove the Chairman and the other Non-Executive Directors, as set out in the Trust's Constitution – 12.1.3.

Resolved: *The Senior Independent Director's report was noted and it was agreed to delegate decision-making concerning the recruitment process of the new Chairman to the Remuneration, Nominations and Conduct Committee.*

COG/09/2021/12.0 Evaluation of the Meeting

The updates and discussion had been extremely informative and beneficial.

COG/09/2021/13.0 Date and Time of Next Meeting

The next meeting would take place on Monday, 6 December 2021 with venue and timings to be confirmed.

The meeting closed at 4.25pm.

Appendix 1

Council of Governors Meeting 6 September 2021

Governor questions

Topics Raised:

- **HDFT Patient Safety**
- **Recovery Plan**
- **Reconfiguration Plans and Progress**
- **Financial Regime**
- **Staff Resources, Capacity and Ability to Deliver Patient Services**
- **Staff Morale, Health and Wellbeing**

HDFT: Patient Safety – Dave Stott

Context: A few months ago, the BBC's Panorama programme "Hospital Secrets Uncovered", identified a number of worrying patient safety incidents in some hospital trusts in England. Examples were provided of medical treatment that had led to patient harm or death. Some trusts had sought to hide their mistakes and deny or deflect blame. Viewers told about the responsibility placed upon hospital trusts regarding: honesty and transparency over clinical mistakes leading to patient harm; the learning of lessons from incidents; and the need to ensure such incidents are never repeated. Medical royal colleges were identified as a particular source of independent external help for Trusts who wished to better understand how incidents happened, were not repeated and how their clinical practice could be further improved. Above all, viewers were reminded of the duty of candour placed upon trusts and transparency with their communities on all key patient safety issues.

Questions: How assured therefore are Non-Executive Directors (NED's), particularly those who have attended the Quality Committee, that over the last 5 years, there has been clear, consistent evidence:

- (i) that some incidents leading to patient harm could have merited or benefitted from external independent help, possibly from a medical royal college?
- (ii) any external bodies, such as medical royal colleges were approached for help?
- (iii) any independent external reviews were undertaken of Trust practice ?
- (iv) any 'summary findings' from such reviews were made public and easily accessible to the communities served by this Trust?
- (v) any medical royal college or other external reviews were forwarded by the Trust- in a timely fashion – to the regulator, the Care Quality Commission?
- (vi) the Trust has learnt lessons from all its patient safety incidents; where appropriate sought external help to improve clinical practice and; that such practice has actually led to fewer, less serious incidents and improved practice?

Recovery Plan – Steve Treece

Can Governors please be provided with an update on progress in the Trust's recovery plan; the key risks identified to patient safety arising from this plan, for example, in the event of

central pressures to meet defined delivery targets, and mitigation strategies; and can NEDs please advise how they have to date and will in future obtain assurance on the management of these risks?

Reconfiguration plans and progress – Steve Treece

Can Governors please be provided with a summary of proposed plans for the reconfiguration of the Trust's operational activities and progress to date in delivering these plans? Can NEDs please advise how they will obtain assurance on the effective delivery of these plans, resulting improvements in the delivery of patient services, and the minimisation of disruption to these services during the implementation of the reconfiguration plans?

Financial Regime – Steve Treece

Can Governors please be provided with information on the revised financial regime which the Trust will be subject to from September and the key risks and issues anticipated resulting from the new financial regime? Can NEDs please advise how they will obtain assurance on how the Trust will implement the new regime and manage the resulting risks and issues?

Staff Resources, Capacity and Ability to deliver Patient Services – Collective question

Please can Governors be provided with an overview of the following by staff skill/ specialism and service provided:

1. Actual Staff numbers comparing 2021 with 2019
2. Budget Headcount & underlying vacancy levels comparing 2021 with 2019 to provide a “pre Covid” level and rate of planned, elective and ED services
3. Churn rate from 2019 to 2021

Can NED's provide Governors with clarity and assurance on the following:

1. What are the reasons behind the levels of vacancy and churn shown above
2. What actions are being taken for the long and short term to recruit and retain staff
3. How effective are these initiatives with justifications
4. Which Trust services at which Hospital / Community centre are vulnerable / at risk due to lack of skills or staff in the long and short term
5. What is being done to resolve this issue and ensure patient services are unaffected and safe.

Staff morale, health and wellbeing – Will Fish

Over the last couple of years, the trust has received an abundance of staff and patient feedback both via official and informal methods, including the Deloitte report, which should have then spawned a number of initiatives. These initiatives (cultural, morale, staffing and well-being) would be widespread and impact various aspects our service delivery thus under the purview of multiple committees. What assurance can the non-execs offer that the initiatives are being delivered and the expected outcomes are being achieved?

Therefore, we ask if the respective NEDs could compile a periodic report/s of these initiatives to provide assurance that staff and patient feedback is actioned, used to improve services and allocated resources are delivering against expected outcomes or critical success factors.

Annual Members' Meeting
held on Monday, 6 September 2021 at 5.30pm
The Pavilions of Harrogate, Great Yorkshire Showground, Harrogate, HG2 8NZ

Present

Angela Schofield, Chairman
Jackie Andrews, Medical Director
Claire Arditto, General Manager & Trust Allied Health Professional Lead, Planned and Surgical Care Directorate
Sarah Armstrong, Non-Executive Director
Beth Barron, Operational Director, Planned and Surgical Care Directorate
Mark Chamberlain, Chairman, Harrogate Integrated Facilities (HIF)
Angie Colvin, Corporate Affairs and Membership Manager (minutes)
Donald Coverdale, Public Governor
Tony Doveston, Public Governor
Sue Eddleston, Public Governor
Angie Gillett, Managing Director, HIF
Clare Illingworth, Stakeholder Governor & Lead Governor
Andrew Jackson, Staff Governor
Samantha James, Public Governor
Suzanne Lamb, Head of Children's Safeguarding/Head of Nursing
Natalie Lyth, Clinical Director, Community and Children's Directorate
Kathy McClune, Staff Governor
Doug Masterton, Public Governor
Jordan McKie, Deputy Director of Finance
Russell Nightingale, Chief Operating Officer
Emma Nunez, Executive Director of Nursing, Midwifery and Allied Health Professionals
Andy Papworth, Non-Executive Director
Laura Robson, Non-Executive Director
Steve Russell, Chief Executive
Wallace Sampson, Non-Executive Director
Kate Southgate, Company Secretary
Prof. Karen Stansfield, Stakeholder Governor
Richard Stiff, Non-Executive Director
Dave Stott, Public Governor
Maureen Taylor Non-Executive Director
Steve Treece, Public Governor
Angela Wilkinson, Director of Workforce and Organisational Development

Five members of staff

Seventeen members of the public

Apologies

Ian Barlow, Public Governor
John Batt, Public Governor
Jonathan Coulter, Deputy Chief Executive and Director of Finance
Jeremy Cross, Non-Executive Director
Martin Dennys, Public Governor
Mary Kelly, Public Governor
Dr Loveena Kunwar, Staff Governor

Cllr John Mann, Stakeholder Governor

Heather Stuart, Staff Governor

AMM/09/2021/1.0 Welcome and introductions

The Chairman, Angela Schofield, welcomed everyone to the Annual Members' Meeting and was delighted that the meeting could be held in person, albeit restricted in numbers due to social distancing. Infection, prevention and control guidelines were being followed and she explained that the meeting was being filmed live on YouTube; a recording would be accessible on the Trust's website.

Angela expressed the importance of the Annual Members' Meeting, a formal report to members of the Trusts performance in the previous financial year 2020/21. She summarised the format of the meeting, which included presentations from colleagues on three elements of the Trust's services followed by a presentation from the Chief Executive, and Deputy Director of Finance on the Annual Report and Accounts. The final presentation would be from the Lead Governor on the work of the Council of Governors.

A summary of the Annual Report was available at the meeting and on the Trust website.

Angela reflected on the restrictions due to COVID-19 over the past year since the last Annual Members Meeting. She talked about the Trust's focus on restoring services and the considerable implications over the year for staff and patients. She highlighted the vaccination programme and the friendly, caring and professional service provided to staff receiving their vaccinations. The wellbeing of colleagues was the biggest priority for the Trust and the focus was to continue to listen to staff in order to provide the best support.

Angela confirmed that the Trust's Executive team had continued to lead a major piece of work, involving all members of staff who wanted to engage with the focus of redefining our values and behaviours to uphold the Trust's culture. This piece of work was called 'At Our Best' and the new 'KITE' logo had been launched to encapsulate the Trust's values that colleagues had identified as the most important – kindness, integrity, teamwork and equality.

The Chairman ended her welcome with some thanks - to the team who had organised the Annual Members Meeting, to the huge team of volunteers, and to the many people and organisations who helped to raise funds. She thanked the Governors, who give their time freely and provided support and oversight to the Board and, in particular, she paid tribute to Clare Illingworth, Lead Governor, who would be presenting later in the meeting. Angela continued by thanking the Board of Directors who provided strong and effective leadership of the Trust.

In the last year Jill Foster, Chief Nurse, had left the Board and Angela thanked her for all that she had achieved. New Executive Directors who had joined the Board recently were Emma Nunez, Executive Director of Nursing, Midwifery and Allied Health Professionals and Russell Nightingale, Chief Operating Officer.

Finally, the Chairman thanked the members of the Trust for their continued encouragement and support and the 4,800 colleagues who make up HDFT and HIF.

AMM/09/2021/2.0 Minutes of the previous Annual Members' Meeting held on 29 September 2020

The minutes of the previous Annual Members' Meeting held on 29 September 2020 had been approved by the Council of Governors and would be made available on the Trust's website.

AMM/09/2021/3.0 Presentation – School nursing and health visiting services during the pandemic

The Chairman introduced Suzanne Lamb, Head of Children's Safeguarding and Head of Nursing.

Suzanne summarised the three areas she would be highlighting during her presentation on school nursing and health visiting services during the pandemic.

She started by talking about the early days of the pandemic, describing the level of concern and focus on staff wellbeing. The services she was describing were provided in community settings rather than in the hospital and people were nervous about anyone going in to their homes. The Trust usually worked closely with other partners, including social care, and it became apparent of the need for 0-19 services to remain in contact with children and families at a time when they could feel vulnerable. She reflected on the lack of facts at the beginning of the pandemic and the importance in reviewing service governance structures to be able to provide direction to teams quickly and efficiently. The team were reliant on IT to ensure staff could keep in touch; work-bases were now closed and people were working from home. She paid tribute to the IT team who enabled the service to run as effectively as possible. She highlighted how well colleagues worked together. Communication was also vital and a business continuity plan was important to ensure staff knew what was happening. Face to face contacts remained necessary and, whilst midwifery colleagues were not making visits, new mums still received a visit from a health visitor.

Suzanne reflected on managing personal and protective equipment (PPE) for staff across the North East and she acknowledged other Trusts who had supported the service with provision of PPE. Clinical Advisory Groups were set up so clinical decisions could be made quickly and virtual team meetings were progressing at pace.

The Trust was asked to support other services in other areas and staff were redeployed. Staff who usually provided screening in schools started working in public health as schools were closed.

The focus remained on staff delivering front line services, carrying out both virtual and face to face visits with risk assessments. Communication was of utmost importance and staff received regular briefings, newsletters and timely decisions from the Clinical Advisory Groups.

Funding was received to provide a new emotional, health and resilient team for children and young people in Middlesbrough.

Moving on to Covid recovery, Suzanne described the unfortunate after effects of lockdown including an alarming increase in injuries to babies under 12 months, similar to the national increase. There was an increase in domestic abuse and neglect on children, and an increase in child sexual exploitation. Whilst safeguarding remained a priority, this meant a significant amount of change in the work of the 0-19 teams resulting in an increase in strategy meetings, child protection conferences and an increase in writing reports. Staff were now focussed on

safeguarding and moving away from early intervention and prevention. The roles within the service have been reviewed and there has been an increase in recruitment for staff to work in safeguarding.

Suzanne moved on to talk about recovery. There were still concerns about safeguarding and a desire to be able to return the focus on early intervention and prevention. She confirmed the service was continuing to grow with a new contract in Northumberland and paid tribute to a positive 0-19 team.

The Chairman thanked Suzanne for an informative and interesting presentation. She welcomed Beth Barron, Operational Director, and Claire Arditto, General Manager and Trust Allied Health Professional Strategic Lead within the Planned and Surgical Care Directorate to present on transforming outpatient services and recovering planned care services.

AMM/09/2021/4.0 Presentation – Outpatient Recovery and Transformation update

Claire Arditto referred to her presentation slides, which would be made available on the Trust's website.

She described the need for familiar hospital services to change dramatically due to the pandemic. Outpatient services were impacted because of a number of factors including social distancing, clinically vulnerable patients needing to shield and cancellation of non-elective surgery affecting access to outpatient clinics, diagnostics, endoscopy and elective surgery. In terms of outpatient services there were many opportunities to consider including utilising innovation and digital technology.

There were important national drivers to consider in addition to Covid-19, including the NHS Long Term Plan, NHS Operational Guidance 21/22 and the Elective Recovery Fund. Trusts were set targets by the NHS to respond quickly to deliver a level of activity as in 2019/20 and these included important elements such as identifying and addressing health inequalities. There were also opportunities to learn from, and work with our partners across Humber Coast and Vale Integrated Care System (ICS).

Moving on to the Trust's vision for 2021 and onwards there was a number of areas to focus on and Claire talked about hospital access for patients. She referred to patients attending hospital only when necessary and the alternative options available including video conferencing technology. There was still work to be done on the digital strategy and a patient portal was currently being piloted.

Virtual appointments were set up very quickly and this required clinicians being trained. Patients who were able to access this service were encouraged and supported to do so and this continues in addition to a telephone service if preferred.

A second element of focus was patient initiated follow-up where patients with long-term conditions being given open access to a clinician and/or specialist nurse without having to have a follow-up appointment. The NHS was rolling this system out much wider to empower patients to make decisions about their own care and to contact services in a different way. Harrogate Health Hub was a way in which education can be delivered to help people manage their own conditions.

The third element was Advice and Guidance to GPs, a means of contacting clinicians without the patient coming in to the hospital for an appointment. This had always been available but

now had more focus and the Trust was aiming to have all specialities included with a 48-hour response target.

Claire summarised the transformation update confirming the aim to deliver services to patients outside the hospital setting. There would be three specialities identified for transforming outpatient pathways, a review of outpatient spaces including a virtual hub for clinicians to engage with patients, and the aim to reduce paper by streamlining electronic records and supporting clinicians to write letters through speech recognition technology.

Beth Barron continued the presentation moving on to elective surgery and endoscopy. The Trust had undertaken a huge piece of work with clinicians, to assess every patient on the elective waiting list and this continued. The green pathways were continuously being reviewed to maintain social distancing and a safe environment, as well as managing an increase in capacity. The Trust continued to work with independent providers to create additional capacity. Where possible, the Trust was also offering additional capacity to other Trusts such as York and Leeds.

The Chairman thanked Claire Arditto and Beth Barron for their detailed presentation and hoped the audience found the information useful as services continue to evolve.

The Chairman welcomed Angie Gillett, Managing Director, and Mark Chamberlain, Chairman of Harrogate Integrated Facilities (HIF) to present the contribution of HIF to managing a pandemic.

AMM/09/2021/5.0 Presentation – The contribution of Harrogate Integrated Facilities to managing a pandemic

Mark Chamberlain commenced the presentation by introducing HIF. The company was established in 2017 and actively started business in 2018. It was owned by the Trust and the majority of its work was for the Trust. HIF employed 350 members of staff and the budget was £18m per year. HIF undertakes estate management and facilities management (porters, catering, domestic staff, sterile services, medical equipment library and the general office).

Angie Gillett talked about how HIF responded to the pandemic. She paid tribute to the Trust and HIF staff who came together, found solutions, and went the extra mile including taking on different roles and responsibilities.

Some of the key areas of focus for HIF included reorganising the site into zones. There were 23 projects undertaken within a 12-month period and Angie was extremely proud to be part of the team who delivered such an outstanding task. There was a need for extra oxygen, the refurbishment of the IT department and, as described earlier, the hospital was divided into zones. Members of staff within HIF supported the work on the Nightingale Hospital and some were ready to be re-deployed if necessary. Medical equipment supplies including mattresses and ventilators increased and the logistics for this were complicated. The catering staff, supported by volunteers and the Planning Team, delivered new initiatives for meal ordering and delivering meals to staff. The domestic staff were heavily involved with the Trust's Infection, Prevention and Control Team to enhance the deep cleaning team and staff were on standby 24 hours a day, seven days a week. Towards Christmas, the team supported an initiative delivering hampers to some service users who lived alone and the 0-19 Service in delivering toys and presents to children across the Trust's footprint.

Moving on to recovery, Angie confirmed the site was reorganised again and the focus continued on delivering a large capital programme. In relation to staff health and wellbeing, HIF was looking to improve areas for staff to relax across the site including courtyard areas and a vegetable garden. The Sterile Services team were involved in ensuring instruments were readily available again and assessing what equipment needs were going forward. HIF was reviewing what had gone well and not so well during the pandemic.

Mark Chamberlain talked about looking ahead; he confirmed the priority would continue to be people to ensure an engaged and motivated workforce. Another priority would be about learning by trying different things and listening. Thirdly, there would be a programme of improvements across the hospital site and other sites across the Trust's geography over the coming year. HIF would also continue to take a lead on the environmental agenda and Mark was pleased that a grant of £14m from the Government had been received to improve the carbon footprint on the hospital site, which included solar panels and a ground source heating pump.

On a final point, Mark recognised a member of HIF portering staff who was one of the seven people in the NHS to have his hands cast to create a celebratory badge – HIF was delighted to have one of 'their own' recognised as part of this initiative across the NHS.

The Chairman thanked Angie Gillett and Mark Chamberlain for their update on HIF. She introduced the Chief Executive, Steve Russell, and Deputy Director of Finance, Jordan McKie, to present the formal Annual Report and Accounts for 2020/21.

AMM/09/2021/6.0 Presentation – Annual Report and Accounts 2020/21 and plans

Steve Russell formally presented the Trust's Annual Report for 2020/21 and informed attendees that copies would be available on the Trust's website, along with the summarised version. He highlighted some of the achievements set out in the Annual Report.

He talked about the past year being a year like no other during his 24 years in the NHS, both personally and professionally. He paid tribute to the 4,800 members of staff at the Trust and HIF and he read the poem that could be found on the front of the Annual Summary of 2020/21 – 'You're incredible to me' by Leah Knight Whites, to convey the sentiment towards every colleague.

He referred to the extraordinary year and acknowledged the support offered to staff by members of the public and the HR team who worked quickly to provide wellbeing support.

Steve spoke about many achievements during the period 1 April 2020 to 31 March 2021. He highlighted a number of facts and figures within his presentation including the Trust's response to the pandemic. The first patient with COVID-19 was admitted to Harrogate District Hospital on 15 March 2020 and within the year, the Trust treated just over 760 patients (currently this stood at close to 1,000). Around 100 of those patients were treated in critical care and 600 patients recovered and went home. Tragically, 160 patients and two colleagues lost their life. Teams had changed many times over and staff had adapted to working from home and in different circumstances whilst continuing to offer care to patients. In the year, there was around 80,000 virtual contacts between clinical colleagues and patients and he recognised the work of community teams who continued to visit people at home (around 120,000 visits across the year).

The Trust's labs had processed just short of 40,000 COVID swabs during that time and the PPE Team had distributed over 29 million items of protective equipment.

As stated in an earlier presentation, the Trust provided 0-19 services across North Yorkshire and the North East in addition to hospital and community services. School nurses, health visitors and early years practitioners had supported over 100,000 families with over 200,000 contacts and, as described by Suzanne Lamb, lockdown had exposed children and families to greater risks of domestic violence and neglect. Steve echoed Suzanne's comments around safeguarding and recognised the incredibly challenging year that staff in those teams had experienced.

Whilst Covid-19 dominated the year, the Trust continued to provide many services and treated many patients with other illnesses. Steve highlighted more detail from the Annual Summary including the number of babies born (1,700), the investment in the 'ARCHS' service (a dedicated team who support just over 4,500 patients to be discharged and looked after in their own homes), and the continuation of urgent and cancer surgery including over 1,600 cancer treatments.

He was pleased to report that 'Active Against Cancer', a Harrogate-based exercise and activity scheme for NHS cancer patients, had won a Parliamentary award coming second to the team who had developed the COVID vaccine.

The Trust started vaccinating colleagues in January and expanded this service to vaccinate other health and social care colleagues. Within 25 days, 65 people supported the vaccine hub and the first vaccination was given to over 7,000 people. By the end of the programme just short of 90% of Trust and HIF colleagues were double vaccinated. Steve gave a personal thank you to three colleagues in particular who had worked tirelessly to lead the effective running of the vaccination centre - Kate Woodrow, Chief Pharmacist, Lesley Danby, Matron, and Emma Oxtoby, Service Improvement Facilitator.

Steve moved on to talk about the values and behaviours work that the Chairman eluded to at the beginning of the meeting. He referred to the hundreds of roles across HDFT and HIF and staff from over 60 nationalities who brought different experiences and backgrounds to both organisations.

He recognised the contribution of partners, including public health and social care colleagues, and many other departments within local government.

Looking ahead, Steve spoke about five major priorities including:

- Recovering planned care services
- Supporting 0-19 services.
- Focussing on the health and wellbeing of colleagues.
- Focussing on the fundamentals of care in all services.
- The culture programme 'At Our Best'.

He finished his presentation with an enormous thank you to all Trust and HIF colleagues and partners who continue to provide support.

Jordan McKie, Deputy Director of Finance, delivered a presentation, which detailed the financial report and Annual Accounts for 2020/21. He provided information in relation to the end of year accounts, which included detail on income and expenditure, and he confirmed that

the Trust achieved its financial target with a small surplus of £41k in spite of all the challenges described in previous presentations.

Jordan drew out items of note in relation to financial performance, including the £16m of Covid support funding for additional staffing, vaccination programme, PPE, testing equipment and consumables, and health and wellbeing initiatives for colleagues. There was a reduction in income of around £4.6m from schemes including private patient and car parking, however overall the support during the pandemic was around £26m. The cash balance was high as a result of clearing old debts and receiving advanced payments; this resulted in the Trust paying suppliers much quicker over the year.

Jordan spoke about the capital investment programme for 2020/21, which included some of the schemes highlighted in earlier presentations.

In terms of the overall accounts, External Audit had issued an unqualified opinion that the accounts gave a true and fair view of the financial performance and position of the Trust. They also provide assurance that the Trust was providing value for money for taxpayers and that they were satisfied that the Annual Report was consistent with the detailed financial accounts.

Looking ahead to 2021/22, Jordan summarised the revised financial regime confirming the Trust was working with partners in developing a plan. There was a £32m capital programme for the forthcoming financial year compared to £16m last year. There was work to do regarding the pathway back to the NHS Long Term Plan, to continue the focus on productivity and efficiency, and in relation to elective care recovery.

The Chairman thanked both Steve and Jordan for their detailed presentations. She introduced Clare Illingworth, Lead Governor, to provide the Council of Governors' Report.

AMM/09/2021/7.0 Presentation – Council of Governors – Lead Governors' Report

Clare Illingworth, Lead Governor, reported on the changes to the Council of Governors during 2020/21, which included the results of the Governor Elections held during the summer. Governor elections during the last financial year were postponed due to Covid-19.

Clare highlighted the roles and responsibilities that Governors were required to carry out. During 2020/21 Governors were active in their role approving the re-appointment of the Chairman and three Non-Executive Directors, Richard Stiff, Laura Robson and Maureen Taylor and many other activities in representing the interests of the members and the general public.

Clare paid tribute to the Governors who gave their time freely as volunteers and for showing their commitment to the role.

The Chairman thanked Clare and everyone who had provided such interesting and informative presentations. She moved to the next item on the agenda, the question and answer session.

AMM/09/2021/8.0 Questions and Answers

The Chairman confirmed that members were invited to submit questions in advance of the meeting.

1. A member of public submitted a question about having hearing aid batteries sent to patients as well as being able to self-collect.

In response, Russell Nightingale, Chief Operating Officer, confirmed that the Audiology service at Harrogate was networked with York and Scarborough and at the end of 2020 a decision was taken due to Covid-19 to start posting a year's worth of batteries for hearing aids to people who needed them. Russell was pleased to report that in the next 24 months the NHS would be replacing batteries for rechargeable hearing aids, which would be better for the environment and save on costs. The feedback on the new system has received positive feedback generally.

2. A member of public had queried what physical and mental health care was available to Veterans and asked how many Veterans the Trust dealt with in the year.

In response, Jackie Andrews, Medical Director, referred to the recent issues coming out of Afghanistan on the news and acknowledged the amazing work that the armed forces do. She confirmed the Trust was proud to support the armed forces community. The Armed Forces Covenant, enforced by law, stated that members of the armed forces who required health care as part of their service commitment had priority access. Jackie confirmed this was enshrined in the Trust's patient access policy. All GPs, or anyone referring someone into our service, were able to identify if that person was a Veteran and then we would signpost them to the appropriate service. More recently, there had been development of mental health additional support for Veterans and Trust clinicians had been made aware of this. Work was underway with an organisation called the Veterans Covenant Healthcare Alliance to support the Trust in becoming an accredited NHS Trust to support Veterans. Jackie confirmed the Trust was keen for anyone who was interested, or had experience of being in the armed forces, to get in touch with the membership team if they would like to be part of a group working on the accreditation.

3. A member of public asked how many GPs were currently working within the Trust's catchment area and how many of these were working part-time.

In response, Jackie Andrews, Medical Director confirmed the Trust did not employ GPs and therefore did not have access to this information. She did however confirm the member could be signposted to the local Clinical Commissioning Group who would be able to provide this information.

4. A member of public asked: 'A couple of years ago, Deloitte was commissioned to investigate alleged bullying within HDFT and its subsidiary, HIF. In July of this year, the Stray Ferret reported that an anonymous email criticizing the HDFT Chief Executive Officer, Steve Russell, was circulated to the HDFT Non-Executive Directors including the Chairman, the Care Quality Commission and the local media. I understand the Trust Chairman investigated the alleged allegations. My question is why did the Chairman undertake this investigation and not a third party like Deloitte? How could she be assured that members of staff would speak to her when the email had alleged a 'fear of reprisal?'

In response, Laura Robson, Non-Executive Director and Senior Independent Director clarified that the question was incorrect, as the Trust Chairman did not undertake the investigation into the anonymous email. The Non-Executive Directors carried out the investigation. To give some context, Laura confirmed that an anonymous email was

received by the Non Executive Directors and some of the Governors. An investigation was undertaken by the Trust's Non Executive directors. The investigation was now complete and had been discussed with the Board and Council of Governors. Recommendations had been made and these would be actioned in due course.

5. A member of the public submitted the following question:

'I understand the rainbow pedestrian crossings and rainbow tunnel on the Harrogate District Hospital site were paid for out of charitable funds and were commissioned to 'send a message that the hospital - and the Trust as a whole - is an open, inclusive and non-judgemental place for LGBTQ+ patients, visitors and staff'. My question is whether the Trust has measured (for example quantitatively or qualitatively) if the crossings and tunnel have met this desired aim and therefore the public who contribute to the charitable funds can be assured that it was an appropriate use of the funds? If no assessment has been made, then please can this be done and reported back to Trust members as soon as possible?

In response, Angela Wilkinson, Director of Workforce and Organisation Development provided some background to the rainbow tunnel. During the pandemic, the rainbow symbol had become a sign showing support for NHS staff as well as being widely known as a symbol for the LGBT+ community. The rainbow crossings were also provided as an expression of support. These were important visual signs to show support for the LGBT+ community and all colleagues across the Trust and HIF.

Angela expressed the difficulty in measuring staff experience based on the tunnel or crossings. She did however confirm she was responsible for ensuring the Trust had a range of actions and interventions in place so the organisation was the best place to work and everyone had the best experience. Visual symbols were important to this work and the Trust had embedded a number of other actions to improve the experience for all staff; these actions included reviewing the appraisal and recruitment processes and encouraging health and wellbeing conversations. Listening and learning from colleagues through the annual NHS Staff Survey and new quarterly Impulse Surveys, were important ways in which the Trust could measure staff experience. Angela clarified the importance of everyone being able to come to work and be themselves and she confirmed the Trust continued to focus on a number of equality, diversity and inclusion (EDI) initiatives.

In relation to the funding source, the total cost was less than £5k for the crossings. The Chairman confirmed the funding source was not Harrogate Hospital and Community Charity.

AMM/09/2021/9.0 Closing address

Angela Schofield, the Chairman formally thanked everyone for attending the meeting.

There being no further business, the meeting was formally closed.

Paper 4.0

HDFT Council of Governors' Meeting Action Log – December 2021

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	Subject	Action Description	Director/Manager Responsible	Date due at CoG meeting or date when completion/ progress update is required	Comments	Status - completed is defined as confirmation that the action is completed as described
COG/06/2021/8.0	8 June 2021	Acute stroke services	Trust level outcome data was yet to be published	Medical Director	When available	06.09.21 – no further update at this time. Item to remain open.	Open
COG/09/2021/10.0	6 September 2021	Questions & Answers	A presentation to Governors relating to Serious Incident investigations and Medical Examiner role to be arranged	Director of Nursing/Corporate Affairs & Membership Manager	December 2021	Medical examiner unavailable for this meeting, arranging for March 2022 meeting	Open

HDFT Council of Governor Meeting Closed Action Log

COG/09/2020/4.1.2	29-09-2020	Ophthalmology Services	Agreed the Interim Chief Operating Officer would investigate provision of an Ophthalmology mobile testing facility and provide an update to the next meeting	Chief Operating Officer	14 December 2020 3 March 2021 8 June 2021	Update provided	Closed
COG/03/2021/5.7	03-03-2021	External Audit Process	Governors to confirm to Angie Colvin if they are interested in participating in the external auditor process	Interim Company Secretary / Corporate Affairs and Membership Manager	8 June 2021	Update provided	Closed
COG/06/2021/8.0	8 June 2021	Update on Deloitte Report	Further update would be provided after People and Culture Committee had received a full update (next meeting – 12 July 2021)	Chief Executive	6 September 2021	Update provided	Closed
COG/06/2021/7.0	8 June 2021	Major quality priority for 2021/22	Update on quality priority based work to be provided at the next Council of Governors meeting	Chief Executive	6 September 2021	Update provided	Closed
COG/09/2021/10.0	6 Sept 2021	Questions & Answers	Chair's report from People & Culture Committee to be added to Bulletin once through Board	Corporate Affairs & Membership Manager	December 2021	September reports circulated, ongoing after each Board.	Closed

COUNCIL OF GOVERNORS (PUBLIC)**6th December 2021****Recruitment Process for the Chairman of the Trust**

Agenda item number:		8.0
Presented for:	Discussion and Information	
Report of:	Senior Independent Director	
Author (s):	Company Secretary	
Report History:	None	
Publication Under Freedom of Information Act:	This paper can be made available upon request under the Freedom of Information Act 2000	
Links to Trust's Objectives		
To deliver high quality care		✓
To work with partners to deliver integrated care		✓
To ensure clinical and financial sustainability		✓

Recommendation:
The Committee is asked to: <ol style="list-style-type: none"> Note the progress made towards the appointment of the new Trust Chairman

Council of Governors (Public)
6th December 2021

Appointment of the Chairman
Report of the Senior Independent Director

Background

1. The Chairman of the Trust, Angela Schofield, has indicated her intention to retire by no later than the end of March 2022.
2. The Council of Governors will therefore need to appoint a Chairman to succeed Angela Schofield. The appointment of the Chairman is a statutory role for the Governors of the Trust, and one which is delegated and managed by the Remuneration, Nominations and Conduct Committee (RNCC) on behalf of the Council.
3. The RNCC and Council will be supported by the Senior Independent Director, the Chief Executive, the Director of Workforce and Organisational Development and the Company Secretary.
4. The RNCC's recommended appointment will be subject to the approval of the full Council of Governors.

Recruitment Process

5. The RNCC considered the approach to the recruitment campaign for the Chairman at its meeting on the 6th October and 22nd November 2021. It was agreed that Gatenby Sanderson would be appointed as executive search firm to support with a proactive search to identify and encourage candidates to apply, as well as to support with the assessment and selection process.
6. The RNCC governors, non-RNCC governors and Non-Executive Directors have all met separately with Gatenby Sanderson to provide views on the skills and characteristics essential to the role.
7. Gatenby Sanderson have been in discussions with a range of individuals to promote the position as well as it being advertised in the National and Local Press, social media and LinkedIn.
8. The advert closes on Thursday 2nd December 2021.
9. Longlisting will take place on 9th December 2021.
10. Shortlisting will take place on 16th December 2021.
11. The Stakeholder focus group forums and discussions will take place on 11th January 2022. Details of which are being finalised with the SID and RNCC governors.
12. Final Interviews will take place on 13th January 2022. Details of which are being finalised with the SID and RNCC governors.

Recommendation

It is recommended that the Council of Governors note the progress made towards the appointment of a new Chairman.

Laura Robson
Senior Independent Director

COUNCIL OF GOVERNORS
GOVERNOR DEVELOPMENT AND MEMBERSHIP ENGAGEMENT COMMITTEE
APPROVED MINUTES OF MEETING HELD ON 16 JUNE 2021
VIA MS TEAMS

Present: Clare Illingworth, Chair of meeting and Lead Governor
 Ian Barlow, Public Governor
 Angie Colvin, Corporate Affairs and Membership Manager
 Tony Doveston, Public Governor
 Lynn Hughes, Interim Company Secretary
 Samantha James, Public Governor
 Doug Masterton, Public Governor
 Angela Schofield, Trust Chairman
 Steve Treece, Public Governor

Abiola Oyefeso, Customer Experience Manager, Civica (for item 20)

OPENING ITEMS:	
GDMEC/06/16/1.0	<p>Welcome and Apologies for Absence</p> <p>Clare Illingworth welcomed everyone to the meeting. Apologies were noted from Kathy McClune, Sue Eddleston and Paul Widdowfield.</p>
GDMEC/06/16/2.0	<p>Membership Database</p> <p>Abiola Oyefeso, Customer Experience Manager from Civica, attended the meeting to present the new membership database. Her presentation included details about the membership data, data cleansing, demographics, membership communications, reports, governor zone, and events management.</p> <p>Helpdesk support is provided as part of the membership database contract.</p> <p>Questions:</p> <p>Samantha James asked about the options for title and gender. Abiola Oyefeso confirmed this information could be determined by the Trust.</p> <p>Doug Masterton asked if there was an option for members to amend their personal details direct in addition to the Trust administrator. Abiola Oyefeso confirmed some fields could be amended by selecting alternative options from a drop down box. The Trust could review the fields and request additional options as required.</p> <p>Angela Schofield asked if all the fields had been identified and if they were relevant to our membership. Lynn Hughes confirmed the database had been set up with all fields and these could be amended going forward as requested. Abiola Oyefeso confirmed that all fields could be customised to the Trust's requirements.</p> <p>Steve Treece and Doug Masterton asked if members would receive an automatic notification if any changes were made to their records, e.g. as security if someone else made any changes.</p>

9.1

	<p>Abiola Oyefeso confirmed there wouldn't be an automatic notification. The Members' Portal would allow members to log-in and view their data/amend their data. There would be an audit log for every interaction to confirm who, when and how the record was changed.</p> <p>Steve Treece asked where the data was stored. Abiola Oyefeso confirmed the data was stored securely in a site in Watford as per the contract. The Trust would be responsible for who had access to the database.</p> <p>Lynn Hughes reassured Governors that robust governance arrangements had been followed through the procurement process for the membership database. Ian Barlow commented that he would feel more reassured if members received an automatic notification if their personal details were amended.</p> <p>Abiola Oyefeso suggested that security protocols could be shared with Governors and/or the security team could provide an additional presentation if requested.</p> <p>Clare Illingworth asked if we could filter members who had previously expressed an interest in becoming a Governor. Abiola Oyefeso confirmed it was possible to search this field and then communicate with these members direct.</p> <p>Tony Doveston asked how deceased members would be identified. Abiola Oyefeso confirmed that monthly bereavement checks would be carried out by accessing a national database.</p> <p>Clare Illingworth asked if there were different levels of access including Governors access. Abiola Oyefeso confirmed there were various levels of access available including view, search and manual entry.</p> <p>Doug Masterton asked if data was backed up regularly. Abiola Oyefeso confirmed the data was backed up every day.</p> <p>Tony Doveston asked about the database for volunteers. Angela Schofield confirmed the Trust already used a volunteer database however it did not have all the search facilities available as in the membership database.</p> <p>There were no further questions.</p> <p>On behalf of the committee, Clare Illingworth thanked Abiola Oyefeso for her time and for providing such an informative presentation.</p>
GDMEC/06/16/3.0	<p>Declarations of Interest</p> <p>There were no new declarations of interest, nor conflicts of interest declared.</p>
GDMEC/06/16/4.0	<p>Minutes of Last Meeting</p> <p>The minutes of the meeting held on 23 February 2021 were approved as an accurate record.</p>
GDMEC/06/16/5.0	<p>Matters Arising and Action Log</p> <p>The action log was reviewed and updated:</p> <p>Action 4.0 July 20: Work on provision of a Governor handbook remains ongoing. Angie Colvin will provide a paper to the next meeting in August for Governors to review the handbook prior to Governor Induction in September. Action remains open.</p>

	<p>Action 3.1 September 20: Continuous monitoring of opportunities for articles with Harrogate Advertiser. Clare Illingworth and Doug Masterton had undertaken an interview with the Advertiser re Governor Elections summer 2021. To discuss further with the new Communications and Marketing Manager. Action remains open.</p> <p>Action GDMEC/02/21/5.1: Complete</p> <p>Action GDMEC/02/21/5.2: Complete</p> <p>Action GDMEC/02/21/5.3: Angie Colvin will organise finance training as part of the Governor induction timetable and open up to all Governors.</p> <p>Action GDMEC/02/21/6.5: Renaming the engagement events was discussed. Suggestions included 'Health for Members', 'Health and Welfare', and Angie Colvin suggested asking our members in a survey. To recommence events in September and think about venues across community areas as well as Harrogate District Hospital.</p> <p>Action GDMEC/02/21/7.0: On hold until the new Communications and Marketing Manager is in post.</p> <p>Action GDMEC/02/21/7.1: On hold until the new Communications and Marketing Manager is in post.</p> <p>Action GDMEC/02/21/7.2: Complete (Angie Colvin will put a sign up next to the Governors' Board, ground floor, Harrogate District Hospital to inform members how they can contact Governors.</p>
GOVERNOR DEVELOPMENT	
GDMEC/06/16/6.0	<p>Effectiveness and Terms of Reference of the Governor Development and Membership Engagement Committee</p> <p>It was agreed to carry out a survey on Survey Monkey regarding the effectiveness of the Committee prior to reviewing the Terms of Reference. The Committee were happy for Clare Illingworth to set the questions.</p> <p style="text-align: right;">(Action: Clare Illingworth)</p>
GDMEC/06/16/7.0	<p>Evaluation of Governor Training Day – NHS Providers GovernWell, Core Skills, 6 May 2021</p> <p>The Committee agreed that the Governor Training Day went well. All new Governors would be encouraged to attend this course in their first year and this would be reflected in the Governor Handbook.</p> <p>The Committee discussed future training opportunities including national and bespoke NHS Providers' courses. Bespoke training days were beneficial for new and existing HDFT Governors and this was the Committee's preferred option.</p> <p>It was agreed to look at offering two bespoke training days per year.</p> <p style="text-align: right;">(Action: Angie Colvin)</p>
MEMBERSHIP & ENGAGEMENT STRATEGY	
GDMEC/06/16/8.0	<p>Membership & Engagement Strategy</p>
8.1	<p>Elections Update</p> <p>Paper 8.1, Elections Update, was taken as read.</p> <p>The Committee:</p> <ul style="list-style-type: none"> • Noted the timetable for the Elections. • Noted the constituency seats to be included in the Elections. • Supported plans and further suggestions to promote the forthcoming Elections.

8.2	<p>Members' Newsletter Update</p> <p>The last HDFT Member News had an article on Governor roles at HDFT and included a piece from Governors representing Harrogate and surrounding villages. It was agreed to include a piece from Governors representing Wetherby and Harewood in the next newsletter.</p> <p style="text-align: right;">Action (Steve Treece and Doug Masterton)</p> <p><i>Post meeting note – above would be included in the newsletter scheduled for September – the July edition of HDFT Member News was an Election Special.</i></p>
GDMEC/06/16/9.0	<p>Annual Members' Meeting</p> <p>The Annual Members' Meeting was scheduled to take place on Monday, 6 September 2021 (the same day as the next public Council of Governors' Meeting). Planning arrangements would commence shortly.</p> <p>Clare Illingworth confirmed she might be away on holiday at this time, but would make arrangements to record a short video as Lead Governor if this was the case.</p> <p style="text-align: right;">(Action: AMM Planning Group)</p> <p><i>Post meeting note – Clare Illingworth confirmed she will be in attendance at the AMM.</i></p>
CLOSING ITEMS	
GDMEC/06/16/10.0	<p>Any Other Business</p> <p>Following the membership database presentation, Clare Illingworth suggested the Committee could hold a workshop in the future to discuss the database in more detail including, what the Committee would like to retrieve and monitor from it.</p> <p>In response to comments regarding members' preferred method of communication, the database and related costs for printing and posting would be reviewed. Members would continue to be encouraged to provide their email address for future communications.</p> <p style="text-align: right;">(Action: Angie Colvin)</p> <p>On behalf of the Committee, Clare Illingworth thanked Lynn Hughes for her contribution and wished her well for the future.</p>
GDMEC/06/16/11.0	<p>Evaluation of Meeting</p> <p>It was noted that the second half of the meeting was a little rushed however, the Committee welcomed the time to hear about the membership database.</p> <p>Claire Illingworth thanked everyone for attending and for their contributions.</p>
GDMEC/06/16/12.0	<p>Date and Time of Next Meeting</p> <p>The following meeting dates were agreed:</p> <p style="text-align: center;">Tuesday 24 August 2021 Monday 1 November 2021</p> <p>Meetings would commence at 4:00pm and close at 5:30pm.</p>

**Council of Governors Meeting
6 December 2021
Governor questions**

NHS Staff Covid Vaccinations:

1. The Government has decided that all 'front line care workers must be inoculated against Covid to continue working. Similarly, NHS 'front line' staff must also be inoculated before April 2022 to continue working in the sector. How can Governors be assured that those staff not prepared to receive the vaccine for other than genuine health reasons are not just re-assigned away from the 'front line'?

Tony Doveston, Public Governor, Harrogate and Surrounding Villages

Glaucoma Treatments:

2. At a recent meeting between senior management, NEDs and Governors we were advised that the waiting list at HDHT for Glaucoma treatment exceeded 4,000 which must result in lengthy delays in obtaining consultant appointments. Unfortunately, if treatment is delayed permanent sight loss can result. What assurance and action plan can be given to Governors to resolve this totally unacceptable waiting list situation?

Tony Doveston, Public Governor, Harrogate and Surrounding Villages

3. It was reported at the October of the Quality Committee that there were more than 4000 patients currently waiting for glaucoma procedures. I was advised that systems of triage were in place to ensure that anyone badly needing an operation to prevent possible blindness would be treated. My concern is that the accumulation of cases might mean that current capacity becomes insufficient even to deal with urgent cases. Has the Trust measures to activate other routes for treatment, eg use of the private sector or appeal to other trusts, in such circumstances. Are there other areas as well as glaucoma that are at risk of becoming critical?

Doug Masterton, Public Governor, Wetherby & Harewood and Alwoodley, Adel and Wharfedale and Otley and Yeadon Wards

Diagnostic Tests:

4. There has been recent press coverage about significant delays in diagnostic and similar tests for heart and associated conditions on a national basis. Could we please have an update on the current position in Harrogate Foundation Trust, in particular any identified risks and pressure points, other areas where there are delays in diagnostic tests and risk mitigation plans in place. Could NEDs please advise what assurance they have received on the management of these risks and how they will obtain assurance on their ongoing management?

Steve Treece, Public Governor, Wetherby & Harewood and Alwoodley, Adel and Wharfedale and Otley and Yeadon Wards

Delivery of Medicines:

5. What assurances can the Non-Execs offer the Governors that safe processes of the delivery of medicines are in place for patients discharged back into the community and that the lapses in normal processes that have occurred are unlikely to happen again?"

Sue Eddleston, Public Governor, Ripon & West District

Outpatient Seating:

6. Please would the non-execs provide us with assurance that they are satisfied that historic and ongoing seating problems are not putting patients and visitors at any undue risk and that there is an action or replacement plan with timings in place to rectify any unsuitable seating?

Sue Eddleston, Public Governor, Ripon & West District

Children's Services:

7. Could we please have an update on the status of children's services delivery, any identified risks to service delivery and mitigation plans in place to manage these risks? Could NEDs please advise what assurance they have received on the management of these risks and how they will obtain assurance on their ongoing management?

*Steve Treece, Public Governor, Wetherby & Harewood and Alwoodley,
Adel and Wharfedale and Otley and Yeadon Wards*