

**Meeting of the Council of Governors
Wednesday 2 December 2020 at 14:45 – 16:30
Microsoft Teams Meeting**

Vision: Working to Improve Lives

14:00 – CEO Briefing

PART ONE MEETING – HELD IN PUBLIC

AGENDA

1	APOLOGIES FOR ABSENCE	SS	Verbal	Noting	14:45
2	DECLARATIONS OF INTEREST	SS	Verbal	Noting	14:47
3	MINUTES OF THE MEETING (PART 1) HELD ON 23 September 2020	SS	Attached	Approval	14:49
4	ACTION LOG AND MATTERS ARISING	SS	Attached	Noting	14:52
Emergency Response and Crisis Care Service Presentation Lynn McGee / Tara Merrell					14:55
5	TRUST UPDATES				
(a)	Report from the Chair	SS	Attached	Noting	15:15
(b)	Quality & Performance Report	PS	Attached	Noting	15:18
(c)	Annual Assurance Reports from the Chairs of the Board of Directors Standing Committees				
(i)	Quality Committee	AS	Attached	Noting	15:23
(ii)	People, Innovation & Transformation Committee	ARQ	Attached	Noting	15:26
(d)	CQC Update	PS	Attached	Noting	15:29
(e)	Freedom to Speak-Up Guardian Update	SL	Verbal	Noting	15:32
(f)	Summary of EPUT Progress and Work Streams to address Bullying & Harassment	SL	Attached	Noting	15:37
6	COUNCIL OF GOVERNORS BUSINESS ITEMS				
(a)	Deputy Lead Governor Election Outcome	SS	Attached	Noting	15:42
(b)	Outcome of the Council of Governors Efficacy Review	JD	Attached	Noting	15:45
(c)	Council of Governors Sub-Committees				
(i)	Governance Committee	JJ	Attached	Noting	15:55
(ii)	Nomination Committee	SS	Attached	Noting	
(iii)	Membership Committee	JW	Attached	Noting	
(iv)	Training & Development Committee	PG	Attached	Noting	
(d)	Changes to the Council of Governors and	CJ	Attached	Noting	16:05

	membership of its Committees				
(e)	Your Voice	JW	Attached	Noting	16:08
7	OTHER REPORTS				
(a)	Council of Governors Agenda Task and Finish Group ToR	CJ	Attached	Noting	16:15
(b)	Governor Involvement Task and Finish Group	SR	Verbal	Noting	16:20
(c)	Governor Nomination to NHS Providers Governor Advisory Committee (GAC)	CJ	Attached	Approval	16:25
(d)	Lead and Deputy Lead Governor Update	JJ	Attached	Noting	16:28
(e)	GAC Report	JJ	Attached	Noting	16:31
10	ANY OTHER BUSINESS				
11	QUESTION & ANSWER SESSION FROM MEMBERS OF THE PUBLIC				
12	RESOLUTION Members of the public are excluded from Part 2 Council of Governors meeting having regard to commercial sensitivity and/or confidentiality and/or personal information and/or legal professional privilege in relation to the business to be discussed				
13	DATE AND TIME OF NEXT MEETING February 2021				
14	DATES OF FUTURE MEETINGS TBC				

Professor Sheila Salmon
Chair

**Minutes of the Council of Governors Meeting Held in Public
On Friday 23 September 2020
Microsoft Teams**

Attendees:

Prof Sheila Salmon (SS)	Chair of the Trust (Chair of the meeting)
Brian Arney (BA)	Public Governor West Essex & Hertfordshire
Keith Bobbin (KB)	Public Governor Essex Mid & South
Lara Brooks (LB)	Staff Governor Non-Clinical
Peter Cheng (PC)	Public Governor North East Essex & Suffolk
Dianne Collins (DC)	Public Governor Essex Mid & South
Jared Davis (JD)	Staff Governor Clinical
Pippa Ecclestone (PE)	Public Governor West Essex & Hertfordshire
Paula Grayson (PG)	Public Governor Bedfordshire, Luton & Milton Keynes & ROE
Dr. Ruth Jackson (RJ)	Appointed Governor, ARU
Emmanuel Jessa (EJ)	Public Governor Mid & South Essex
John Jones (JJo)	Public Governor Bedfordshire, Luton & Milton Keynes & ROE
Jean Juniper (JJu)	Public Governor West Essex & Hertfordshire
Cllr. Bob Massey (BM)	Appointed Governor Essex County Council
Nosi Murefu (NM)	Staff Governor Clinical
Sam Rakusen (SR)	Public Governor Essex Mid & South
Tracy Reed (TR)	Staff Governor Clinical
David Rolph (DR)	Public Governor North East Essex & Suffolk
Kate Shilling (KS)	Public Governor West Essex & Hertfordshire
Cllr. Sue Shinnick (SSH)	Appointed Governor, Thurrock Council
David Short (DS)	Public Governor North East Essex & Suffolk
Judith Woolley (JW)	Public Governor Essex Mid & South

In attendance:

Alison Davis (AD)	Non-Executive Director
Manny Lewis (ML)	Non-Executive Director
Rufus Helm (RH)	Non-Executive Director
Alison Rose-Quirie (ARQ)	Non-Executive Director
Amanda Sherlock (AS)	Non-Executive Director
Sally Morris (SM)	Chief Executive Officer
Paul Scott (PS)	Chief Executive Designate
Mark Madden (MM)	Executive Chief Finance Officer
Trevor Smith (TS)	Executive Chief Finance Officer Designate
Nigel Leonard (NL)	Executive Director of Strategy & Transformation
Sean Leahy (SL)	Executive Director of People & Culture
Caroline Thomsett (CT)	Director of Marketing & Communications

052/20 APOLOGIES FOR ABSENCE

Mark Dale	Public Governor Essex Mid & South
Jim Dean	Public Governor Essex Mid & South
Marianne Evans	Staff Governor Clinical
Elizabeth Rotherham	Public Governor Essex Mid & South
Michael Waller	Public Governor West Essex & Hertfordshire

Signed Date

Paul Walker
Janet Wood
Nigel Turner

Staff Governor Non-Clinical
Non-Executive Director
Non-Executive Director

053/20 DECLARATIONS OF INTEREST

There were no declarations of interest.

054/20 WELCOME TO NEW GOVERNORS

SS welcomed new Governors to their first Council of Governors meeting. SS confirmed the results of the recent elections had seen a mixture of new and returning Governors. She was pleased to have met a number of new Governors at the induction the previous week and noted the variety of skills and experiences that each had.

PRESENTATION: EPUT Governor Training, Learning & Development

PG delivered a presentation regarding EPUT Governor Training, Learning & Development.

PG presented the Training and Development plan that Gillian Lock-Bowen (GLB) had produced before she resigned as a Governor. She advised that it had previously been discussed with Faye Swanson and TB and was extremely grateful for all the great work that GLB had undertaken.

PG noted that whilst a great deal of training is undertaken each year, the outcomes are not easily measureable and Governors may not easily see that their skills have been improved or changed.

PG explained that Governor learn from each other, our CEO, reading papers as well as formal training sessions. The plan presented today would help Governors map their pathways, if Governors want to take part. Governors have a wide range of individual skills and the need to further understand what they are, to assist in sharing knowledge and help Governors to perform their role to the best of their ability. PG reminded the committee that skills are gained skills from everyday life as well as formal training sessions.

PG stated that Governors are given large amounts of information and this enables them to undertake their role. Some Governors may think that their behaviours within the role are okay, however there are always opportunities to ensure that individuals learn new skills by observing other Governors.

PG advised that the Learning circle enables Governors to provide constructive feedback that can be reflected on as part of their role. The aim of Training and Development is to Implement the Learning Partnership program, gather feedback and nudge Governors in the right direction. Governors will not be measured or appraised, this is more about self-reflection. The SMART targets are split into 3 areas, public facing, Trust facing and what I am good at/what can I develop? PG noted that the Nolan Principles had been included in the model to act as a reminder when completing the document. PG advised that learning partnership will be trialed with new Governors initially, but encouraged all Governors to take part.

Signed Date

PG completed the presentation by asking Governors to embrace the suggested model and was very excited about the prospect of seeing the outcomes.

SS thanked PG for the presentation.

DC asked whether the presentation could be circulated to Governors following the meeting. CJ agreed to circulate the presentation to Governors.

Action:

1. **Circulate EPUT Governor Training, Learning & Development presentation to all Governors. (CJ)**

055/20 MINUTES OF THE PREVIOUS MEETINGS

The minutes of the meeting held on the 12 June 2020 were agreed with the following amendment:

- (Pg1, Apologies for Absence): AD noted that Alex Zihute should be listed as Public Governor for Bedfordshire, Luton & Rest of England instead of Essex Mid & South.

056/20 ACTION LOG AND MATTERS ARISING

The Action Log was reviewed. SS noted that there were no overdue actions and a number of actions were not yet due for completion.

057/20 PERFORMANCE, FINANCE & QUALITY REPORT

SM presented the Performance, Finance and Quality report. SM advised that the data being presented was from June 2020 as more recent data had not yet been presented to the Board of Directors. SM confirmed that an updated report would be presented to the Board of Directors next week.

PE queried why the data was from June 2020. SM advised that the Council of Governors meeting was being held a week before the Board of Directors which meant it was not possible to provide more up-to-date information. SM confirmed the scheduling of the Council of Governors meetings would be taken forward with PS to ensure this does not reoccur.

The Council received and noted the report.

058/20 REPORT FROM THE CHAIR

SS presented a report providing an overview of the Chair, Non-Executive Director and Board related activity since the last report to the Council of Governors in May 2020.

SS advised that the Trust is currently going through a time of organisational change. SS thanked SM and MM for all their hard work and confirmed they would be stepping down on the 30 September 2020. SS confirmed that handover arrangements had been put in place for their successors. SS confirmed that PS would be taking-over the role of CEO from the 1 October including becoming the acting accounting officer from 1 October – 30 November when SM formally retires. PS introduced himself to the Council and confirmed that he had met a number of Governors at the induction and the CEO briefing prior to this meeting.

Signed Date

SS advised that TS had now joined the Trust and would be formally taking-over as ECFO from 1 October 2020. TS introduced himself to the Council and looked forward to working with the Governors.

SS thanked Andy Brogan who would be leaving the Trust on the 23 October 2020 to go back to his nursing roots as Executive Nurse at St. Andrews. SS advised that Alex Green had been successfully appointed as the Interim Chief Operating Officer and would take up the role from the 24 October 2020.

SS advised that Nigel Turner (NT) completed his term of office on the 30 September 2020. SS advised that NT had been a NED for the first three-years of the new organisation and wished him the very best for the future.

SS advised that the report contained updates on NED activities and the outcome of the Governor elections, which would also be covered by a paper later on the agenda.

PG said she appreciated the updates provided on NED activities. PG noted the comments made by ML regarding CIPs and the difficulty in achieving these each year. PG asked whether there was anything that could be done to make the efficiency savings required without compromising patient care.

ML confirmed that he regularly presents an assurance report to the Board of Directors which provides an update on CIPs. ML advised that MM was handing over a strong position in relation to CIPs and was aware that both PS and TS were already thinking about this and were committed to briefing Governors in-depth on a regular basis.

The Council received and noted the report.

059/20 CARE QUALITY COMMISSION (CQC) UPDATE

SM presented a report providing an update on CQC related activity and a summary of progress being made to respond to the findings of CQC inspections of Trust services.

SM advised that the CQC had ceased routine inspections due to the Covid-19 pandemic, but the CQC have confirmed it will undertake inspections in a very small number of cases where risks are identified. SM advised that a recent MHA inspection completed by the CQC was undertaken virtually. SM said the CQC had intended to restart inspections, but this may not now take place given the current second wave of the Covid-19 pandemic.

SM advised that the report noted that there was one action overdue for completion, but the report advised that this has been completed. SM advised she anticipated more progress to be reported to the Executive CQC Steering Group on the 25 September prior to an updated report being presented to the Board of Directors.

The Council received and noted the report.

060/20 REMUNERATION & NOMINATION COMMITTEE ASSURANCE REPORT

SS presented a report providing details of the work of the Board of Directors Remuneration and Nominations (RemNom) Committee during the past 12-months from the Chair of the Committees' perspective.

Signed Date

SS outlined the purpose and the duties of the Committee. She advised that the Committee had had a very busy 12-months as it had a number of senior appointments to manage. SS advised that the Committee had also considered the performance reviews completed for the Chief Executive Officer and Executive Directors. SS thanked the Trust Secretary's Office, the CEO / CEO Designate and the Executive Director of People & Culture for their support to the Committee over the past 12-months.

SS confirmed that in her opinion the Committee had been fulfilling its Terms of Reference during the past 12-months and there had been no issues identified which needed to be escalated.

The Council received and noted the report.

**061/20 PLACE (PATIENT LED ASSESSMENTS OF THE CARE ENVIRONMENT)
RESULTS 2019**

MM presented a report providing the results of the 2019 Patient Led Assessment of the Care Environment (PLACE). MM advised that the Trust had met the national average in the majority of the areas but noted his disappointment in the Trust being below the national average for Food & Hydration and Privacy, Dignity & Wellbeing.

MM advised that in relation to Food & Hydration that the Trust was in the process of negotiating a new contract for the provision of food, however, this was delayed by the Covid-19 pandemic. MM advised that ET will be asked to extend the contract to allow the findings of PLACE to be considered when developing the new contract. MM also noted that the Trust had a principle of providing one hot meal per-day which may affect the scores. This would be picked-up in the contract negotiations.

MM provided assurance that a detailed action plan had been developed to address the issues identified by the PLACE results. The action plan included Trustwide actions as well as local actions specific to individual areas. MM advised that Estates & Facilities have been tasked with ensuring the action plan is implemented, even though not all of the actions relate specifically to them.

MM advised that PLACE for 2020-21 had been cancelled due to the Covid-19 pandemic. However, there is something called PLACE-lite which is currently being reviewed to determine if it is worth completing in the absence of a full PLACE programme.

PE commented that under Privacy, Dignity and Wellbeing it mentions smoking. PE thought that the Trust had a no-smoking policy. MM confirmed that the Trust does have a no smoking policy and indeed it is illegal to smoke on NHS property. MM advised however that it is a challenge to prevent individuals smoking on Trust property, but the Trust actively works to stop this and does have a policy in place.

JJ noted that on page 3 the results relating to Disability Access, whilst green, had dropped from 90.4% in 2018 to 84.7% in 2019. JJ asked the reason for the decline. MM advised that it was not clear what the issue was but that it was something that was being investigated. MM advised that Disability Access also includes accessibility of toilets and this was currently being reviewed.

Signed Date

SS queried whether Privacy, Dignity & Wellbeing included the use of dormitories which may have affected the score. MM confirmed that dormitories were included, but advised that the issues also likely referred to reception areas and these are looking to be addressed, for example, introducing softer furnishings to reception areas.

The Council received and noted the report.

062/20 MENTAL HEALTH AND COMMUNITY HEALTH SERVICES TRANSFORMATION

NL presented a report providing an update on the Trust's Mental Health and Community Health Services Transformation programme and how the Trust was adjusting to the Covid-19 outbreak.

NL advised that it was pleasing to note the urgent and emergency care transformation project had been implemented by the 1 April 2020 which had helped with the covid-19 pandemic. NL advised that this had linked with the crisis care service transformation which had been one of the key areas where staff had been re-deployed during the pandemic.

NL highlighted four programmes which were critical to the Trust:

- Emergency Response and Crisis Care Service
- Personality Disorders
- Older People & Dementia
- Community (Primary) Care

NL advised that mental health services were currently being increasingly funded and the Trust was involved in a number of transformation projects as a result.

NL advised that community health service (CHS) transformation was around keeping people out of hospital. NL advised that transformation work had also focused on working with care homes and highlighted that this was significant in the response to the covid-19 pandemic. NL advised that the work supporting care / nursing homes had been very positive.

PG commented that she endorsed the work highlighted on page 3 of the report in relation to personality disorders. PG commented on page 6 Phase 3 Learning which refers to a major theme of reset & recovery being equality. PG queried whether this looked at inequalities. NL advised that this was looking at working with partners both locally and across the system and ensuring the relationships are a success, which would support the inequalities agenda.

EJ commented that he recognised that pilots were taking place between EPUT and Primary Care and asked whether he could be provided with more detail on these pilots. NL provided some examples of the pilot projects being undertaken and confirmed he would be happy to discuss with EJ outside the meeting to provide further details of these pilot projects.

The Council received and noted the report.

Action:

1. Meet with EJ to provide further details of pilot projects being undertaken between EPUT and Primary Care (NL)

063/20 TRUST RESPONSE TO "STRUCTURE TO ALIGN REMUNERATION FOR CHAIRS AND NON-EXECUTIVE DIRECTORS OF NHS TRUSTS"

Signed Date

SS presented a report providing a response to the implementation framework published by NHS England / Improvement (NHSE/I) in relation to the remuneration of Chairs and Non-Executive Directors (NEDs) of NHS Trusts and Foundation Trusts.

SS advised that the report was for information and should be used to inform the discussions regarding remuneration in Part 2. SS advised that the Trust position had been considered over the past year to ensure research could be undertaken to confirm how other organisations in the system were reacting to the implementation framework. SS advised that the response to the framework is to adopt the principles, but to remain flexible in line with the local system.

SS advised that the report had been considered by the CoG Remuneration Committee and the principles set-out in the report should now be taken forward as part of the Part 2 discussions.

The Council received and noted the report.

064/20 STANDING ORDERS FOR THE COUNCIL OF GOVERNORS

SM presented a report providing the Standing Orders For The Council Of Governors for its required annual review. SM advised that the SOs had been reviewed by the Trust Secretary's Office and presented to the CoG Governance Committee who had recommended for approval. SM advised that the majority of changes related to reflecting the new digital ways of working that had been introduced as a result of the Covid-19 pandemic.

The Council approved the Standing Orders For The Council Of Governors.

065/20 STANDING ORDERS FOR THE BOARD OF DIRECTORS

SM presented a report providing the Standing Orders For The Board Of Directors for the required annual review. SM confirmed that the Council does not approve the SOs but were invited to make any comments on the document. SM advised that the SOs had been presented to the CoG Governance Committee. SM confirmed that the SOs will be presented to the Board of Directors on the 30 September 2020 and she would incorporate any comments made by Governors. JJ confirmed that the SOs had been presented to the CoG Governance Committee.

The Council received and noted the Standing Orders For The Board Of Directors.

PC left the meeting.

066/20 COUNCIL OF GOVERNOR PROCEDURES

(i) Significant Transactions

CJ presented a report providing a procedure for the identification of proposed significant transactions undertaken by the Trust. CJ advised that the Trust Constitution provides that the Trust may only enter a significant transaction if more than half the members of the Council of Governors approve the Trust entering into the transaction. CJ advised that the

Signed Date

procedure had been developed to set-out the process for involving the Council in the process for approving a significant transaction.

CJ advised that the procedure had been discussed at the CoG Governance Committee and a request was made to seek legal advice as to whether there is any Trust or national override should the Council reject the Trust entering into a significant transaction. CJ confirmed that legal advice provided by Hempsons said that there is no override or appeal by the Trust or anyone else, however, there is a theoretical risk of judicial review or enforcement action if the rejection is considered unreasonable.

CJ confirmed therefore that the procedure did not need to be amended and was presented to the Council of Governors for approval following recommendation by the CoG Governance Committee.

The Council approved the Significant Transactions Procedure.

(ii) Appointment of the External Auditor

CJ presented a report provided a procedure for the appointment, re-appointment and removal of the External Auditor for the Trust. CJ advised that the Trust Constitution provides that the Council of Governors shall appoint or remove the auditor at a general meeting of the Council of Governors. CJ advised that the procedure was developed to provide the process for appointment re-appointment and removal of the External Auditor for the Trust.

CJ confirmed that the procedure had been considered by the CoG Governance Committee and recommended for approval by the Council of Governors.

The Council approved the Appointment of the External Auditor Procedure.

(iii) Monitoring Governor Attendance

CJ presented a report providing a procedure for the Council of Governors Monitoring Governor attendance. CJ advised that the Trust Constitution provides that a person holding office as a Governor will cease to do so if they consistently and unjustifiably fail to attend the meetings of the Council of Governors. The review of the Trust Constitution queried whether the constitution could state how many meetings needed to be missed for this to happen and legal advice confirmed this should be developed into a procedure, rather than include in the constitution.

CJ advised that a procedure for monitoring attendance already existed and this had been reviewed to clarify the stages that would be followed if a Governor failed to attend meetings of the Council of Governors. CJ highlighted that the procedure focused on supporting Governors initially before moving towards a more formal process.

CJ advised that the procedure had been considered by the CoG Governance Committee and recommended for approval by the Council of Governors.

The Council approved the Monitoring of Governor Attendance Procedure.

(iv) Engagement with the Board of Directors Policy & Procedure

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CJ presented a report providing a policy and procedure for the Council of Governors engagement with the Board of Directors. CJ advised that the policy and procedure outlines the mechanisms by which Governors and Directors would interact and communicate with each other to support their role in holding NEDS to account. The policy and procedure also describes the methods by which Governors may engage with the Board when they have concerns.

CJ advised that the policy and procedure was considered by the CoG Governance Committee and recommended for approval by the Council of Governors before being presented to the Board of Directors for approval.

PE said she had a couple of minor amendments that she would like to be made and would send this to CJ following the meeting. CJ agreed to make these changes.

The Council approved the Engagement with the Board of Directors Policy & Procedure.

Action:

1. **Ensure minor amendments are made to the Engagement with the Board of Directors Policy & Procedure are made once received from PE. (CJ)**

067/20 ANNUAL REVIEW OF AUDIT SERVICES

AD presented a report providing the annual review of all audit and counter-fraud services and to recommend to the Council of Governors on the re-appointment of external auditors from the 1 October 2020.

AD advised that a review has been undertaken of external audit services provided by Ernst & Young in terms of both price and service delivery. AD advised that the audit fee continues to be reasonable and value for money. AD advised that the service provided by Ernst & Young has continued to be a professional and responsive service especially during the Covid-19 pandemic.

AD confirmed that the Audit Committee had agreed to recommend to the Council of Governors that Ernst & Young be appointed for a further year commencing on the 1 October 2020.

The Council approved the appointment of Ernst & Young for a further year commencing on the 1 October 2020.

068/20 STANDING COMMITTEE ASSURANCE REPORTS

(i) Governance Committee

CJ presented a report providing a summary of the CoG Governance Committee meeting held on the 21 August 2020. CJ advised that the following areas were discussed:

- Standing Orders for the Council of Governors / Board of Directors
- Council of Governor Procedures
- SID Review Action Plan
- Composition of the Council of Governors
- Efficacy Review Action Plan

Signed Date

- Committee Workplan

The Council received and noted the report.

(ii) Training & Development Committee

PG presented a report providing a summary of the CoG Training and Development Committee held on the 18 August 2020.

PG advised that the Committee had received and considered the EPUT Governor Training, Learning and Development presentation. PG confirmed that changes were made to the presentation and subsequent model highlighted in the presentation provide to the Council of Governors. PG asked the Council to agree to adopt the model referred to in the presentation going forward. The Committee agreed to adopt the model included as part of the earlier presentation.

The Council received and noted the report.

(iii) Membership Committee

JW presented a report providing a summary of the CoG Membership Committee held on the 20 August 2020. JW advised that she was getting together with Jim Dean (JD) as a member of the Committee to discuss and take forward plans for engaging with members. JW advised that two Virtual Your Voice meetings were planned for 9th and 11th November as a pilot and encouraged Governors to attend these if possible.

PE noted that the Virtual Your Voice meetings did not include West Essex & Hertfordshire and queried whether a meeting will be held for this constituency. JW advised that the two currently booked for Essex Mid & South and North East Essex & Suffolk were pilots to see if the format worked. She advised that if these meetings are successful, this would then be expanded to include all constituencies.

JJ commented that the turnout for the recent Governor elections was very low. JJ noted that this was a national problem, but queried whether the Membership Committee would consider taking this forward in terms of encouraging members to vote in future elections. JW agreed to take this forward as part of the Committee and would feed this into her discussions with JD regarding engagement with members.

TB advised that the Virtual Your Voice meetings did not have a topic for discussion and asked Governors to contact the Trust Secretary's Office if they have any suggestions for a topic of the meetings.

KB queried whether the press could be utilised to help advertise the virtual Your Voice meetings. SS advised that the new Director of Communications and Marketing may consider using the press going forward as part of her workplan.

The Council received and noted the report.

Action:

- Governors to provide any ideas for a topic for the Virtual Your Voice Meetings to the Trust Secretary's Office (Govs)**

Signed Date

(iv) Nominations Committee

SS provided a verbal update regarding the CoG Nominations Committee meeting held on the 11 September 2020. SS advised that the meeting focused on the recruitment of a new Non-Executive Director which will be taken forward as part of the discussions to be held in Part 2 of the meeting.

The Council received and noted the verbal update.

(v) Remuneration Committee

JJo presented a report providing a summary of the CoG Remuneration Committee held on the 11 September 2020. JJo advised that the majority of discussions focused on the remuneration of the Chair and Non-Executive Directors and these topics would be discussed at Part 2.

The Council received and noted the report.

069/20 ELECTIONS TO THE COUNCIL OF GOVERNORS

TB presented a report providing the results of the June 2020 Council of Governor elections, including the official notification from CIVICA. TB advised that the elections were advertised, however turnout was low. TB advised that the elections had led to a full complement of Governors for the Council being elected and provided details of the successful candidate.

SS commented that the results of the election was a good outcome as the Council is now up to full strength, but noted the disappointment in the low turnout.

The Council received and noted the report.

070/20 CHANGES TO THE COUNCIL OF GOVERNORS AND MEMBERSHIP OF ITS COMMITTEES

CJ presented a report providing:

- the current composition of the Council of Governors.
- the current Committee members for the Council of Governors sub-committees.
- the attendance at Council of Governors meetings.

CJ advised that Governors that were re-elected were given the opportunity to re-join sub-committees and all had taken up the offer. However, there were still some vacancies across the sub-committees and CJ encouraged Governors to volunteer to become members of the sub-committees.

SS encouraged Governors to put themselves forward for any sub-committees where they may have an interest.

The Council received and noted the report.

071/20 ELECTION OF THE DEPUTY LEAD GOVERNOR

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CJ presented a report providing the role description, process and timetable for the appointment of the Deputy Lead Governor. CJ advised that the term of office for the current Deputy Lead Governor will end on the 2 October 2020 and therefore an election process was now required. CJ advised that he would circulate the required documentation to Governors on the 24 September and Governors would have until the 1 October to put themselves forward and be seconded by another Governor. CJ advised that if only one Governor volunteered the individual will be elected unopposed. However, if more than one Governor volunteered it would then move forward into the election process set-out in the timetable.

SS encouraged interested Governors to volunteer with this role. SS advised that the role would be working with her and JJo as Lead Governor to ensure the CoG is effective in undertaking its role.

JJo commented that the timetable set-out in Appendix 3 referred to the Lead Governor on some occasions and asked if this could be amended. CJ agreed to amend prior to circulation.

The Council received and noted the report.

Action:

1. **Amend the Deputy Lead Governor election timetable to ensure there is no reference to the Lead Governor prior to circulation. (CJ)**

072/20 QUALITY VISITS

CJ provided a verbal update and confirmed that Quality Visits are still suspended due to Covid-19 restrictions. CJ advised that NEDs have recently completed virtual visits to a couple of services and were evaluating the effectiveness. Depending on the outcome, this could be expanded to include Governors.

SS agreed and confirmed this would be something that would be taken forward, however, noted it may be subject to a second wave of the pandemic which would lead to an increased workload for front line services.

The Council received and noted the verbal update.

073/20 LEAD AND DEPUTY LEAD GOVERNOR UPDATE

JJo presented a report providing an update on activities involving the Lead and Deputy Lead Governors.

JJo highlighted sections of the report, including the fact that there is currently a national issue relation to the remuneration of Chairs. JJo advised that the National Lead Governor association has re-commenced following the election of a new Chair who seems to be fairly active.

The Council received and noted the report.

074/20 GAC REPORT

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JJo presented a report updating the Council of Governors on the work of the NHS Providers Governor Advisory Committee. JJo advised that the Committee met in as a virtual meeting in July 2020 and the report provide an update on the items discussed.

The Council received and noted the report.

075/20 ANY OTHER BUSINESS

Leadership Changes

JJo wanted to recognise the considerable work of SM, MM, Andy Brogan (AB) and Nigel Turner (NT) who would be leaving the Trust in the next few weeks.

JJo said that he had spoken to SM six-years ago when she became CEO and she had said that she would always be available. JJo had heard this said by others before and it had not been true, but SM had ensured she was available whenever needed. JJo said that he would miss the detailed knowledge that SM was always able to bring and her sense of humour.

JJo said that MM had always focused on the quality of services. He said that an ECFO would usually primarily interested in the finances of the organisation, but noted that MM always questioned what impact financial decisions would have on patient care.

JJo said that AB always showed an amazingly detailed knowledge of clinical practices and services. JJo was always amazed at AB's commitment to patient care.

JJo said that NT was always very approachable as a NED.

Virtual Meeting

JW queried how members of the public were informed of the Council meeting and the ability to access this virtually. TB advised that the details and the link are published on the Trust website. SS suggested more engagement with members could be encouraged through the Membership Committee. JW agreed.

076/20 DATE AND TIME OF NEXT MEETING

The next meeting of the Council of Governors will take place 25 November 2020, however, this was subject to change to take into consideration to hold CoG meetings in different weeks / months from the Board of Directors.

Signed Date

ESSEX PARTNERSHIP UNIVERSITY NHS FT

Council of Governors Meeting Action Log (following Part 1 meeting held on 23 September 2020)

Lead	Initials	Lead	Initials	Lead	Initials
Chris Jennings	CJ	Paula Grayson	PG	Alison Rose-Quirie	ARQ
Nigel Leonard	NL	Faye Swanson	FS	Jo Debenham	JD
Governors	Govs.	Manny Lewis	ML	Trust Secretary's Office	TSO

Requires immediate attention /overdue for action	
Action in progress within agreed timescale	
Action Completed	
Future Actions	

Minutes Ref	Action	Owner	Dead-line	Outcome	Status Comp/ Open	RAG rating
Sep Pres	Circulate EPUT Governor Training, Learning & Development presentation to all Governors.	CJ	Nov-20	Presentation circulated.	Closed	
Sep 062/20	Meet with EJ to provide further details of pilot projects being undertaken between EPUT and Primary Care	NL	Nov-20	Meeting took place on 21 October 2020.	Closed	
Sep 066/20	Ensure minor amendments are made to the Engagement with the Board of Directors Policy & Procedure are made once received from PE.	CJ	Nov-20	Amendments received and updated in policy document.	Closed	
Sep 068/20	Governors to provide any ideas for a topic for the Virtual Your Voice Meetings to the Trust Secretary's Office	Govs.	Nov-20	None received. Alternative action taken and Your Voice meeting moved back in the calendar. Your Voice Paper on the agenda for 2 December 2020.	Closed	
Sep 071/20	Amend the Deputy Lead Governor election timetable to ensure there is no reference to the Lead Governor prior to circulation.	CJ	Sep-20	Document amended.	Closed	
May 037/20	Identify training to be provided to individual groups of Governors and add to the Learning & Development Plan	PG / FS	Sep-20	This was added to the Learning & Development Plan but has not been considered by the CoG T&D Committee. This will be discussed at the next meeting.	Closed	
May	Update regarding work undertaken to improve the	ARQ	Nov-20	Item on the agenda for the Council of	Closed	

Agenda Item 4
Council of Governors Part 1 Meeting
2 December 2020

Minutes Ref	Action	Owner	Dead-line	Outcome	Status Comp/ Open	RAG rating
33/20	Freedom to Speak-Up Guardian role to be presented to Council of Governors in 6-months			Governors meeting on the 2 December 2020.		
June Pres.	Provide the Council of Governors with a report in November 2020 regarding progress with the Trust anti-bullying action plan.	JD	Nov-20	Item on the agenda for the Council of Governors meeting on the 2 December 2020.	Closed	
	Undertake further in-depth analysis of staff survey results at the Finance & Performance Committee to see if any further action could be identified.	ML / JD	Nov-20	Confirmed this was discussed at the Finance & Performance Committee.	Closed	
	Discuss the Staff Survey results at the People, Innovation and Transformation Committee to identify any transformation projects that may impact on areas identified by the Staff Survey.	ARQ / JD	Feb-21	Report presented to the Finance & Performance Committee and consideration to be given to take this to the PIT to identify any transformation projects which could take these forward.	Open	
Feb AOB	Ensure name plates are available at future meetings.	TSO	May-20 Revised to Nov 20	Meetings have not yet re-started. Recommend this action is closed and TSO will ensure name plates are available for the first meeting at a Trust site.	Closed	

SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	Agenda Item: 5(a)	
		2 December 2020	
Report Title:	Report From The Chair		
Report Lead:	Professor Sheila Salmon Chair of the Trust		
Report Author(s):	Angela Horley PA to Chair, Chief Executive and NEDs		
Report discussed previously at:			
Level of Assurance:	Level 1 <input checked="" type="checkbox"/>	Level 2 <input type="checkbox"/>	Level 3 <input type="checkbox"/>

Purpose of the Report	
To present an update report from the Chair of the Trust in support of Governors holding the Non-Executive Directors to account both individually and collectively for the performance of the Board and to provide an understanding of the work of the Non-Executive Directors.	Approval <input type="checkbox"/>
	Discussion <input type="checkbox"/>
	Information <input checked="" type="checkbox"/>

Recommendations/Action Required	
The Council of Governors is asked to:	
1 Note the contents of this report.	

Summary of Key Issues	
The report provides an overview of the Chair's, Non-Executive Directors' and Board related activities since the last report to the Council of Governors in September 2020.	
An update report from the Chair of the Trust will be provided at each general meeting of the Council of Governors.	

Relationship to Trust Strategic Objectives	
SO 1: Continuously improve service user experiences and outcomes	<input checked="" type="checkbox"/>
SO 2: Achieve top 25% performance	<input checked="" type="checkbox"/>
SO 3: Valued system leader focused on integrated solutions	<input checked="" type="checkbox"/>

Which of the Trust Values are Being Delivered	
1: Open	<input checked="" type="checkbox"/>
2: Compassionate	<input checked="" type="checkbox"/>
3: Empowering	<input checked="" type="checkbox"/>

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:		
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives		<input checked="" type="checkbox"/>
Data quality issues		
Involvement of Service Users/Health watch		<input checked="" type="checkbox"/>
Communication and consultation with stakeholders required		
Service impact/health improvement gains		<input checked="" type="checkbox"/>
Financial implications		
Governance implications		<input checked="" type="checkbox"/>
Impact on patient safety/quality		<input checked="" type="checkbox"/>
Impact on equality and diversity		
Equality Impact Assessment (EIA) Completed?	YES/NO	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors

Holding the NEDs to account for the performance of the Trust	✓
Representing the interests of Members and of the public	✓
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	

Acronyms/Terms Used in the Report

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Supporting Documents and/or Further Reading

Main report

Lead


**Professor Sheila Salmon
Chair of the Trust**

**Agenda Item 5(a)
Council of Governors
2 December 2020**

REPORT FROM THE CHAIR

1.0 Purpose of Report

This paper presents an update report from the Chair of the Trust in support of Governors holding the Non-Executive Directors (NEDs) to account both individually and collectively for the performance of the Board and to provide an understanding of the work of the Chair, NEDs and Board of Directors. This report covers the period since the last report to the Council of Governors in September 2020.

2.0 NED Recruitment

Subject to approval by the Council of Governors (CoG), we aim to appoint a new non-executive director with digital technological large scale corporate and commercial expertise to fill the gap that exists in the Board of Directors skills set. Following a robust recruitment process, interviews for a new NED are scheduled to take place on 14th December. The stakeholder panel will also occur on this date. The successful candidate will be announced in due course once approved by the CoG on the 16 December.

3.0 HSE Prosecution

As Governors are aware, the HSE had indicated their intention to prosecute the Trust as EPUT were considered to be in breach of the Health and Safety at Work Act 1974 due to historic failings to control ligature risks by the former NEP. Legal proceedings in this prosecution process began on 12 November with Paul Scott and Nigel Leonard in attendance on behalf of the Trust. I would like to remind Governors that safety remains a pivotal priority, with a significant programme of work and tremendous investment and efforts being made to address these failings since the Trust's inception in April 2017. Governors will of course, be kept up to date on any developments on these legal proceedings.

4.0 Service and Quality Visits

Due to the ongoing Covid-19 Pandemic and the enforced lockdown by Government the Board of Directors took the decision to cancel all non-essential service visits which will be restored at the earliest opportunity.

5.0 Update from NEDs

i) Alison Rose-Quirie

Since the last COG I have tried to keep connected to the Exec and Trust staff via virtual calls and meetings. I have attended two CoG Constituency meetings to chat informally with Governors and understand any concerns they may have. I have held several calls with the Trust Freedom to Speak-Up Principal Guardian and Sean Leahy to help clarify the role and review the terms and conditions of this position and the pending election process. I joined an interesting address and Q&A with the National Guardian, Henrietta Hughes which helped focus our joint thinking. I also attended an NHS Confederation Workshop to hear about developments in the ICS and NEE Health and Wellbeing Alliance. The NEDs have collectively completed a complaints review. This is in addition to the regular staff and CEO updates and the regular Board and Committee meetings. It is noticeable that one positive from the Covid challenge is the ability to dip into a far wider range of virtual meetings than I ever would have been able to do if travelling.

This is ensuring that I remain connected to the issues and challenges and the NEDS can still provide oversight of the work of the Trust.

ii) Janet Wood

The trust ran a series of suicide prevention events during September and October. I was privileged to host one of these events for the trust – learning from military veterans and mental health. We heard a very personal story from a local nurse who lost her ex-forces husband to suicide. We also shared details of the services which are available to support veterans and their families. Work also continues to develop the governance of the Suffolk and North East Essex ICS and I have been actively involved in exploring how NEDs can become more involved in system work. The ICS is also exploring the role of a citizens panel and anchor institutions.

iii) Amanda Sherlock

As well as saying goodbye to Board colleagues, it has been interesting to hold introduction meetings with Paul & Trevor and hear about their first impressions and plans for EPUT. The charitable funds committee has been a really good example of where ‘fresh eyes’ have given me a new perspective and opportunity to make progress in encouraging bids against the NHS Charities fund that will support the hard work of all of our team through Covid.

Other activities have included Chairing of a domestic homicide review and also undertaking training in getting the voice of individuals with a learning disability into our work have highlighted that our focus on quality and safety must always be front and centre of our work. The constituency meetings have also given a chance to engage with Governors and staff on the front line initiatives that it can be so easy to overlook in our busy board agenda.

Finally, it has been again a pleasure to participate in the continuing programme of learning events with staff from across the organisation, the quality of the events continues to encourage me that we have a great pool of skills, enthusiasm and passion for the fantastic care that we provide.

iv) Rufus Helm

This month I took up my new post as Chair of the Charitable Funds Committee and held my first meeting of that committee. It’s clear that this is an exciting period for charitable funding with significant new monies coming through from the NHS Charities Together campaign (£120,000 of immediate funds with an opportunity to benefit from later streams) and with Trevor Smith offering a renewed focus on gathering ideas from service users and staff on how to spend those funds.

In addition to that, progress continues on agreeing the Quality, Innovation and Research agenda with a further meeting of the Task & Finish group and an assessment of technology to support quality improvement projects.

v) Manny Lewis

Since the last CoG, 3 areas to brief governors on matters I have been involved in of particular interest:

- i) The Trust's emerging sustainability strategy: as the NED lead on sustainability I reviewed the emerging strategy with Richard Chilcott, the Director of Estates and Trevor Smith. This will be a ground breaking green plan that will come to Board in the spring. We shaped the main outputs which will be:
 - reducing emissions by 54% by 2025 (compared to the 1990 baseline) and then towards the NHS level net zero target, bearing in mind we currently emit 23,000 tonnes of CO2 pa;

- assessing our performance benchmarked against other trusts using the Sustainable Development Assessment Tool (SDAT) which shows in which activity we have the most problems and where we excel;
- maintaining a systematic monitoring and compliance regime.

This could be a costly programme but there is also scope for external funding as well as potential savings within our approx. spend of £5m pa on utilities and transport.

- ii) Two meetings of F&P; firstly an extraordinary meeting to sign off the Trust's anticipated financial outturn in 2020/21. This is particularly difficult to forecast given Covid and the second wave combined with the fact that income levels and expenditure have been particularly distorted this year. We have taken a pragmatic approach as a system player to set a realistic and responsible forecast. I was also encouraged by our second F&P meeting where the new Exec Team set out its thinking for a more joined up and accountable approach for quality and finance performance monitoring, ensuring more proactive action on the target areas where the Trust requires improvement.
- iii) I attended two constituency meetings with governors for MSE and Staff and also met again with the Chairs of COG sub committees. As NEDs we are finding these new engagement fora with governors to be purposeful, adding value on accountability, Trust development and helping to deal with constituency service issues.

vi) Alison Davis

I am really pleased to have started on the reverse mentoring programme, having been selected by a mentor. We have had an introductory discussion and further dates have been diarised.

Weekly staff updates led by Paul and the Executive team are developing very positively; I find them valuable to attend and I have had feedback that staff appreciate seeing and hearing from them as a team and that the engagement feels more 'human'.

I attended the Veterans Service at the Lakes for a presentation, when the local MP Will Quince visited. (Social distancing was handled well). It was reassuring to hear how informed and committed the MP was to the services and David Powell represented his team and their achievements commendably. The team has since received national accreditation for the services it provides, which is very well deserved.

I attended the virtual Associate Hospital Managers meeting and was impressed at how readily members have embraced the new approach to hearings using technology; ensuring scrutiny of patient detentions is maintained.

The Board development programme on cultural intelligence has begun, providing rich discussion and challenge to both personal and group thinking. It is highlighting culture in its very broadest sense. I'm looking forward to the second part in December.

I have attended two virtual constituency meetings, where the additional participation of operational colleagues was extremely helpful in answering more detailed questions about issues. Hopefully Governors have found them beneficial as well.

The NED group has also had another complaint review session and the focus on identifying themes, I believe, is adding value to the scrutiny process.

6.0 External facing work

Meetings with MPs

I have joined the Chief Executive in multiple video link meetings with our MPs from across Essex over the past two months. These have been wholly constructive and it has been insightful to engage in focussed conversations within and across the various electoral constituencies, ensuring appropriate attendance to issues affecting our local communities and population groups.

Engagement with Anglia Ruskin University

With the full blessing and encouragement of the Vice Chancellor, Professor Roderick Watkins, and our CEO Paul Scott, there have been several high level, productive meetings between our two senior leadership teams over recent weeks. I took the opportunity to introduce Paul Scott and some executive colleagues to the Medical School on the Chelmsford Campus and this further opened potential joint development opportunities across the education, research and innovation piece. We have agreed to establish two or three key strategic work-streams that will build upon the excellent collaboration already in train. As the picture becomes develops I will keep governors duly updated.

7.0 Recommendations

The Council of Governors is asked to:

- 1 Note the contents of this report.



Professor Sheila Salmon
Chair of the Trust
December 2020

		Agenda Item No: 5b						
SUMMARY REPORT	Council of Governors PART 1	2 December 2020						
Report Title:	Performance, Finance and Quality Report							
Executive/Non-Executive Lead:	Paul Scott Chief Executive Officer							
Report Author(s):	Jan Leonard Director of ITT							
Report discussed previously at:	Executive Operational Steering Committee Finance and Performance Committee Board Of Directors							
Level of Assurance:	Level 1	Level 2	<input checked="" type="checkbox"/>	Level 3				
Purpose of the Report								
<p>The Board of Directors Scorecard confirms quality / performance "Inadequate indicators" agreed by the Finance and Performance Committee and presents a high level summary of performance against safer staffing levels, Oversight Framework performance, financial targets and CQC Action plans.</p> <p>The scorecard is provided to the Council of Governors to draw attention to the key issues that are being considered by the standing committees of the Board of Directors. The content has been considered by those committees and action is being taken where required.</p>			Approval Discussion Information	<input checked="" type="checkbox"/>				
Recommendations/Action Required								
<p>The Council of Governors is asked to:</p> <ol style="list-style-type: none"> 1 Note the contents of the reports. 2 Request further information and / or action by Standing Committees of the Board as necessary. 								
Summary of Key Issues								
<p>Quality & Performance Reporting</p> <p>Two inadequate indicators (variance against target/ambition) have been identified at the end of October 2020 and are summarised in the Summary of Inadequate Quality and Performance Indicators Scorecard.</p> <ul style="list-style-type: none"> • Admissions to Adult Facilities of under 16's • Mandatory Training & Supervision 								
<p>Oversight Framework</p> <p>There are no inadequate indicators which are Oversight Framework indicators for October 2020.</p>								
<p>Safer Staffing</p> <p>There are no inadequate indicators in the EPUT Safer Staffing Dashboard for October 2020.</p>								
<p>CQC Scorecard</p> <p>This CQC Reset action plan is summarised in the CQC Scorecard. The plan has now been completed with all actions having been met; the final actions were marked as complete at the Executive Steering Group on the 25th September. A new action plan will be developed following the conclusion of the next CQC inspection. One unannounced inspection was undertaken in October with feedback received in November.</p>								
<p>Finance Scorecard</p> <p>In October 2020 there are two inadequate indicators identified within the Finance scorecard;</p> <ul style="list-style-type: none"> • Cost improvement Programmes • Capital Expenditure (CDEL) <p>Where performance is under target, action is being taken and is being overseen and monitored by standing committees of the Board of Directors.</p>								

Relationship to Trust Strategic Objectives	
SO 1: Continuously improve service user experiences and outcomes	✓
SO 2: Achieve top 25% performance	
SO 3: Valued system leader focused on integrated solutions	

Which of the Trust Values are Being Delivered	
1: Open	✓
2: Compassionate	
3: Empowering	✓

Relationship to the Board Assurance Framework (BAF)	
Are any existing risks in the BAF affected?	Yes
If yes, insert relevant risk	BAF6 BAF9 BAF10 BAF13 BAF20 BAF32 BAF33 BAF34 BAF35 BAF36
Do you recommend a new entry to the BAF is made as a result of this report?	No

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:	
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	✓
Data quality issues	✓
Involvement of Service Users/Healthwatch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	✓
Financial implications:	
	Capital £ Revenue £ Non Recurrent £
Governance implications	
Impact on patient safety/quality	✓
Impact on equality and diversity	✓
Equality Impact Assessment (EIA) Completed?	YES/NO
	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	✓
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	

Acronyms/Terms Used in the Report			
ALOS	Average Length Of Stay	FRT	First Response Team
AWoL	Absent without Leave	FTE	Full Time Equivalent
CCG	Clinical Commissioning Group	IAPT	Improving Access to Psychological Therapies
CHS	Community Health Services	MHSDS	Mental Health Services Data Set

CPA	Care Programme Approach	NHSI	NHS improvement
CQC	Care Quality Commission	OBD	Occupied Bed days
CRHT	Crisis Resolution Home Treatment Team	OT	Outturn
CWP	Connecting with People	YTD	Year To Date
EIP	Early Intervention in Psychosis	PHSO	Public Health Service Ombudsman
FEP	First Episode of Psychosis	PICU	Psychiatric Intensive Care Unit
FFT	Friends and Family Test	RAG	Red-Amber-Green
RWB	Recovery & Well-Being Team	RTT	Referral to Treatment
RD	Recovery Date		

Supporting Documents and/or Further Reading

Integrated Quality & Performance Scorecards

Lead

Paul Scott
Chief Executive Officer

Council of Governors

EPUT Integrated Quality and Performance Score Cards

October 2020

Are we Safe?

Are we Effective?

Are we Caring?

Are we Responsive?

Are we Well Lead?

Report Guide

Use of Hyperlinks

Hyperlinks have been added to this report to enable electronic navigation. Hyperlinks are highlighted with an underscore (usually blue or purple colour text), when a hyperlink is clicked on, the report moves to the detailed section. The back button can also be used to return to the previous place in the document.

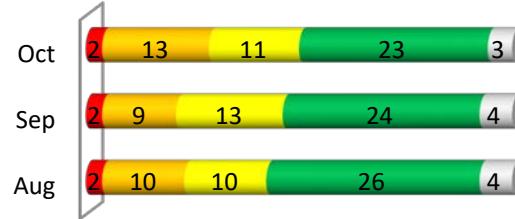
How is data presented?

Data is presented in a range of different charts and graphs which can tell you a lot about how our Trust is performing over time. The main chart used for data analysis is a Statistical Process Chart (SPC) which helps to identify trends in performance a highlight areas for potential improvement. Each chart uses symbols to highlight findings and following analysis of each indicator an assurance RAG (Red, Amber, Green) rating is applied, please see key below:

Statistical Process Control (Trend Identification)					
Variation			Assurance		
	 	 			
Common Cause – no significant change	Special Cause or Concerning nature or higher pressure due to (H)igher or (L)ower values	Special Cause of improving nature of lower pressure due to (H)igher or (L)ower values	Variation indicates inconsistently hitting and passing and falling short of the target	Variation indicators consistently (P)assing the target	Variation Indicates consistently (F)alling short of the target
Assurance (How are we doing?)					
					
Meeting Target EPUT is achieving the standard set and performing above target/benchmark	Emerging Risk EPUT is performing under target in current month/ Emerging Trend	Hot Spot EPUT are consistently or significantly performing below target/benchmark / SCV noted / Target outside of UCL or UCL	Variance Trust local indicators which are at variance as a whole or have single areas at variance / at variance against national position	For Note These indicate data not currently available, a new indicator or no target/benchmark is set	Indicators at variance with National or Commissioner targets. These have been highlighted to Finance & Performance Committee.

SECTION 1 - Performance Summary

Summary of Inadequate Quality and Performance Indicators (Pg 6)



October Inadequate Performance

- 1.15 Admissions to Adult Facilities of under 16's
- 5.4 Mandatory Training

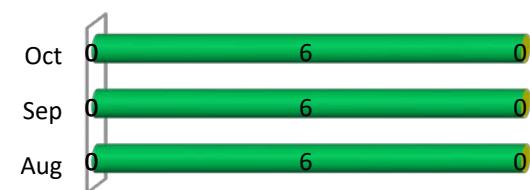
Summary of Oversight Framework Indicators (Pg 9)



October Inadequate Performance

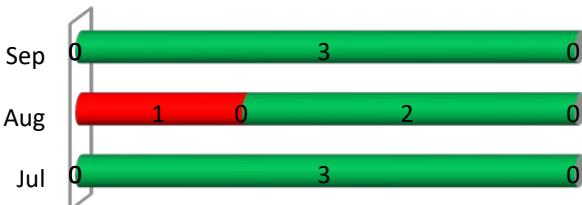
- 1.15 Admissions to Adult Facilities of under 16's

Summary of Safer Staffing Indicators (Pg 19)



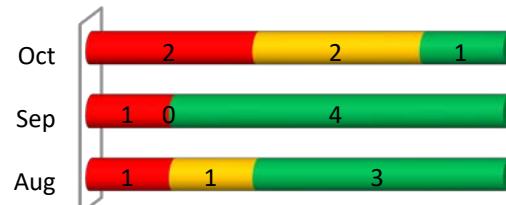
No risks identified within the Safer Staffing section.

CQC Summary (Pg 21)



The CQC Reset Action plan has now been completed with all actions having been met; the final actions were marked as complete at the Executive Steering Group on the 25th September. A new action plan will be developed following the conclusion of the next CQC inspection. One unannounced inspection was undertaken in October with feedback received in November.

Finance Summary (Pg 23)



October Inadequate Performance

- Cost improvement Programmes
- Capital Expenditure (CDEL)

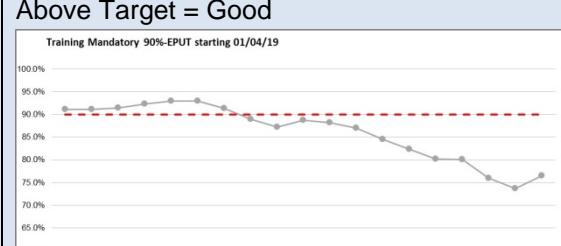
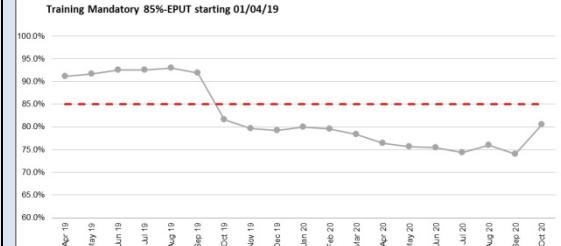
SECTION 2 - Summary of Inadequate Quality and Performance Indicators Scorecard

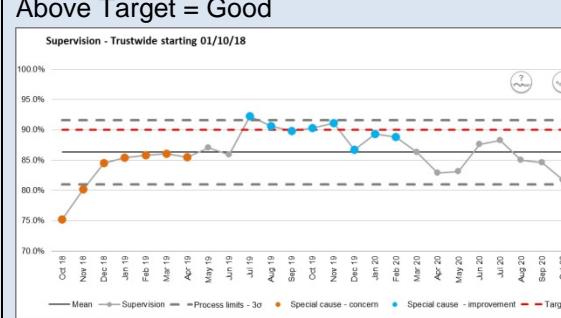
[Click here to return to Summary](#)

For Note:

- MH Serious Incidents: In October there were 9 Mental Health serious incidents within the Trust, this represents a small increase from our position in September and overall EPUT is continuing to see a reducing trend.
- CHS Serious Incidents: Zero Community Health serious incidents were reported in October and year to date.

Safe Indicators							
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date
		Perf	RAG				
1.15 Admissions to Adult Facilities of under 16's Committee: FPC Indicator: Oversight Framework Data Quality RAG: Green	Inadequate Any admissions of under 16's is reported to the CQC. ET have requested a piece of work to look at the history of admissions for under 16's required to support discussions with the Mental Health Partnership Board about the system looking at a solution to address the issues that lead to our organisation having to accept under 16's whilst appropriate care/beds is being sourced.	0 admissions to adult facilities of patients under 16	1	● One admissions in October and YTD.	●	Patient registered with NHS East & North Hertfordshire CCG admitted to Stort. Admitted due to no available CAMHS beds, patient remained on the HBPoS on Stort, necessary documentation was completed and CQC were notified.	N/A

Well-Led Indicators									
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date		
		Perf	RAG						
5.4 Training, Supervision and Appraisal 	Inadequate Committee: FPC Indicator: Oversight Framework Data Quality RAG: TBC			EPUT has now begun to encourage completion and compliance with these targets in preparation for them being reinstated. Gold Command monitor uptake weekly and have requested that there is a deep dive on the training that supports the patient safety strategy to ensure compliance in these areas is addressed. From October EPUT has now implemented a new training tracker system that streamlines the previous process. This migration to a new system has resulted in an improved quality of data which has been reflected in this months figures. Whilst this is a great improvement and the new system is working well there are still some changes to be made within reporting processes and this work remains ongoing. EPUT continues to operate with extended periods for training; all courses other than those that are statutory or high risk (Fire, Food Hygiene, Infection Prevention, Information Governance) have had the update period extended by 1 year. Face to face training was previously suspended however most courses have now returned to usual delivery in covid secure environments although spaces are limited within each course to allow appropriate distancing. Primary focus is currently on new recruits to the Trust however arrangements will be made for this groups who are now coming out of compliance. Appraisal deadlines have also been extended to 18 months from the original 12 month timescale.					
	5.4.1 % Staff Training – Mandatory Courses Target 90% Target 85%	76.5% 80.5%		Above Target = Good  		Mandatory Training is continuing to fall below target. Face to face training has commenced however with limited spaces per course.			

Well-Led Indicators							
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date
		Perf	RAG				
	5.4.2 % Staff Training – Essential Target 85%	79.4%	●	Above Target = Good 			
	5.4.3 % Staff Supervision Target 90%	81.7%	●	Above Target = Good 		Common Cause – no significant change Variation indicates inconsistently hitting and passing and falling short of the target	

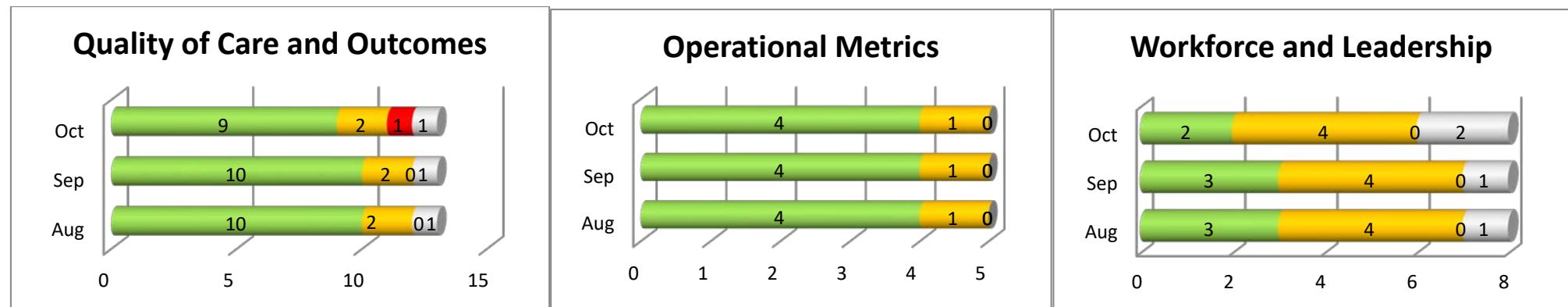
[Click here to return to Summary](#)

SECTION 3 – Oversight Framework

[Click here to return to Summary](#)

Summary

Please note the national Oversight Framework was revised in August 2019. Not all indicators have been issued with a target. Where there is a national target or benchmark this has been used to assess if there is inadequate performance (colour coded Amber) or if it requires improvement (colour coded red). The Oversight Framework highlighted that an indicator will be a cause for concern only if below targets set for 2 months therefore indicators have only been indicated as a risk if below for 2 months.

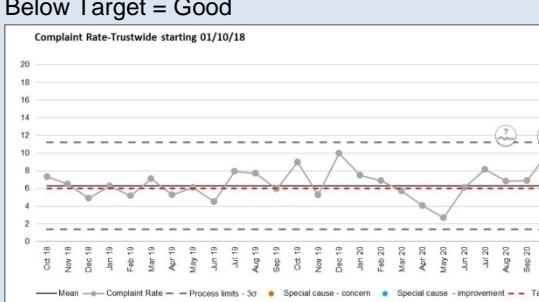


Inadequate

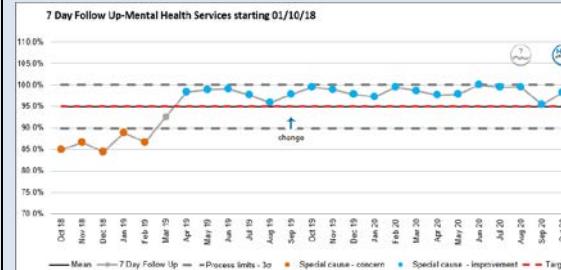
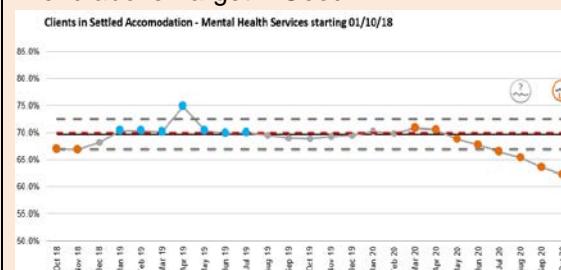
- Admissions to Adult Facilities of under 16's

Requires Improvement

- Complaint Rate
- Clients in Settled Accommodation
- Out of Area Placements
- Staff Survey indicators (4 indicators)

Quality of Care and Outcomes							
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date
		Perf	RAG				
5.1 CQC Rating Committee: FPC Data Quality RAG: Green	CQC rating of Good or above (no target set)	Good	●	CQC Unannounced Inspection (July – August 2019)			N/A
4.1 Complaints Committee: FPC Data Quality RAG: Green	4.1.1 Complaint Rate OF Target TBC Locally defined target rate of 6 each month	10.04	●	Below Target = Good  Complaint Rate - Trustwide starting 01/10/18 Oct 18 Nov 18 Dec 18 Jan 19 Feb 19 Mar 19 Apr 19 May 19 Jun 19 Jul 19 Aug 19 Sep 19 Oct 19 Nov 19 Dec 19 Jan 20 Feb 20 Mar 20 Apr 20 May 20 Jun 20 Jul 20 Aug 20 Sep 20 Oct 20 — Mean — Complaint Rate — Process limits - 30 ● Special cause - concern ● Special cause - improvement — Target	●	Performance remains inconsistent	N/A
5.6 Staff FFT Committee: FPC Data Quality RAG: Green	Staff Friends and Family Test % recommended – care (extremely likely or likely to recommend) Target 74%		●		●	Indicator suspended nationally over Covid period	N/A
1.1 Never Event Committee: Quality Indicator: Oversight	0 Never Events 2019/20 Outturn 0	0	●	Year to Date 0	●	Monitored over six-month rolling period	N/A

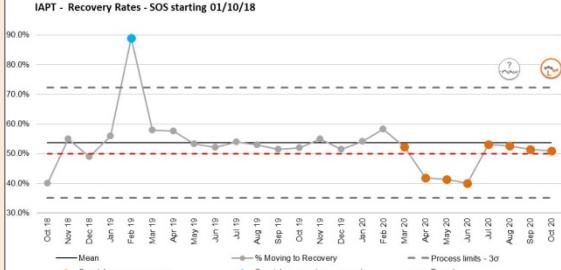
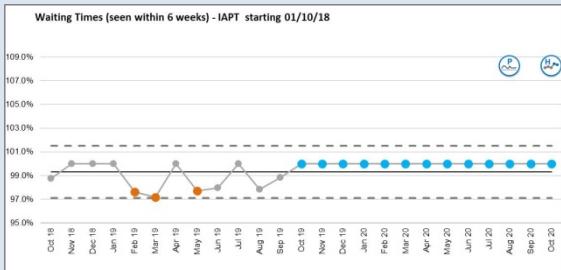
Quality of Care and Outcomes							
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date
		Perf	RAG				
Framework Data Quality RAG: Blue							
1.6 Safety Alerts Committee: Quality Indicator: OF Data Quality RAG: Green	There will be 0 Safety Alert breaches 2019/20 Outturn 0	0	●	Year to date there have been no CAS safety alerts incomplete by deadline.	●		N/A
3.1 Patient MH Survey Committee: Quality Data Quality RAG: Green	Positive Results from CQC MH Patient Survey		●	EPUT achieved the same or better in all 11 domains in the 2019 survey	●		N/A
3.3.1 Patient FFT MH Committee: Quality Data Quality RAG:	Mental health scores from Friends and Family Test – % positive (extremely likely or likely to recommend) Target = 88.3%	90.0%	●	NHS England have confirmed that Data collection for the Friends and Family Test (FFT) will resume from December 2020. Since April 2020 all forms were updated to ask a new mandatory standard question "Overall, how was your experience of our service". From December 2020 any old forms submitted will be disregarded. New forms can be obtained from the Patient Experience Team.	●	Very low number of responses for October. 10 total for MH 1 rated as Neither Good nor Poor.	N/A

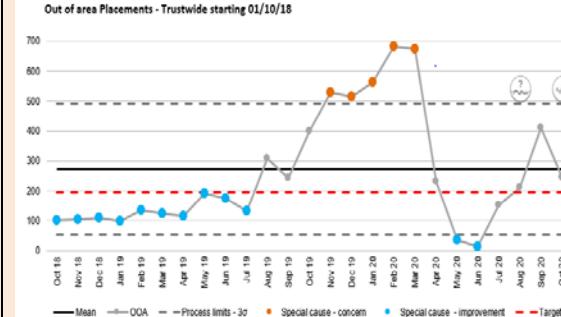
Quality of Care and Outcomes								
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date	
		Perf	RAG					
Green								
3.3.2 Patient FFT CHS 	Community scores from Friends and Family Test – % positive (extremely likely or likely to recommend) Target = 96% Committee: Quality Data Quality RAG: Green	100%				Very low number of responses for September. 4 total for CHS	N/A	
2.8.1 7 Day Follow Up 	95% of people on Care programme approach (CPA) are followed up within 7 days of discharge from hospital Target 95% Committee: Quality Data Quality RAG: Blue	98.2%		<p>Below Target = Good</p> 		<p>Special Cause of improving nature due to (H)igher values.</p> <p>Discharge follow up forms part of EPUT's "10 ways to improve safety" initiative.</p>	N/A	
2.4 Settled Accommodation 	% clients in settled accommodation (no target set) LA Target 70% Committee: Quality Data Quality RAG: Green	62.2%		<p>Trend above Target = Good</p> 		<p>Reduction in Paris data noted (62.2% in October)</p> <p>Special cause of concern due to seven months of decline.</p>	N/A	
2.5 Employment	% clients in employment (no target set)	37.5%		Trend above Target = Good		Assurance indicates consistently Passing target.	N/A	

Quality of Care and Outcomes								
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date	
		Perf	RAG					
Green	LA Target 7%					Decline in performance noted		
Amber	1.8 Patient Safety Incidents	Potential under-reporting of patient safety incidents Target >44.33	46.1		●	No significant trend noted however performance is inconsistent.	N/A	
Green	1.15 Under 16 Admissions	0 admissions to adult facilities of patients under 16	1	●	●	Patient registered with NHS East & North Hertfordshire CCG admitted to Stort Admitted due to no available CAMHS beds, patient remained on the HBPoS on Stort, necessary documentation was completed and CQC were notified.	N/A	

[Click here to return to Summary](#)

Operational Metrics									
RAG	Ambition / Indicator	Position M7		Trend			Nat RAG	Narrative	Recovery Date
		Perf	RAG						
4.6 First Episode Psychosis Committee: Quality Data Quality RAG: Green	All Patients with F.E.P begin treatment with a NICE recommended package of care within 2 weeks of referral Target 60%	73.7%	●	<p>Trend above Target = Good</p>			●	Target change effective April 20 (from 56% to 60%) October performance represents: 14 / 19 patients.	N/A
2.2 DQMI Committee: FPC Data Quality RAG: TBC Green	Data Quality Maturity Index (DQMI) – MHSDS dataset score above 95% Target 95%	96.3%	●	<p>Trend above target = good</p>			●	Latest published figures are for July 20	N/A
2.16.3/4 IAPT Recovery Rates Committee: FPC Data Quality RAG: Green	Improving Access to Psychological Therapies (IAPT) /talking therapies 50% of people completing treatment who move to recovery Target 50%	CPR 51.2%	●	<p>Trend above target = Good</p>			●	In April the IAPT service saw a higher than usual rate of self-discharges mid therapy. This was due to patient concerns around Covid-19.	
		SOS 51.0%	●	<p>Trend above target = Good</p>			●	The IAPT service for Southend saw a higher than usual and more sustained rate of self-discharges mid therapy (Apr-Jun). This was due to patient concerns around Covid-19.	

Operational Metrics								
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date	
		Perf	RAG					
								
2.16.5/6 IAPT Waiting Times  Committee: FPC Data Quality RAG: Green	Improving Access to Psychological Therapies (IAPT)/talking therapies b. waiting time to begin treatment: i) 75% within 6 weeks ii) 95% within 18 weeks	i) 100%		Trend above target = Good 		Consistently passing target	N/A	
		ii) 100%		Trend above target = Good 				
4.5 Out of Area Placements  Committee: FPC	Reduction in Out of Area Placements Target: Reduction to achieve 0 OOA by 2021	247		Below Target = Good		Reducing Out of Area Placements forms part of EPUT's "10 ways to improve safety" initiative. In October EPUT placed 12 new clients out of Area (11 Adult & one PICU), 11 remain (11 Adult) OOA at the end of October. 14 patients were repatriated in October (12 Adult & two PICU). The total Occupied bed days for all out of	N/A	

Operational Metrics									
RAG	Ambition / Indicator	Position M7		Trend			Nat RAG	Narrative	Recovery Date
		Perf	RAG						
Data Quality RAG: Amber								area placements in October was 247. OAP's for locked Rehab patients have been excluded (2 patients) as EPUT do not provide these bed types, therefore these would need to be placed out of area, this was discussed and agreed at ET in July 2020.	

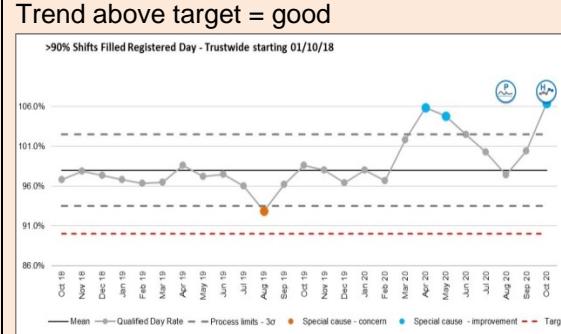
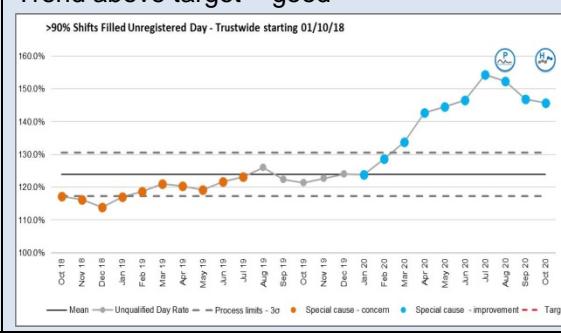
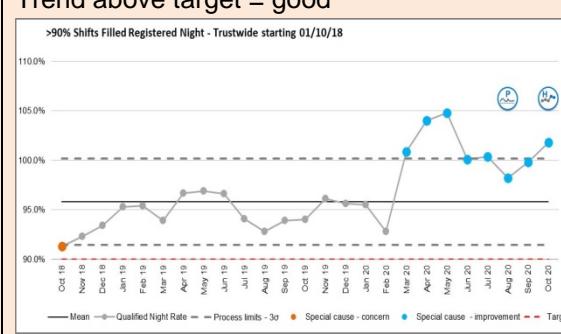
Workforce and Leadership									
RAG	Ambition / Indicator	Position M7		Trend			Nat RAG	Narrative	Recovery Date
		Perf	RAG						
5.3.1 Staff Sickness Committee: FPC Data Quality RAG: TBC	Sickness Absence consistent with MH Benchmark 6% EPUT Target <5.0%	Sep 4.5% Oct Draft 4.4%						*Please note sickness is reported in arrears to allow entry in to ESR.	N/A
5.2.2 Turnover Committee: FPC Data Quality RAG: TBC	Staff Turnover (Benchmark 2017/18 MH 12% / CHS 12.1%) OF Target TBC Target <12%	9.6%						Special Cause of improving nature of lower pressure due to (L)ower values. Reducing Turnover forms part of EPUT's "10 ways to improve safety" initiative.	N/A

Workforce and Leadership																						
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date															
		Perf	RAG																			
5.7.3 Temporary Staff Committee: FPC Data Quality RAG: TBC	Proportion of temporary Staff (Provider Return) OF Target TBC	6.1%	●	<p>Below Target = Good</p> <p>Temporary Staff - Trustwide starting 01/10/18</p> <p>Oct 18 Nov 18 Dec 18 Jan 19 Feb 19 Mar 19 Apr 19 May 19 Jun 19 Jul 19 Aug 19 Sep 19 Oct 19 Nov 19 Dec 19 Jan 20 Feb 20 Mar 20 Apr 20 May 20 Jun 20 Jul 20 Aug 20 Sep 20 Oct 20</p> <p>Mean Agency Staff Cost Process limits - 3o Special cause - concern Special cause - improvement Target</p>	N/A	Increase in temp staff usage in October however this brings performance back in line with average and pre-covid levels.	N/A															
5.5 Staff Survey Committee: FPC Data Quality RAG: Green	The Staff Survey is currently underway for 2020 and will close on 27th November. As at 6th November 42% of staff have completed their survey, this is in line with 41% at this point in the 2019 survey. The aim this year is to reach a response rate of 60%. If we reach this figure, all staff members who have completed the survey will go into a prize draw ran anonymously by Quality Health to win £1000.	<p>Recommendation of the organisation as a place to work or receive treatment</p> <table border="1"> <thead> <tr> <th>Staff Survey 2019</th> <th>EPUT</th> <th>National Average</th> <th>Comments</th> </tr> </thead> <tbody> <tr> <td>C21a Care of patients / Service users is my organisations top priority</td> <td>74.3%</td> <td>73.6%</td> <td>Better than last year.</td> </tr> <tr> <td>C21c I would recommend my organisation as a place to work</td> <td>58.9%</td> <td>62.4%</td> <td>Worse than average</td> </tr> <tr> <td>C21d If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation</td> <td>60.8%</td> <td>67.52%</td> <td>Below average</td> </tr> </tbody> </table>					Staff Survey 2019	EPUT	National Average	Comments	C21a Care of patients / Service users is my organisations top priority	74.3%	73.6%	Better than last year.	C21c I would recommend my organisation as a place to work	58.9%	62.4%	Worse than average	C21d If a friend or relative needed treatment I would be happy with the standard of care provided by this organisation	60.8%	67.52%	Below average
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Workforce and Leadership																							
RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative		Recovery Date															
		Perf	RAG																				
Team Work	Team Work	<p>Teamwork Average of:</p> <ul style="list-style-type: none"> • % agreeing that their team has a set of shared objectives • % agreeing that their team often meets to discuss the team's effectiveness <table border="1"> <thead> <tr> <th>Staff Survey 2019</th> <th>EPUT</th> <th>National Average</th> <th>Comments</th> <th></th> </tr> </thead> <tbody> <tr> <td>Q4h The Team I work in has a set of shared objectives</td> <td>75.4%</td> <td>73.7%</td> <td>Better than average and better than last year.</td> <td>●</td> </tr> <tr> <td>Q4i The Team I work in often meets to discuss the team's effectiveness</td> <td>68.5%</td> <td>69.1%</td> <td>Below Average better than last year</td> <td>●</td> </tr> </tbody> </table> <p>Trusts in lowest third across the sector will represent a concern</p>							Staff Survey 2019	EPUT	National Average	Comments		Q4h The Team I work in has a set of shared objectives	75.4%	73.7%	Better than average and better than last year.	●	Q4i The Team I work in often meets to discuss the team's effectiveness	68.5%	69.1%	Below Average better than last year	●
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<p>Inclusion (1) Average of</p> <ul style="list-style-type: none"> • % staff believing the trust provides equal opportunities for career progression or promotion • % experiencing discrimination from their manager/team leader or other colleagues in the last 12 months <p>Requires Improvement</p> <table border="1"> <thead> <tr> <th>Staff Survey 2019</th> <th>EPUT</th> <th>National Average</th> <th>Comments</th> <th></th> </tr> </thead> <tbody> <tr> <td>Q14 Does your organisation act fairly with regard to career progression / promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age</td> <td>82.4%</td> <td>85.1%</td> <td>Below Average</td> <td>●</td> </tr> <tr> <td>Q15b Discrimination at work from manager / team leader or other colleagues in last 12 months</td> <td>8.1%</td> <td>6.4%</td> <td>Above average</td> <td>●</td> </tr> </tbody> </table>							Staff Survey 2019	EPUT	National Average	Comments		Q14 Does your organisation act fairly with regard to career progression / promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age	82.4%	85.1%	Below Average	●	Q15b Discrimination at work from manager / team leader or other colleagues in last 12 months	8.1%	6.4%	Above average	●		
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<p>Inclusion (2)</p> <p>The BME leadership ambition (WRES) re executive appointments.</p> <p>Later this month EPUT will be publishing its latest Workforce Race Equality Standard (WRES) data, followed by a presentation at the Board meeting on 30th September. The figures show a positive story, as EPUT has improved in a number of areas, but further work is still needed to improve the experiences of our Black, Asian and minority ethnic colleagues. EPUT's action plan for the next year will re-emphasise our zero-tolerance of racism in all its forms.</p>																							

SECTION 4 – Safer Staffing Summary

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RAG	Ambition / Indicator	Position M7		Trend	Nat RAG	Narrative	Recovery Date
		Perf	RAG				
Please note that the below indicators do not include apprentices or aspiring nurses who are awaiting their pin and who are currently working on the wards.							
Day Qualified Staff 	We will achieve >90% of expected day time shifts filled.	106.4%		<p>Trend above target = good</p> 		The following wards were below target in October: Adult: Ardleigh CAMHS: Poplar - Rochford Specialist: Dune Nursing Home: Clifton Lodge	N/A
Day Un-Qualified Staff 	We will achieve >90% of expected day time shifts filled.	145.8%		<p>Trend above target = good</p> 		The were no wards below target in October	N/A
Night Qualified Staff 	We will achieve >90% of expected night time shifts filled	101.8%		<p>Trend above target = good</p> 		The following wards were below target in October: Older Adult: Kitwood, Henneage & Beech - Rochford Nursing Homes: Rawreth Court	N/A

Safer Staffing									
RAG	Ambition / Indicator	Position M7		Trend			Nat RAG	Narrative	Recovery Date
		Perf	RAG						
Night Un-Qualified Staff 	We will achieve >90% of expected night time shifts	179.9%		<p>Trend above target = good</p> <p>>90% Shifts Filled Unregistered Night - Trustwide starting 01/10/18</p> <p>Oct 18 Nov 18 Dec 18 Jan 19 Feb 19 Mar 19 Apr 19 May 19 Jun 19 Jul 19 Aug 19 Sep 19 Oct 19 Nov 19 Dec 19 Jan 20 Feb 20 Mar 20 Apr 20 May 20 Jun 20 Jul 20 Aug 20 Sep 20 Oct 20</p> <p>— Mean — Fill rates below 90% — Process limits - 3σ ● Special cause - concern ● Special cause - improvement - Target</p>				No wards were below target in October.	N/A
Fill Rate 	We will monitor fill rates and take mitigating action where required	8		<p>Below Target = Good</p> <p>Fill Rates: monitor and take mitigating action where required - Trustwide starting 01/10/18</p> <p>Oct 18 Nov 18 Dec 18 Jan 19 Feb 19 Mar 19 Apr 19 May 19 Jun 19 Jul 19 Aug 19 Sep 19 Oct 19 Nov 19 Dec 19 Jan 20 Feb 20 Mar 20 Apr 20 May 20 Jun 20 Jul 20 Aug 20 Sep 20 Oct 20</p> <p>— Mean — Fill rates below 90% — Process limits - 3σ ● Special cause - concern ● Special cause - improvement - Target</p>				The following wards had fill rates of <90% in October: Adult: Ardleigh Older Adult: Beech – Rochford, Henneage & Kitwood Nursing Homes: Clifton Lodge & Rawreth Court Specialist: Dune CAMHS: Poplar – Rochford	N/A
Shifts Unfilled 	We will monitor fill rates and take mitigating action where required	9		<p>Below Target = Good</p> <p>Shifts Unfilled: monitor and take mitigating action where required - Trustwide starting 01/10/18</p> <p>Oct 18 Nov 18 Dec 18 Jan 19 Feb 19 Mar 19 Apr 19 May 19 Jun 19 Jul 19 Aug 19 Sep 19 Oct 19 Nov 19 Dec 19 Jan 20 Feb 20 Mar 20 Apr 20 May 20 Jun 20 Jul 20 Aug 20 Sep 20 Oct 20</p> <p>— Mean — Shifts unfilled 100Days+ — Process limits - 3σ ● Special cause - concern ● Special cause - improvement - Target</p>				The following wards had more than 10 days without shifts filled in October: Adult: Gosfield Older Adult: Kitwood, & Hennage Nursing Homes: Clifton Lodge & Rawreth Court CAMHS: Poplar - Rochford Specialist: Edward House CHS: Avocet LD: Heath Close	

SECTION 5 – CQC

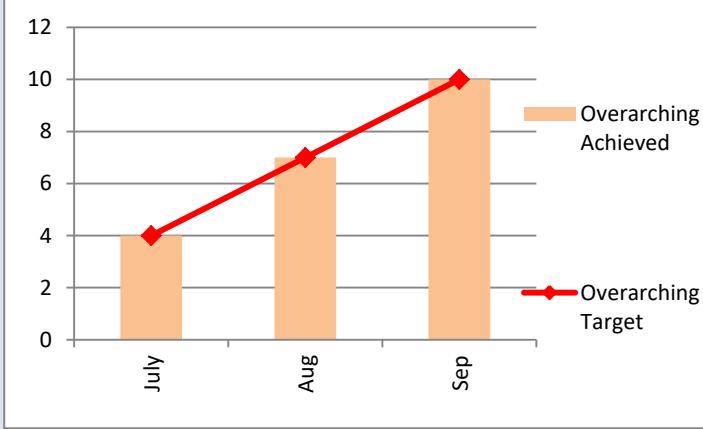
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The CQC Reset Action plan has now been completed with all actions having been met; the final actions were marked as complete at the Executive Steering Group on the 25th September. A new action plan will be developed following the conclusion of the next CQC inspection.

The CQC completed an unannounced inspection on the 29th October focusing on Finchingfield Ward following a series of incidents that took place on the 23rd October. The CQC provided high-level verbal feedback immediately following the inspection.

As part of the CQC inspection to Finchingfield, the CQC have sent in a raft of information requests and undertook a remote audit of patient records supported by operational staff and the Compliance team.

The CQC provided a high level feedback letter on the 3rd November and this has been developed into an Intensive Clinical Support Plan to begin addressing the concerns. This will be used to prepare for the final inspection report and the action plan that will need to be provided to the CQC following their publication of the final inspection report.

RAG	Ambition / Indicator	Position	Trend (below target = good)	Narrative												
	There will be 0 CQC Overarching Must Do and Should Do actions past timescale	-	 <p>A bar chart titled 'Trend (below target = good)' showing the number of CQC Overarching Actions from July to September. The Y-axis ranges from 0 to 12. The legend indicates two series: 'Overarching Achieved' (orange bars) and 'Overarching Target' (red line with diamond markers). The chart shows the following data points:</p> <table border="1"><thead><tr><th>Month</th><th>Overarching Achieved</th><th>Overarching Target</th></tr></thead><tbody><tr><td>July</td><td>4</td><td>4</td></tr><tr><td>Aug</td><td>7</td><td>7</td></tr><tr><td>Sep</td><td>10</td><td>10</td></tr></tbody></table>	Month	Overarching Achieved	Overarching Target	July	4	4	Aug	7	7	Sep	10	10	The Reset CQC Action Plan is complete as at 25 th September.
Month	Overarching Achieved	Overarching Target														
July	4	4														
Aug	7	7														
Sep	10	10														

RAG	Ambition / Indicator	Position	Trend (below target = good)	Narrative								
CQC Must do Actions	There will be 0 CQC Must Do actions past timescale	-	<table border="1"> <thead> <tr> <th>Month</th> <th>Must Do Achieved</th> </tr> </thead> <tbody> <tr> <td>July</td> <td>~2</td> </tr> <tr> <td>August</td> <td>~4</td> </tr> <tr> <td>Sep</td> <td>~12</td> </tr> </tbody> </table>	Month	Must Do Achieved	July	~2	August	~4	Sep	~12	The Reset CQC Action Plan is complete as at 25 th September.
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July	~2											
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Month	Should Do Achieved											
July	~4											
August	~6											
Sep	~10											

SECTION 6 - Finance

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RAG	Ambition / Indicator	Position	Trend																																								
Capital Expenditure (CDEL)	Maximising Capital Resources	<p>Having successfully secured additional funds to eliminate mental health dormitories, the Trust's Capital programme has significantly increased this year to £17.3m. The Trust is currently mobilising a significant number of schemes to make sure the resources are fully utilised; this represents a significant investment and spend in the latter part of this financial year.</p>	The Capital Programme has been attached as an appendix to the Finance Report.																																								
Trust I&E 2020/21	Operating Income and Expenditure	<p>The Trust continues to operate within the adapted financial regime; this includes national income allocations for months 7 to 12. The year-to-date £1.7m deficit is broadly in line with the submitted plan. During the first 6 months of the year income and expenditure have been matched under the adapted regime.</p>	<p>Operating I&E Performance against Plan</p> <p>This chart tracks the I&E Deficit over time. The Y-axis ranges from £0k to £2,500k in £500k increments. The X-axis shows months from Apr-20 to Mar-21. A green line represents the Plan, which stays near zero until Oct-20, then drops sharply to approximately £1,700k by Nov-20, and remains relatively stable thereafter. A red bar represents the Actual deficit, which follows the plan closely throughout the period.</p> <table border="1"> <caption>I&E Deficit Data (Approximate)</caption> <thead> <tr> <th>Month</th> <th>Plan (£k)</th> <th>Actual (£k)</th> </tr> </thead> <tbody> <tr><td>Apr-20</td><td>0</td><td>0</td></tr> <tr><td>May-20</td><td>0</td><td>0</td></tr> <tr><td>Jun-20</td><td>0</td><td>0</td></tr> <tr><td>Jul-20</td><td>0</td><td>0</td></tr> <tr><td>Aug-20</td><td>0</td><td>0</td></tr> <tr><td>Sep-20</td><td>0</td><td>0</td></tr> <tr><td>Oct-20</td><td>0</td><td>~1,700</td></tr> <tr><td>Nov-20</td><td>~1,700</td><td>~1,700</td></tr> <tr><td>Dec-20</td><td>~1,700</td><td>~1,700</td></tr> <tr><td>Jan-21</td><td>~1,700</td><td>~1,700</td></tr> <tr><td>Feb-21</td><td>~1,700</td><td>~1,700</td></tr> <tr><td>Mar-21</td><td>~1,700</td><td>~1,700</td></tr> </tbody> </table>	Month	Plan (£k)	Actual (£k)	Apr-20	0	0	May-20	0	0	Jun-20	0	0	Jul-20	0	0	Aug-20	0	0	Sep-20	0	0	Oct-20	0	~1,700	Nov-20	~1,700	~1,700	Dec-20	~1,700	~1,700	Jan-21	~1,700	~1,700	Feb-21	~1,700	~1,700	Mar-21	~1,700	~1,700	
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Cost Improvement Programmes	Planned improvement in productivity and efficiency	<p>The Trust's CIP target for 20/21 is £11.7m, including the 19/20 recurrent CIP shortfall brought forward of £5.1m. In Year savings of £7.8m have been agreed with £0.8m identified as in pipeline. Recurrent savings at Month 7 are £3.6m have been agreed.</p>	<p>CIP Progress (FYE) - at Month 7 20/21</p> <p>This chart shows the status of CIPs across different departments. The X-axis represents the percentage of progress from 0% to 100%. The Y-axis lists departments: Chief Executive, Finance & Resources, Nursing, Strategy & Transf., People & Culture, Medical, Mental Health, Specialist Services, and Community. For each department, there are three bars: a green bar for Developed, a yellow bar for CIPs Pipeline, and a red bar for CIP Unidentified.</p> <table border="1"> <caption>CIP Progress Data (Approximate)</caption> <thead> <tr> <th>Department</th> <th>Developed (%)</th> <th>Pipeline (%)</th> <th>Unidentified (%)</th> </tr> </thead> <tbody> <tr><td>Chief Executive</td><td>100</td><td>0</td><td>0</td></tr> <tr><td>Finance & Resources</td><td>85</td><td>10</td><td>5</td></tr> <tr><td>Nursing</td><td>20</td><td>80</td><td>0</td></tr> <tr><td>Strategy & Transf.</td><td>0</td><td>100</td><td>0</td></tr> <tr><td>People & Culture</td><td>40</td><td>0</td><td>60</td></tr> <tr><td>Medical</td><td>45</td><td>0</td><td>55</td></tr> <tr><td>Mental Health</td><td>20</td><td>0</td><td>80</td></tr> <tr><td>Specialist Services</td><td>0</td><td>0</td><td>100</td></tr> <tr><td>Community</td><td>10</td><td>10</td><td>80</td></tr> </tbody> </table>	Department	Developed (%)	Pipeline (%)	Unidentified (%)	Chief Executive	100	0	0	Finance & Resources	85	10	5	Nursing	20	80	0	Strategy & Transf.	0	100	0	People & Culture	40	0	60	Medical	45	0	55	Mental Health	20	0	80	Specialist Services	0	0	100	Community	10	10	80
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Temporary Staffing	Level of Temporary Staffing Costs	The Trust has made good progress in reducing its historic reliance on agency staffing. Overall temporary staffing costs for the month of £4.3m including Bank usage (£3.0m) remain significant (20% of total pay spend M7).	<p style="text-align: center;">Pay Cost Analysis</p> <table border="1"> <caption>Data for Pay Cost Analysis (Approximate Values)</caption> <thead> <tr> <th>Month</th> <th>Agency</th> <th>Bank</th> <th>Substantive</th> <th>Budget-Total Pay</th> </tr> </thead> <tbody> <tr><td>Apr-20</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>May-20</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Jun-20</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Jul-20</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Aug-20</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Sep-20</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Oct-20</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Nov-20</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Dec-20</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Jan-21</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Feb-21</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> <tr><td>Mar-21</td><td>~2k</td><td>~2k</td><td>~17.5k</td><td>~21.5k</td></tr> </tbody> </table>	Month	Agency	Bank	Substantive	Budget-Total Pay	Apr-20	~2k	~2k	~17.5k	~21.5k	May-20	~2k	~2k	~17.5k	~21.5k	Jun-20	~2k	~2k	~17.5k	~21.5k	Jul-20	~2k	~2k	~17.5k	~21.5k	Aug-20	~2k	~2k	~17.5k	~21.5k	Sep-20	~2k	~2k	~17.5k	~21.5k	Oct-20	~2k	~2k	~17.5k	~21.5k	Nov-20	~2k	~2k	~17.5k	~21.5k	Dec-20	~2k	~2k	~17.5k	~21.5k	Jan-21	~2k	~2k	~17.5k	~21.5k	Feb-21	~2k	~2k	~17.5k	~21.5k	Mar-21	~2k	~2k	~17.5k	~21.5k															
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Cash Balance	Positive Cash Balance	The cash balance at the end of October £97.9m is better than planned £93.7m. The variance is mainly due to: capital spend less than anticipated; less trade creditor payments than anticipated and less Pay expenditure than anticipated. The supplementary national payment is also still to unwind and will be reflected in future months.	<p style="text-align: center;">Cash Balance</p> <table border="1"> <caption>Data for Cash Balance (Approximate Values)</caption> <thead> <tr> <th>Month</th> <th>Actual 20/21</th> <th>Forecast 20/21</th> <th>Actual 19/20</th> <th>Plan 20/21</th> </tr> </thead> <tbody> <tr><td>Jan-20</td><td>~75,000</td><td>~75,000</td><td>~75,000</td><td>~75,000</td></tr> <tr><td>Feb-20</td><td>~75,000</td><td>~75,000</td><td>~75,000</td><td>~75,000</td></tr> <tr><td>Mar-20</td><td>~65,000</td><td>~65,000</td><td>~65,000</td><td>~65,000</td></tr> <tr><td>Apr-20</td><td>~95,000</td><td>~95,000</td><td>~75,000</td><td>~95,000</td></tr> <tr><td>May-20</td><td>~98,000</td><td>~98,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Jun-20</td><td>~98,000</td><td>~98,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Jul-20</td><td>~98,000</td><td>~98,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Aug-20</td><td>~98,000</td><td>~98,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Sep-20</td><td>~98,000</td><td>~98,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Oct-20</td><td>~98,000</td><td>~98,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Nov-20</td><td>~88,000</td><td>~88,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Dec-20</td><td>~88,000</td><td>~88,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Jan-21</td><td>~88,000</td><td>~88,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Feb-21</td><td>~88,000</td><td>~88,000</td><td>~75,000</td><td>~98,000</td></tr> <tr><td>Mar-21</td><td>~60,000</td><td>~60,000</td><td>~75,000</td><td>~60,000</td></tr> </tbody> </table>	Month	Actual 20/21	Forecast 20/21	Actual 19/20	Plan 20/21	Jan-20	~75,000	~75,000	~75,000	~75,000	Feb-20	~75,000	~75,000	~75,000	~75,000	Mar-20	~65,000	~65,000	~65,000	~65,000	Apr-20	~95,000	~95,000	~75,000	~95,000	May-20	~98,000	~98,000	~75,000	~98,000	Jun-20	~98,000	~98,000	~75,000	~98,000	Jul-20	~98,000	~98,000	~75,000	~98,000	Aug-20	~98,000	~98,000	~75,000	~98,000	Sep-20	~98,000	~98,000	~75,000	~98,000	Oct-20	~98,000	~98,000	~75,000	~98,000	Nov-20	~88,000	~88,000	~75,000	~98,000	Dec-20	~88,000	~88,000	~75,000	~98,000	Jan-21	~88,000	~88,000	~75,000	~98,000	Feb-21	~88,000	~88,000	~75,000	~98,000	Mar-21	~60,000	~60,000	~75,000	~60,000
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END

SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	Agenda Item No: 5(c)i 02 December 2020
Report Title:	Report from the Chair of the Quality Committee	
Executive/Non-Executive Lead:	Amanda Sherlock, Committee Chair & NED	
Report Author(s):	Natalie Hammond, Executive Nurse	
Report discussed previously at:		
Level of Assurance:	Level 1 <input checked="" type="checkbox"/> Level 2	Level 3

Purpose of the Report

This report provides a highlight of work and key issues reviewed by the Committee during the period 01 November 2019 – 31 October 2020 from the Chair's perspective.

Approval	
Discussion	
Information	x

Recommendations/Action Required

The Council of Governors is asked to:

1. Note the contents of this report.

Summary of Key Issues

The Committee is an integral part of the Trust's corporate governance arrangements and committee structure which has been established in-line with statutory and regulatory requirements.

The Committee is responsible for ensuring compliance with any mandatory regulatory guidance, relevant statutory requirements and contractual obligations. The duties of the Committee include:

- Obtaining assurance that high standards of care and patient safety are provided by the Trust
- Obtaining assurance that adequate and appropriate governance processes and controls are in place to promote safety and excellence in patient care
- Ensuring the effective and efficient use of resources through evidence based clinical practice
- Oversight of quality improvement, innovation and research and delivery against national and local priorities
- Oversight of the protection of Trust employees in relation to health, safety and wellbeing.
- Identify, manage and prioritise risks arising from delivery of clinical care

The main issues which the Committee dealt with during the last 12 months included:

- Consideration of patient stories and delivery against lessons learnt
- Review of policies and procedures
- Received and monitored Sub-Committee assurances
- Agreement of the Trust's quality priorities and supporting frameworks
- Delivery against CQC standards and action plans from CQC inspection received in October 2019.
- Learning from deaths (Mortality Review)
- Review of relevant BAF risks
- Approval of annual reports
- Embedding of quality improvement methodologies across key workstreams
- Introduction of frameworks and guidance to manage and reduce risks associated with COVID-19 for staff and service users.

Assurance was provided that the Quality Committee had been fulfilling its terms of reference and that any issues and recommendations identified were escalated to other committees and/or Board as appropriate, and that all risks were recorded on the appropriate risk registers

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	X
SO 2: Achieve top 25% performance	X
SO 3: Valued system leader focused on integrated solutions	x

Which of the Trust Values are Being Delivered

1: Open	x
2: Compassionate	x
3: Empowering	x

Relationship to the Board Assurance Framework (BAF)

Are any existing risks in the BAF affected?	YES
If yes, insert relevant risk	
Do you recommend a new entry to the BAF is made as a result of this report?	

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:

Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Healthwatch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	
Financial implications:	
	Capital £ Revenue £ Non Recurrent £
Governance implications	x
Impact on patient safety/quality	
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed? YES/NO	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors

Holding the NEDs to account for the performance of the Trust	✓
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	

Acronyms/Terms Used in the Report

CQC	Care Quality Commission	NEDs	Non Executive Directors
BAF	Board Assurance Framework	MDT	Multi-Disciplinary Team
QI	Quality Improvement		

Supporting Documents and/or Further Reading

Accompanying report

Lead



**Amanda Sherlock
Committee Chair & NED**

Agenda Item: 5(c)
Council of Governors Meeting Part 1
02 December 2020

**REPORT FROM THE CHAIR OF THE
BOARD OF DIRECTORS QUALITY COMMITTEE**

1 Purpose of Report

This report is provided to the Council of Governors by the Chair of the Quality Committee. It is designed to highlight the work and key issues reviewed by the Committee during the period 1 November 2019 to 31 October 2020 from the Chair's perspective.

The Committee is responsible for ensuring compliance with any mandatory regulatory guidance, relevant statutory requirements and contractual obligations.

2 Summary

2.1 Committee Purpose

The Committee is an integral part of the Trust's corporate governance arrangements and committee structure which has been established in line with statutory and regulatory requirements.

The duties of the Committee include:

- Obtaining assurance that high standards of care and patient safety are provided by the Trust
- Obtaining assurance that adequate and appropriate governance processes and controls are in place to promote safety and excellence in patient care
- Ensuring the effective and efficient use of resources in the delivery of evidence based clinical practice
- Protect health, safety and wellbeing of Trust Employees
- Identify, manage and prioritise risks arising from clinical care

2.2 Membership

The Committee is comprised of:

- Non-Executive director (Chair of Committee)
- Non-Executive Director (Vice Chair of the Quality Committee)
- Non-Executive Director
- Executive Medical Director (Caldicott Guardian)
- Executive Nurse
- Executive Director of People & Culture

In attendance (as required):

- Director of Mental Health, Mid & South Essex
- Director of Specialist Services
- Director Compliance & Assurance
- Director ITT Business Analysis and Reporting
- Chief Pharmacist
- Trust Secretary
- Director of Nursing and Infection Prevention and Control

- Associate Director of Planning
- Other Directors and Officers as deemed necessary

2.3 Review

The Quality Committee met 10 times during the period 01 November 2019 – 31 October 2020. Due to the COVID-19 pandemic, two meetings were cancelled (March 2020 and August 2020). All meetings have been held virtually since April 2020.

An assurance report is produced following any meeting of the Committee and presented to the Board of Directors. There is an opportunity to raise questions in a timely manner on any matters of discussion or scrutiny at the Quality Committee.

I would like to bring to Governors attention the following issues which the Committee dealt with during the last 12 months:

- Each meeting includes a presentation of a patient story and/or Quality Improvement project. Presentations included:

Patient Story:

- The successful transition of a female patient from children's services to adult services that highlighted high levels of engagement, therapeutic activities and use of positive risk taking strategies
- A quality improvement project between EPUT 4 CAMHS at the St Aubyn's Centre and Colchester Hospital Paediatric Department
- A patient story that emphasised the impact of Covid requirements e.g. the need for isolation on mental health and wellbeing. Learning from this story inclusive of MHA and Safeguarding requirements was shared as part of a lunchtime learning event
- The journey of a lady with dementia that highlighted the positive factors picked up by the CQC that resulted in the Trust receiving an outstanding rating for end of life care
- The successful rehabilitation of a 34 year old female as a result of positive interventions between Plane ward, CCG and Askham Rehabilitation Unit in Cambridge
- The gradual reduction of restrictions of a male service user following positive interventions whilst in seclusion that resulted in the need for transfer to secure services and/ or treatment resistant specialist facilities to be avoided
- A positive patient story regarding the rehabilitation of a patient during the COVID-19 pandemic
- Learning as a result of family engagement associated with the death of a female patient following an unexpected death
- A report where the Chelmer Ward multi-disciplinary team provided individualised high quality care for a patient with complex needs
- Details of a proactive collaborative and integrated systems approach to a service users experience on an Adult Acute Inpatient Ward
- Rapid learning in the management of COVID-19 and mental health, inclusive of MHA and safeguarding issues
- The impact of high quality family liaison support to a family pre, post and during the coronial process. The feedback not only highlighted the positive impact of the role to the family but in addition showed the importance of feedback to individual workers

Quality Improvement:

- Received a Quality Priority – Falls presentation
- Received a Dementia & Frailty Transformation presentation
- Received a HWE STP – Integration & Primary/Community Care Model presentation

- Received a Quality Priority – Deteriorating Patient presentation
 - Received a LD Standards presentation
- Review Committee Terms of Reference annually
- Review and approval of year end quality reports and quality accounts
- Review and sign off of quality policies and procedures
- Alternate months review of the Trust's Quality Report. This report includes data and information on safe staffing, performance and trends against key quality metrics
- Receive a quarterly Quality Strategy Update Report which also includes an update on Quality Academy every six months
- Receive a quarterly Perfect Ward update report
- Receive and review every quarter the BAF Action Plans for risks related to quality
- Receive and review progress of the Internal Audit Programme six monthly
- Monthly CQC reports covering preparation for CQC visits, CQC spot visit investigation reports, comprehensive inspection report findings and monitoring of CQC action plans for progress against timeframes
- Receive an annual Establishment Review Report
- Review, monitor and implement agreed Trust systems for recognising and rewarding quality
- The Quality Committee receives reports from a number of sub-committees including:
 - Health, Safety and Security
 - Clinical Governance & Quality
 - Patient and Carer Experience
 - Physical Health
 - Equality and Inclusion
 - Learning Oversight
 - Mortality Review
 - Multi-Professional Education
 - Mental Health Act & Safeguarding
 - QI & Innovation
 - Research and Innovation
 - End of Life
 - Restrictive Practice
 - Information Governance
- Where any annual reports are required for Board sign off, and this is delegated to the Quality Committee, the Committee has reviewed such reports. Examples include: Infection Control, Clinical Audit, Organisational Resilience, Medicines Management, Pharmacy and Medicines Optimisation, WRES, Emergency Preparedness Resilience & Response, Local Security Management and Safeguarding and Mental Health Act
- Review and approval of frameworks and strategies. Examples include Quality Strategy, Patient Safety Strategy, COVID-19 Board Assurance Framework, Research Programme and Governance Framework, IG Framework, QI Framework, Security Framework, Medicines Optimisation Strategy, Restrictive Practice Framework and Suicide Prevention Strategy
- Quarterly Mortality reports as per national guidance have been presented to the Committee prior to the Board of Directors, and these reports have been reviewed as work has progressed in-line with national requirements. Further to this, relevant national reports, including the LeDeR Annual Report, have been reviewed.

2.4 Assurance

In my opinion the Quality Committee has been fulfilling its terms of reference during the period 01 November 2019 to 31 October 2020.

I can also assure governors that issues and recommendations identified were escalated to other committees and the Board of Directors as appropriate, and that all risks were recorded on the appropriate risk registers.

3 Action Required

The Council of Governors is asked to note the work of the Board of Directors Quality Committee undertaken during the period 01 November 2019 to October 31 2020.

Report prepared by:

Natalie Hammond
Executive Nurse

On behalf of

Amanda Sherlock
Chair of the Committee and NED
24 November 2020

		Agenda Item No: 5c(ii)	
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	2 December 2020	
Report Title:	Assurance Report from the Chair of the People, Innovation & Transformation Committee		
Executive/Non-Executive Lead:	Dr Alison Rose-Quirie Non-Executive Director and Chair of Committee		
Report Author(s):	Nigel Leonard Executive Director Strategy & Transformation		
Report discussed previously at:	N/A		
Level of Assurance:	Level 1 <input checked="" type="checkbox"/>	Level 2 <input type="checkbox"/>	Level 3 <input type="checkbox"/>

Purpose of the Report

This report is provided to the Council of Governors by the Chair of the People, Innovation & Transformation Committee. It is designed to highlight the work of the Committee during the period 1 June – 2 November 2020, from the Chair of the Committee's perspective.

Approval	
Discussion	
Information	✓

Recommendations/Action Required

The Council of Governors is asked to note the work of the People, Innovation & Transformation Committee for the period 1 June – 2 November 2020.

Summary of Key Issues

This report outlines:

- the purpose of the Committee;
- the membership of the Committee;
- committee meetings that have taken place since June 2020;
- activities undertaken by the Committee during that period;
- assurance that the Committee has been fulfilling its Terms of Reference.

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	✓
SO 2: Achieve top 25% performance	✓
SO 3: Valued system leader focused on integrated solutions	✓

Which of the Trust Values are Being Delivered

1: Open	✓
2: Compassionate	✓
3: Empowering	✓

Relationship to the Board Assurance Framework (BAF)

Are any existing risks in the BAF affected?	Yes
If yes, insert relevant risk	BAF18
Do you recommend a new entry to the BAF is made as a result of this report?	No

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:	
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	✓
Data quality issues	
Involvement of Service Users/Healthwatch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	✓
Financial implications:	Nil
Governance implications	✓
Impact on patient safety/quality	✓
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed?	YES/NO
If YES, EIA Score	No

Acronyms/Terms Used in the Report			

Supporting Documents and/or Further Reading			
None			

Lead
 Dr Alison Rose-Quirie Chair of the People, Innovation & Transformation Committee

**Part 1 Agenda Item: 5c(ii)
Council of Governors Part 1
2 December 2020**

ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

PEOPLE, INNOVATION & TRANSFORMATION COMMITTEE

1.0 PURPOSE OF REPORT

This report is provided to the Council of Governors by the Chair of the People, Innovation & Transformation Committee. It is designed to highlight the work of the Committee during the period 1 June – 2 November 2020, from the Chair of the Committee's perspective.

2.0 COMMITTEE PURPOSE

The Terms of Reference for the Committee were approved in June 2020.

The Committee is an integral part of the Trust's corporate governance arrangements and committee structure which has been established in line with statutory and regulatory requirements, the NHSE/I's Code of Governance, and the Trust's Constitution and good practice.

The role of the Committee is to:

- Inform and support the Board in the development of the Trust's current and future strategic direction and Commercial Strategy, making recommendations to the Board as appropriate.
- Oversee and provide strategic direction on behalf of the Board, and oversee engagement with all health and care systems in which the Trust currently operates, or may operate in the future.
- Keep abreast of wider sector developments and policy direction in order to inform the Board on options for the Trust's future strategic direction.
- Have oversight of the delivery of the Trust's transformation programmes.
- Have oversight of workforce strategy and planning, organisational development, talent management, mandatory training and the Just Culture.
- Promote the work of the EPUT Lab and digital developments.

3.0 MEMBERSHIP

The Committee membership comprises of:

- Four Non-Executive Directors, including:
 - The Chair of the Trust.
 - One Non-Executive Director, other than the Chair of the Trust, to be the Chair of the Committee.
- Chief Executive Officer
- Executive Director of Strategy & Transformation (Executive Lead for the Committee).
- Executive Chief Finance & Resources Officer.
- Executive Director of People & Culture.

In attendance (as required):

- Executive Director Mental Health//Deputy Chief Executive Officer.
- Executive Medical Director.
- Executive Nurse.
- Other Directors and Officers of the Trust, including deputies for Executive Directors.

4.0 REVIEW

The Committee is required to meet every two months, as necessary to fulfil its responsibilities, and in exceptional circumstances as determined by the Chair.

The People, Innovation & Transformation Committee has met three times since June 2020:

- 1 June 2020
- 26 August 2020
- 2 November 2020

Activities undertaken by the Committee during this period included:

- Updates on People Issues and Learning during the Covid-19 pandemic.
- System reset and recovery arrangements following Wave 1 of the Covid-19 pandemic, and the Impact on EPUT.
- Monitoring the Trust's Joint Venture project with Provide and NELFT, relating to the development of an integrated community service offer across Essex.
- Commencement of work to produce the Trust's Commercial Strategy.
- Committee Work Plan reviews.
- Innovations Updates.
- Updates on the New People Plan
- Monitoring the Trust's transformational activity.
- Monitoring the Trust's workforce transformation activity.
- Monitoring the Trust's activity in relation to the end of the EU Exit Transition Period.
- Receipt of regular Contract Negotiation and Tender Submissions updates.
- Updates on the Trust's three STPs, and their involvement in the system.
- Updates on the Primary Care Network offer.

5.0 ASSURANCE

In my opinion, the Committee has been fulfilling its Terms of Reference during this period.

6.0 ACTION REQUIRED

The Council of Governors is asked to:

1. Note the work of the People, Innovation & Transformation Committee undertaken during the period 1 June – 2 November 2020.

Report produced by:

Nigel Leonard
Executive Director of Strategy & Transformation

On behalf of:

Dr Alison Rose-Quirie
Chair of the People, Innovation & Transformation Committee

		Agenda Item No: 5d
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	2 December 2020
Report Title:		Care Quality Commission (CQC) Update
Executive/Non-Executive Lead:		Paul Scott, Chief Executive Officer
Report Author(s):		Amanda Webb, Compliance Officer
Report discussed previously at:		N/A
Level of Assurance:		Level 1 ✓ Level 2 Level 3

Purpose of the Report	
This report provides an update on CQC related activity and a summary of progress being made to respond to the findings of CQC inspection of Trust services.	Approval
	Discussion
	Information ✓

Recommendations/Action Required	
The Council of Governors is asked to:	
1 Note the contents of the report.	

Summary of Key Issues	
This report provides:	
<ul style="list-style-type: none"> • CQC Update regarding the transitional regulatory approach • Details of the unannounced inspection (October 2020) • Details of registration requirements that the Trust have undertaken 	
Relationship to Trust Strategic Objectives	
SO 1: Continuously improve service user experiences and outcomes	✓
SO 2: Achieve top 25% performance	✓
SO 3: Valued system leader focused on integrated solutions	

Which of the Trust Values are Being Delivered	
1: Open	✓
2: Compassionate	✓
3: Empowering	✓

Relationship to the Board Assurance Framework (BAF)	
Are any existing risks in the BAF affected?	No
If yes, insert relevant risk	
Do you recommend a new entry to the BAF is made as a result of this report?	No

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:	
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	✓
Data quality issues	
Involvement of Service Users/Healthwatch	✓
Communication and consultation with stakeholders required	
Service impact/health improvement gains	✓
Financial implications:	
	Capital £
	Revenue £
	Non Recurrent £
Governance implications	✓
Impact on patient safety/quality	✓
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed?	YES/NO
If YES, EIA Score	

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	✓
Representing the interests of Members and of the public	✓
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	

Acronyms/Terms Used in the Report	
CQC	Care Quality Committee

Supporting Documents and/or Further Reading	
Accompanying Report	

Lead	
Paul Scott	
Chief Executive Officer	

ESSEX PARTNERSHIP UNIVERSITY NHS FOUNDATION TRUST

CQC Compliance Update

1. Introduction

This report provides the Council of Governors with an update on CQC related activity and a summary of progress being made to respond to the findings of CQC inspection of Trust services.

2. Preparing for Annual Inspection

2.1. CQC Update

The CQC confirmed on 16th March 2020 immediate cessation of routine CQC Inspections however it may be necessary to still use some of their inspection powers in a very small number of cases where risks are identified and as such focused inspections at short notice may take place.

On the 16th September 2020, the CQC Chief Inspectors, and Deputy Chief Inspector and lead for mental health services, issued a joint statement setting out how they will regulate during the next phase of the coronavirus (COVID-19) pandemic.

They confirm that from the 6th October 2020, they will begin to roll out their transitional regulatory approach, starting with adult social care and then rolling out to all trusts from the 12th October 2020.

The transitional regulatory approach is flexible and builds on what the CQC learned during the height of the pandemic. The key components are:

- A strengthened approach to monitoring, with clear areas of focus based on existing Key Lines of Enquiry (KLOEs), to enable them to continually monitor risk in a service
- Use of technology and their local relationships to have better direct contact with people who are using services, their families and staff in services
- Inspection activity that is more targeted and focused on where they have concerns, without returning to a routine programme of planned inspections.

The CQC will continue to adapt their transitional regulatory approach, and remain responsive as the situation changes.

3. CQC Unannounced Inspection (October 2020)

3.1. Inspection Findings

The CQC carried out an unannounced focused inspection of Finchingfield Ward (adult acute in-patient service at Linden Centre) on 29th October. The CQC provided high level feedback immediately following the inspection advising of some keys areas where improvement is required. The CQC has confirmed that a report will be provided in 2 weeks.

As part of the CQC inspection to Finchingfield the CQC sent in a raft of information requests which were responded to within the timeframe given and a remote audit of patient records was undertaken by the CQC supported by operational staff and the Compliance team.

The CQC provided a high level feedback letter on the 3rd November which identified the following positive areas:

- Patients gave positive feedback on the ward staff and environment. They did not raise any concerns relating to their safety or the way they were treated by staff.
- The Trust ensured there was support available to patients and staff following the evening of Friday 23 October. This included access to senior leaders and de-briefs from Psychologists.

However, there were also issues identified within the feedback letter; that they identified as holding the Trust back:

- There were examples of poor record keeping, one being the MHA status of patients, and there was a lack of quality assurance processes to ensure medical records were accurate.
- Multi-disciplinary meeting notes were added to the patient record post serious incident and were not completed in full.
- Clinical decisions had been made by staff who were not of the right grade according to Trust policy. This example related to the reduction of patient observation levels. The rationale was not recorded in the patient record.
- Observations were not carried out as prescribed. Patients were not observed, as required, in the garden area which may have contributed to one incident of a patient jumping the garden fence.
- Observation records did not support staff to accurately reflect the time they observed patients as they were pre populated with hourly intervals.

All of these areas have been considered by the Intensive Clinical Support Group (see below) and actions identified. The actions will be monitored via the Intensive Clinical Support Group and will be used to prepare for the final inspection report and the action plan that will need to be provided to the CQC following their publication of the final inspection report.

3.2. Immediate Action Taken

Following the incident on the evening of Friday 23rd October a number of immediate actions were taken including reflective investigation with staff to understand the root cause of the incident, the removal of the smoking shelter in the garden and upgrading of the lock at the front entrance of the Linden Centre. Support was given to staff and patients following the incident and this support is continuing.

An Intensive Clinical Support Group has been established and has met twice to identify appropriate support for the unit, further actions to be taken and wider organisational learning. This is a MDT group with support from different corporate services.

An initial support plan has been developed, this will continue to be revised as we work through our intensive clinical support programme and following the receipt of the CQC inspection report. The plan has been developed using a quality and improvement collaborative approach with a focus on understanding root causes and staff education. In addition opportunities for wider organisation learning are being captured.

Since the CQC visit to the unit the following actions have been undertaken:

- Reflection on record keeping with the team (at Team Huddle and in Team Meeting). This lead to a change in process for completion of handover sheet which is now electronic and kept centrally so all staff can access. In addition the monthly handover audit is being changed to a weekly audit. Change in practice has been initiated around copying and pasting in the clinical record.
- A review of the Trust Engagement and Supportive Observation Policy and Procedure has been undertaken to ensure this does not support the pre-population of observation times. Reflection has been undertaken with the clinical team on ensuring recording is to the minute.
- Confirmation that the Trust incident reporting system does date and time stamp incident reports
- Additional clinical support has been identified from Practice Development Team who are working with the ward

Our Intensive Clinical Support Group is continuing to meeting regularly to support the unit in making required improvement and taking forward the improvement plan.

4. Meeting Registration Requirements

Under the Care Quality Commission (Registration) Regulations 2009: Regulation 15, the Trust is required to notify the CQC, in advance, of any changes to its Directors or CQC Nominated Individual. CQC can prosecute for a breach of this regulation therefore the following were submitted following approval by Trust Board:

- Change in CEO
- Change in Nominated Individual.
- Change in CFO
- Change in COO

5. Recommendations and Action Required

The Council of Governors is asked to:

1. Note the contents of this report

Report Prepared by:

**Amanda Webb
Compliance Officer**

On behalf of:

**Paul Scott
Chief Executive**

		Agenda Item No: 5f	
SUMMARY REPORT	Council of Governors Part 1	2 December 2020	
Report Title:	Summary of EPUT Progress and Work Streams to address Bullying and Harassment		
Executive/Non-Executive Lead:	Sean Leahy, Executive Director of People & Culture		
Report Author(s):	Debbie Prentice, HR Business Partner		
Report discussed previously at:	N/A		
Level of Assurance:	Level 1 <input checked="" type="checkbox"/>	Level 2 <input type="checkbox"/>	Level 3 <input type="checkbox"/>

Purpose of the Report

The purpose of this report is to provide the Council of Governors with a summary of progress and work streams to address bullying and harassment within the Trust.

Approval

Discussion

Information

Recommendations/Action Required

The Council of Governors is asked to:

- 1 Note the contents of this report.

Summary of Key Issues

This report has been developed following a discussion at the extra-ordinary Council of Governors meeting on the 12 June 2020 where bullying and harassment was identified following a presentation of the results of the Staff Survey 2019. An action was agreed that a report would be presented to the Council of Governors providing assurance of the work being undertaken by the Trust to address these concerns.

Full details are provided in the attached report.

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes

SO 2: Achieve top 25% performance

SO 3: Valued system leader focused on integrated solutions

Which of the Trust Values are Being Delivered

1: Open	<input checked="" type="checkbox"/>
2: Compassionate	<input checked="" type="checkbox"/>
3: Empowering	<input checked="" type="checkbox"/>

Relationship to the Board Assurance Framework (BAF)

Are any existing risks in the BAF affected?	No
If yes, insert relevant risk	
Do you recommend a new entry to the BAF is made as a result of this report?	

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:

Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives

Data quality issues

Involvement of Service Users/Healthwatch

Communication and consultation with stakeholders required

Service impact/health improvement gains

Financial implications:	Capital £	
	Revenue £	
	Non Recurrent £	
Governance implications		✓
Impact on patient safety/quality		
Impact on equality and diversity		
Equality Impact Assessment (EIA) Completed?	NO	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	✓
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors	

Acronyms/Terms Used in the Report			
ABA	Anti-Bullying Ambassadors		
HBA	Harassment, Bullying or Abuse		
F2SU	Freedom to Speak Up		

Supporting Documents and/or Further Reading	
Report on Summary of EPUT Progress and Work Streams to address Bullying and Harassment	

Lead

Debbie Prentice HR Business Partner

**Agenda Item 5f
Council of Governors Part 1
2 December 2020**

EPUT

**Summary of EPUT Progress and
Work Streams to address Bullying and Harassment**

1 Purpose of Report

The purpose of this report is to give assurance to the Council of Governors on the Trusts approach to Anti-Bullying and harassment.

2 Background and Data

Anti-bullying remains a priority area for EPUT based on the last set of staff survey results released March 2019.

2019 Staff Survey – Bullying Results

		2017	2018	2019
13a	HBA Patients Public	28.5 –	31.8 ↑	31.6 ↓
13b	HBA Managers	11.6 –	12.2 ↑	12.4 ↑
13c	HBA Colleagues	16.1 –	18.3 ↑	18.5 ↑
13d	Did you Report it?	55 –	56.1 ↑	55.6 ↓
	Overall Theme	8.1 –	7.9 ↓	7.9 –

[HBA = Harassment, Bullying or Abuse]

In addition to these overall results each Directorate receives its own breakdown of performance on bullying and harassment scores so that they are able to identify their own performance compared to the year previous. (Alongside other key themes).

The table below shows the individual ranking of directorates for Bullying and Harassment overall scores for each directorate and how they compare to the Trust overall.

The top scores and averages are across Trusts of a similar type to EPUT, Community and Mental Health.

Theme 7 Bullying and Harassment Overall	
TOP SCORE	8.7
AVERAGE SCORE	8.2
EPUT SCORE	7.9
CORPORATE	8.8
BEDS	8.6
SEE COMMUNITY	8.0
WEST ESSEX	7.8
MENTAL HEALTH OPS	7.6
SPECIALIST MENTAL HEALTH	7.4

3 Strategies to tackle Bullying and Harassment

The following sets out our key approaches to reducing levels of bullying and harassment for EPUT.

Localised Action Plans

Each directorate has developed its own Action Plan to address their staff survey results including Bullying and Harassment.

Team Development and Away Days

Anti-Bullying forms a key part of these events and any issues raised by the directorates are discussed at the planning stage so that the correct level of emphasis can be given.

Values and Behaviours

These are weaved through all of our EPUT learning including on the Management and Leadership Development programmes

Joint Staff Forums Focus

These committees are given an progress update on Anti-Bullying for every meeting to ensure Staff Side are involved and abreast of what is going on

Link with the FTSU Guardian

We have a close working relationship with the FTSU Guardian who makes us aware of any behaviour related issues so that appropriate interventions can be put in place.

Full Annual reporting

Each year in March when the official staff survey results are released, a full reporting schedule takes place including all key committees and a presentation to Trust Board. A triangulation report is also completed to analyse trends alongside Employee Relations and Datix data.

Race and Disability

Each of these groups have their own dedicated plans as part of the Workforce Equality Standard Action Plans and they include work to reduce discrimination.

Annual Anti-Bullying Week – November Annually

Each year the profile is raised of anti-bullying alongside a calendar of events. This year's Anti-Bullying Week was 16 – 20 November 2020 and featured in the Chief Executive's 'Live Brief'.

Anti-Bullying Ambassadors

The Trust now has a cohort of 26 trained and skilled anti-bullying ambassadors to support staff dealing with difficult situations at work

Anti-Bullying Toolkit

There is a full toolkit in place that staff and managers can use that is updated regularly based on staff feedback

Anti-Bullying Intranet Page

There is a dedicated page on the intranet where staff can go to access resources and support

Dignity, Respect and Grievance Policy and Procedure

The Trust's policy and procedure is currently being reviewed to reflect the Trust's Just & Learning Culture, more emphasis will be placed on resolution and achieving positive outcomes including the pro-active use of the Trust's Mediation Service.

EPUT People Plan

Our response to the People Plan contains actions to support the objective of preventing and tackling bullying, harassment and abuse against staff, and create a culture of civility and respect these actions are monitored through the People Innovation and Culture Committee. The Trust is currently awaiting a Civility Toolkit from NHS England.

4 Action Required

The Council of Governors are asked to note the contents of this report and seek clarification as required.

Report prepared by

**Debbie Prentice
HR Business Partner
27 November 2020**

		Agenda Item No: 6(a)				
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	02 December 2020				
Report Title:	Deputy Lead Governor Election Outcome					
Report Lead:	Sheila Salmon Chair of the Trust					
Report Author(s):	Chris Jennings, Assistant Trust Secretary					
Report discussed previously at:	N/A					
Level of Assurance:	Level 1	✓	Level 2		Level 3	

Purpose of the Report

This report provides the outcome of the process to elect a Deputy Lead Governor for the Council of Governors.

Approval**Discussion****Information**

✓

Recommendations/Action Required

The Council of Governors is asked to:

- 1 Note the contents of the report.

Summary of Key Issues

The Council of Governors approved the process for electing the Deputy Lead Governor on the 23 September 2020 as the term for the incumbent, Brian Arney, was due to end on the 2 October 2020.

The nominations process commenced on the 24 September 2020 and two Public Governors put themselves forward for the role, receiving the required seconding from another Governor. Therefore, on the 14 October 2020, ballot papers were circulated to all Governors and voting commenced.

Voting closed at 5pm on the 21 October 2020, with 18 of 29 (62%) of the ballots returned by the deadline. The votes returned the following result:

Name of Candidate	Total Votes
Mark Dale, Public Governor, Essex Mid & South	6
Pippa Ecclestone, Public Governor, West Essex & Hertfordshire	12

Therefore, Pippa Ecclestone was successfully elected as Deputy Lead Governor for a term of two-years commencing on the 23 October 2020, congratulations to Pippa.

Our thanks also go to Brian Arney for his hard work in the role over his two terms in the role.

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	✓
SO 2: Achieve top 25% performance	✓
SO 3: Valued system leader focused on integrated solutions	

Which of the Trust Values are Being Delivered

1: Open	✓
2: Compassionate	
3: Empowering	✓

Relationship to the Board Assurance Framework (BAF)	
Are any existing risks in the BAF affected?	No
If yes, insert relevant risk	
Do you recommend a new entry to the BAF is made as a result of this report?	No

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:	
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Healthwatch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	
Financial implications:	
	Capital £ Revenue £ Non Recurrent £
Governance implications	✓
Impact on patient safety/quality	
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed?	YES/NO
	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors	✓

Acronyms/Terms Used in the Report			
CoG	Council of Governors		

Supporting Documents and/or Further Reading			

Lead			
Sheila Salmon			
Chair of the Trust			

		Agenda Item No: 6(b)	
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	02 December 2020	
Report Title:	Outcome of the Council of Governors Efficacy Review 2020		
Report Lead:	James Day, Interim Trust Secretary		
Report Author(s):	James Day, Interim Trust Secretary Chris Jennings, Assistant Trust Secretary		
Report discussed previously at:	N/A		
Level of Assurance:	Level 1	✓ Level 2	Level 3

Purpose of the Report

The report provides details and key findings of the self-assessment undertaken by Governors and the light touch desk-top review undertaken of the documentation supporting the Council of Governors meetings and Governing Body Standing Committee meetings in the period 1 October 2019 to 30 September 2020 as part of the 2020 Governing Body efficacy review.

Approval	
Discussion	✓
Information	

Recommendations/Action Required

The Council of Governors is asked to:

- 1 Note the contents of the report.
- 2 Seek clarity where required.
- 3 Form recommendations on the facts provided which encompass input from all Governors and stakeholders such as the Chair and Trust Secretary, and to deliver a related action plan for further consideration by the Council of Governors.

Summary of Key Issues

It is good practice to undertake regular reviews of the efficacy of the governance structures within organisations in order to ensure that they are designed and operating effectively in the often rapidly changing environment in which they operate. This includes Councils of Governors. It is also a recommendation of the NHS Code of Governance that efficacy reviews are undertaken on an annual basis; and evidence of this forms part of the Annual Reporting process.

This review provides positive feedback in relation to the documentation available to Council of Governors and its Standing Committees. It confirms that the Council of Governors and Standing Committees have been well supported and involved by that documentation, and that well informed and recorded decisions are taken on the basis of paperwork which continues to be effective and fit for the purpose for which it was produced.

The results of the self-assessment part of the efficacy review had responses that were mostly positive. Key statements that received the highest and lowest scores have been picked-out to ensure success is celebrated and areas for improvement identified.

Full results of the efficacy review are provided in the attached report for consideration by the Council of Governors. The results of the Council of Governors self-assessment have been included as Appendices 1 & 2 for information.

Relationship to Trust Strategic Objectives	
SO 1: Continuously improve service user experiences and outcomes	✓
SO 2: Achieve top 25% performance	✓
SO 3: Valued system leader focused on integrated solutions	

Which of the Trust Values are Being Delivered	
1: Open	✓
2: Compassionate	
3: Empowering	✓

Relationship to the Board Assurance Framework (BAF)	
Are any existing risks in the BAF affected?	No
If yes, insert relevant risk	
Do you recommend a new entry to the BAF is made as a result of this report?	No

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:	
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Healthwatch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	
Financial implications:	Capital £ Revenue £ Non Recurrent £
Governance implications	✓
Impact on patient safety/quality	
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed?	YES/NO
	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	✓
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors	

Acronyms/Terms Used in the Report	
CoG	Council of Governors

Supporting Documents and/or Further Reading	
Main Report	
Appendix 1: Council of Governors Self-Assessment Results Summary	
Appendix 2: Council of Governors Self-Assessment Comments Summary	

Lead	
James Day, Interim Trust Secretary	

Agenda Item 6(b)
Council of Governors Part 1
2 December 2020

**OUTCOME OF THE COUNCIL OF GOVERNORS
EFFICACY REVIEW 2020**

1.0 PURPOSE OF REPORT

The report provides details and key findings of the self-assessment undertaken by Governors and the light touch desk-top review undertaken of the documentation supporting the Council of Governors meetings and Governing Body Standing Committee meetings in the period 1 October 2019 to 30 September 2020 as part of the 2020 Governing Body efficacy review.

2.0 EXECUTIVE SUMMARY

- 2.1 This review provides positive feedback in relation to the documentation available to Council of Governors and its Standing Committees. It confirms that the Council of Governors and Standing Committees have been well supported and involved by that documentation, and that well informed and recorded decisions are taken on the basis of paperwork which continues to be effective and fit for the purpose for which it was produced.
- 2.2 The documentation provided enables the Council of Governors and its Standing Committees to discharge their statutory responsibilities effectively, and no significant documentary shortcomings requiring remedy or creating risks have been identified within the current format and structure of meetings. The papers were of “Board Quality”.
- 2.3 The results of the self-assessment part of the efficacy review have been summarised below with the majority of responses being mostly positive. There summaries have been developed to pick out the key statements that received the highest and lowest scores to ensure success is celebrated and areas for improvement identified.
- 2.4 The findings are set out in the report as follows:
 - Section 6 – Council of Governors
 - Section 7.1 – Governance Committee
 - Section 7.2 – Membership Committee
 - Section 7.3 – Nominations Committee
 - Section 7.4 – Remuneration Committee
 - Section 7.5 – Training and Development Committee
- 2.5 Note is made of the mass of information presented for the COG meeting and it is likely that consideration of this will form part of the work undertaken by the Council of Governors Agenda Task and Finish group anticipated to meet and report in early 2021.
- 2.6 Whilst outside the immediate scope of this review, it has been recognised that there is a beneficial regular flow of briefings and constructive correspondence between Governors, Executives, Non-Executives and Trust Secretary Office staff. This non-formal documentation has, since the last review, maintained and strengthened interaction and the information available to Governors about internal and external developments impacting upon the Trust.

3.0 BACKGROUND AND CONTEXT

- 3.1 It is good practice to undertake regular reviews of the efficacy of the governance structures within organisations in order to ensure that they are designed and operating effectively in the often rapidly changing environment in which they operate. This includes Councils of Governors.
- 3.2 It is also a recommendation of the NHS Code of Governance that efficacy reviews are undertaken on an annual basis; and evidence of this forms part of the Annual Reporting process.
- 3.3 For reference, the Council of Governors Roles and Responsibilities forming the context of the review are replicated in italics below, as taken from the Council of Governors Standing Orders:

2.0 *Council of Governors Roles and Responsibilities*

- 2.1 *The purpose of these SOs is to ensure that the highest standards of corporate governance and conduct are applied to all Council meetings and associated deliberations*
- 2.2 *The roles and responsibilities of the Council which are to be carried out in accordance with the Trust's constitution, licence and Monitor's NHS Foundation Trust Code of Governance (July 2014) (and any subsequent versions) are:*

General Duties

- 2.2.1 *To hold the Non-Executive Directors individually and collectively to account for the performance of the Board, including ensuring that the Board acts so that the Trust does not breach the terms of its licence. "Holding the Non-Executive Directors to account" includes scrutinising how well the Board is working, challenging the Board in respect of its effectiveness, and asking the Board to demonstrate that it has sufficient quality assurance in respect of the overall performance of the Trust, questioning Non-Executive Directors about the performance of the Board and of the Trust and making sure to represent the interests of the Trust's members and of the public in doing so*
- 2.2.2 *To represent the interests of the members of the Trust and the interests of the public*

Chair and Non-Executive Directors

- 2.2.3 *To approve the policies and procedures for the appointment and removal of the Chair and/or Non-Executive Directors in accordance with any guidance issued by Monitor and on the recommendation of the Council's Nominations Committee*
- 2.2.4 *To appoint and remove the Chair and other Non-Executive Directors. The Council should only exercise its power to remove the Chair or any other Non-Executive Directors after exhausting all means of engagement with the Board*
- 2.2.5 *To approve the policies and procedures for the appraisal of the Chair and Non-Executive Directors on the recommendation of the Council's Remuneration Committee. The performance of Non-Executive Directors should be subject to regular appraisal and review. All Non-Executive Directors should be submitted for re-appointment at regular intervals. The*

Council should ensure planned and progressive refreshing of the Non-Executive Directors

- 2.2.6 *To decide the remuneration, allowances and other terms of office for the Chair and Non-Executive Directors having regard to the recommendations of the Council's Remuneration Committee. Professional advisers should be consulted to market test the remuneration levels of the Chair and other Non-Executives Directors at least once every three years and when there is a material change to the remuneration of the Chair or another Non-Executive Director.*

Chief Executive

- 2.2.7 *To approve the appointment of the Chief Executive of the Trust.*

Auditors

- 2.2.8 *To approve the criteria for the appointment, removal and re-appointment of the auditor*
- 2.2.9 *To appoint, remove and reappoint the auditor having regard to the recommendation of the Trust's Audit Committee.*

Strategy Planning

- 2.2.10 *To provide feedback to the Board on the development of the strategic direction of the Trust, as appropriate*
- 2.2.11 *To collaborate with the Board in the development of the Trust's forward plan*
- 2.2.12 *Where the forward plan contains a proposal that the Trust will carry out activities other than the provision of goods and services for the purpose of the NHS in England, to determine whether it is satisfied that the carrying out of the activity will not to any significant extent interfere with the fulfilment by the Trust of its principal purpose or the performance of its other functions, and notify its determination to the Board*
- 2.2.13 *Where the Trust proposes to increase by 5% or more the proportion of its total income in any financial year attributable to activities other than the provision of goods and services for the purpose of the NHS in England, approve such a proposal*
- 2.2.14 *To approve entering into any significant transactions (as defined under paragraph 49 and Annex 9 of the constitution) in accordance with the 2006 Act and the constitution*
- 2.2.15 *When appropriate, to make recommendations for the revision of the constitution and approve any amendments to the constitution in accordance with the 2006 Act and the constitution*
- 2.2.16 *To receive the Trust's annual accounts, any report of the auditor on them, and the annual report at a general meeting of the Council.*

Representing Members and the Public

- 2.2.17 *To prepare and from time to time review the Trust's membership engagement strategy and policy*

2.2.18 *To notify Monitor, via the Lead Governor, if the Council is concerned that the Trust is at risk of breaching the terms of its licence, and if these concerns cannot be resolved at local level*

2.2.19 *To report to the members annually on the performance of the Council*

2.2.20 *To promote membership of the Trust and contribute to opportunities to recruit and engage members in accordance with the membership strategy*

2.2.21 *To seek the views of stakeholders and feedback to the Board*

2.3 *All business shall be conducted in the name of the Trust*

4.0 AIM OF THE REVIEW

4.1 The aim of this review of the documentation available to the Council of Governors and its Standing Committees has been to:

- Assess the efficacy of the documentation available to the Council of Governors in fulfilling its role and responsibilities outlined in the Standing Orders;
- Assess the efficacy of the documentation available to the Standing Committee sub-structure in supporting the Council of Governors to fulfil its role and responsibilities;
- Identify any issues of note

4.2 The aim of the self-assessment element of the efficacy review was to allow Governors the opportunity to self-assess the performance of the Council to allow recommendations to be identified.

5.0 METHODOLOGY

5.1 The review was split into two sections, self-assessment and documentation review.

5.2 The documentation review has been undertaken by means of a desk top review of the documentation provided to the Council of Governors and its Standing Committees for the period 1 October 2019 – 30 September 2020 including:

- Terms of Reference/Standing Orders
- Agendas
- Minutes
- Action logs
- Work Plans
- Reports presented
- Reports presented from the Sub-Committees to the Council of Governors

5.3 Conclusions have been drawn from the above documentation review relating to the information presented and quality of papers

5.4 The documentation review has been undertaken by the Interim Trust Secretary who joined the Trust on 1st October 2020 and came to the documentation independently and afresh.

5.5 The self-assessment was undertaken by Governors using an online portal to complete questionnaires developed using best practice questions provided by Evalu8 and additional questions used in previous efficacy reviews. These consisted of an

overarching Council of Governors questionnaire and individual questionnaires for each of the CoG sub-committees to be completed by members of the sub-committees:

- 5.6 The results of the sub-committee self-assessments have been summarised below, however, full results have not been attached to this report due to length. These will be shared with the sub-committee members for consideration and developing recommendations. It should be noted that the scores denoted as percentages are weighted to incorporate the difference between "Strongly Agree/Disagree" and "Agree/Disagree".
- 5.7. This report does not make any recommendations, but instead provides the feedback for the Council of Governors. The Council of Governors is asked to consider the feedback and agree a process for making recommendations.

6.0 COUNCIL OF GOVERNORS REVIEW FINDINGS

6.1 Council of Governors Documentation Review

6.1.1 The Council of Governors (COG) met six times within the period of the review with these meetings being virtual from May onwards as a result of the COVID 19 pandemic. Two of these meetings had been extraordinary meetings convened to consider the position relating to Chair / NED terms and conditions of office and NED appointment to more than one NHS body. A written resolution process was undertaken in April 2020 to the appointment of a new CEO

6.1.2 *Coverage of Terms of Reference:*

The Constitution and Standing Orders are used to frame the structure and operation of the COG. The responsibilities of the COG were set out earlier in this report:

6.1.3 *Action log / work plan:*

An action log was presented to each meeting. Progress against actions was positive, discussed and minuted.

An internal work plan for the COG with a schedule of known annual reporting requirements over the period May 2020 to February 2021 has been created which will allow the TSO to ensure the statutory requirements of the Council of Governors are consistently met.

6.1.4 *Papers:*

Papers presented to the COG were timely and of good "Board Level" quality with summary covering papers accompanying reports which clearly set out the action required. Content was presented in a range of formats appropriate to the subject matter, although the mass of information was of note. The papers provided did cover the areas expected to enable the Governors to discharge their duties and also beyond, but also provided opportunities for Governors to make their own enquiry about the principal risks being addressed by NEDs and the Trust.

In addition to the written papers, presentations to supplement Governor knowledge were given, with the slides being made available thereafter.

Regular correspondence and written briefings between Governors, Executives, Non-Executives and Trust Secretary Office staff supplemented COG information between meetings

6.1.5 *Minutes:*

The minutes of the COG meetings were of a high standard and clearly and succinctly provided a record of decisions taken and actions agreed when compared against the relevant agenda.

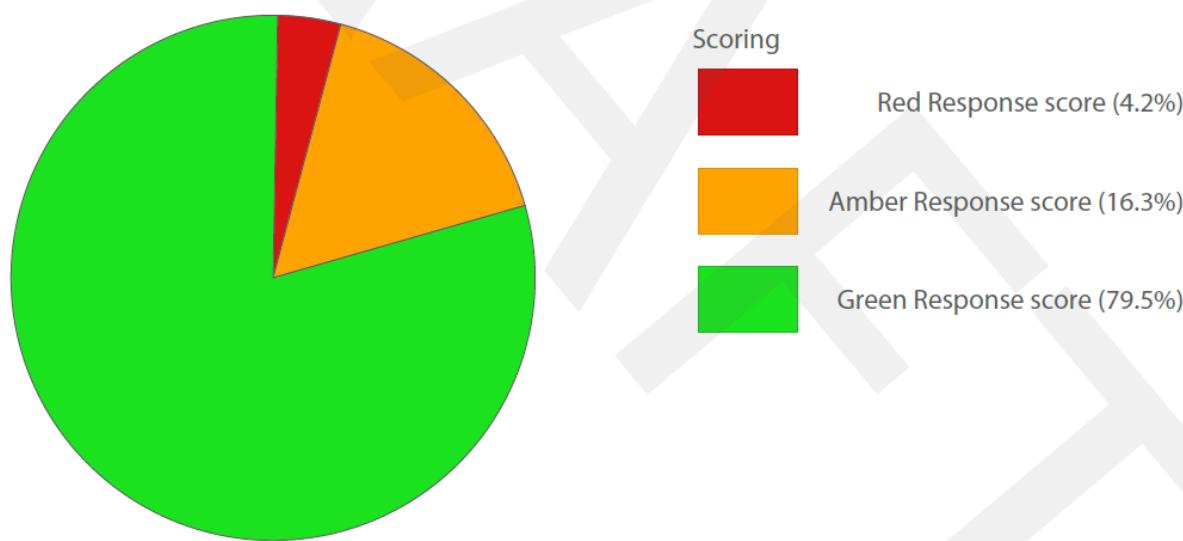
6.2 Council of Governors Self-Assessment

The self-assessment questionnaire was completed by 26 Governors answering a total of 36 statements each. The responses were scored between Strongly Agree – Strongly Disagree and a high level summary grouped the responses into “Green”, “Amber”, “Red” categories as illustrated by the pie chart below. The categories are defined in the following ways:

- **Green:** Answers are Strongly Agree or Agree.
- **Amber:** Answers are undecided.
- **Red:** Answers are Strongly Disagree or Disagree

It should be noted that 18 statements were answered “N/A”, but the system has included in the overall responses for the percentages. Therefore, it is important to not only consider the percentages, but also the number of “Red” responses by statement.

This pie chart shows the percentage of red, amber and green responses for the Council of Governors 2020



The chart shows that the majority of responses were categories as “Green” (79.5%) with 16.3% categorised as “Amber” and 4.2% as “Red”.

However, it is important to break the results down further by category to show the particular areas of strength and weaknesses highlighted by the responses. The questionnaire was split into a number of sections depending, grouping together similarly themed statements. The following sections had the most positive responses:

- Working Together / Support (83% - 0 red responses)
- General Reflections (83% - 3 red responses)
- Training, Learning & Development (83% - 1 red response)

The following statements received the most positive responses:

- The Council of Governors receive accurate, timely and clear information. (84%)
- The Chair is an effective leader of the Council ensuring its effectiveness on all aspects of its role and setting its agenda. (85%)

- I am clear about my role as a Governor. (87%)
- The Council of Governors is regularly informed about the financial and operational performance about the Trust. (86%)
- The Council of Governors adopt a formal, rigorous and transparent process for the appointment of new Governors. (87%)
- The Council of Governors receive effective support from the Trust Secretary / Trust Secretary's Office (93%)
- New Governors receive induction on joining the Council of Governors. (86%)

Conversely, the following sections had the lowest response ratings:

- Council of Governors Committee (79% - 13 red responses)
- Membership Engagement (74% - 9 red responses)
- Sub-Committees (80% - 5 red responses)

The following statements received the lower scored responses:

- Governors with particular skills or experiences contribute to or lead discussions the their area of experience (70% - 4 red responses)
- Communication between the Council and its Committees is effective (76% - 2 red responses)
- The CoG Membership Committee seems to be fulfilling its terms of reference appropriately (75% - 6 amber responses, 1 red response)
- The Council of Governors has an effective process for communications with its members. (73% - 3 amber, 3 red responses)
- The Council of Governors uses the Annual Members Meeting to communicate with its members and encourage their participation. (75% - 6 amber, 2 red responses)
- The Council of Governors plays an active role in developing its membership strategy (73% - 7 amber, 2 red responses)

The full results of the Council of Governors Self-Assessment has been attached to this report as Appendix 1. There are a number of comments included alongside the responses and these have been included as Appendix 2 directly taken from the system.

7.0 COUNCIL OF GOVERNORS SUB-COMMITTEE FINDINGS

7.1 Governance Committee

Documentation Review

7.1.1 The Governance Committee had met four times within the period of the review.

7.1.2 Coverage of Terms of Reference:

The terms of reference are current with a review date of February 2021. The papers provided covered the Committee responsibilities and enabled the Committee to report authoritatively to the COG from an informed standpoint.

7.1.3 Action log / work plan:

An action log was presented to each meeting with confirmation in the minutes of review, discussion and agreed actions.

A work plan has been established and used at each meeting which aligns directly to the Terms of Reference and allows for structured coverage and documentation.

7.1.4 Papers:

Papers presented to the Committee were concise and clear. They were presented in the established standard format with covering papers where appropriate indicating the required action.

7.1.5 Minutes:

The minutes of the meetings were of a similar high standard to those of the COG and other COG Standing Committees, reflecting clearly the agenda, issues, discussion and outcomes at the meeting.

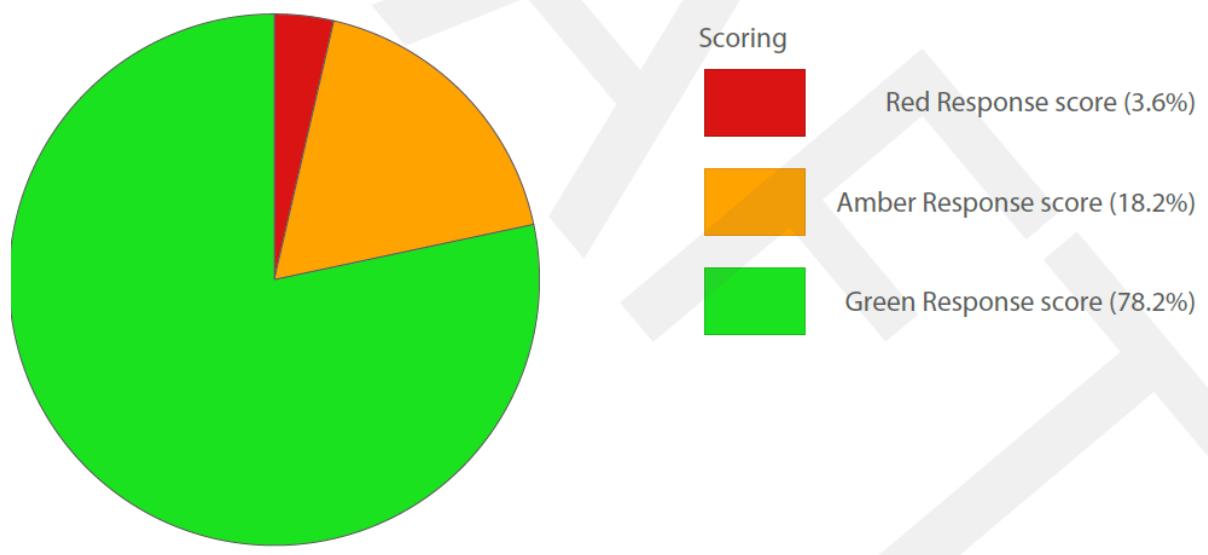
7.1.6 Reporting to the Council of Governors:

The quality of reporting back to the Council of Governors was clear and in standard format reflecting agreement recorded in the minutes as to the recommendations that would be made.

Self-Assessment

The self-assessment questionnaire was completed by 5 Governors answering a total of 11 statements each. The responses were scored between Strongly Agree – Strongly Disagree and a high level summary grouped the responses into “Green”, “Amber”, “Red” categories as illustrated by the pie chart below. None of the statements were answer “N/A”,

This pie chart shows the percentage of red, amber and green responses for the CoG Governance Sub-Committee



The chart shows that the majority of responses were categories as “Green” (78.2%) with 18.2% categorised as “Amber” and 3.6% as “Red”.

The following statements received the most positive responses:

- I understand the purpose and terms of reference of the Committee (92%)
- The papers provided to the Committee are of good quality (88%)
- Decision making within the Committee is sufficient to meet its terms of reference. (88%)
- Ultimately, the Committee helps the Council of Governors in its decision making. (88%)

There were no statements that recorded a score of below 80%, however, the following statement received one “Red” response:

- Attendance and contributions of Committee members is sufficient to ensure the Committee is meeting its terms of reference,

7.2 Membership Committee

Documentation Review

7.2.1 The Membership Committee met four times within the period of the review.

7.2.2 Coverage of Terms of Reference:

The terms of reference are current with a review date of February 2021 following ongoing review across the year.

The responsibilities outlined in the evolving terms of reference focused upon implementing the Trust membership recruitment and engagement plan through the support and review of a Membership Framework Action Plan which was itself wide ranging and subject to review. Accordingly, all the papers presented to the Committee were effective in supporting the reporting and progress upon key elements within the framework action plan, without being able to be comprehensive against a changing baseline. The minutes reflect valuable and expected debate on the way forward for member recruitment and engagement, and the documents produced for and considered by the committee always supported that essential theme.

7.2.3 Action log / work plan:

An action log was presented to the meetings and there was evidence in the minutes of active review of this key document.

Following prior review, a revised work plan, still aligned directly to the Terms of Reference at the time was presented for consideration in January 2020. This contained RAG rated and narrative updates of progress but was not revisited in subsequent meetings.

7.2.4 Papers:

Papers presented to the Committee were clear and concise. Where appropriate, they contained a standard format covering summary paper which clarified what actions were required.

7.2.5 Minutes:

The minutes of the Committee meetings were of a good standard – they reflected the discussions at the meeting and provided a clear record of action points considered and decisions taken.

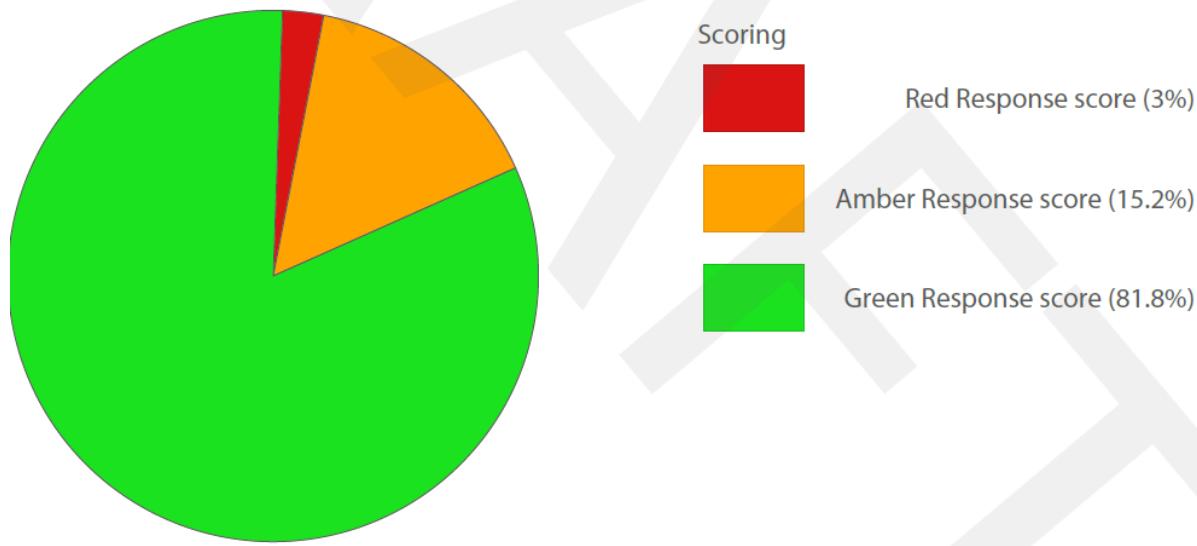
7.2.6 Reporting to the Council of Governors:

Reporting to the COG focussed attention on the specific areas considered by the immediately preceding Committee relating to the elements of membership engagement and recruitment which were able to be covered within the confines faced by the meeting. This reporting became significantly more comprehensive from the September 2020 COG, reflecting a change in Committee Chair.

Self-Assessment

The self-assessment questionnaire was completed by 3 Governors answering a total of 11 statements each. The responses were scored between Strongly Agree – Strongly Disagree and a high level summary grouped the responses into “Green”, “Amber”, “Red” categories as illustrated by the pie chart below. None of the statements were answer “N/A”,

This pie chart shows the percentage of red, amber and green responses for the CoG Membership Sub-Committee



The chart shows that the majority of responses were categories as "Green" (81.8%) with 15.2% categorised as "Amber" and 3% as "Red".

The following statements received the most positive responses:

- I understand the purpose and terms of reference of the Committee (87%)
- The Committee meets sufficiently frequently (87%)
- The meetings are well-organised (meeting arrangements, timeliness of papers etc.) (87%)
- The papers provided to the Committee are of good quality (87%)

There were two statements that were scored at 74% however, the lower number of respondents meant one neutral response lowered the overall score. There was one statement that scored 54% and received one "red" response:

- The membership of the Committee is sufficient to meet its terms of reference (i.e. numbers, skills & experiences etc.)

7.3 Nominations Committee

Documentation Review

7.3.1 The Nominations Committee had met four times within the period of the review, effectively on an "as required" basis.

7.3.2 Coverage of Terms of Reference:

The terms of reference remain current but are overdue review from August 2020. The Committee is one for which only certain elements of the terms of reference are applicable according to circumstances such as NED or Chair recruitment or term extension. The issues requiring consideration in the period were covered robustly within the parameters of the Terms of Reference.

7.3.3 Action log / work plan:

An action log was presented to the meetings and there was good evidence in the minutes of active review of the action log.

There is no work plan for the Committee but this is not necessary, given the “as required” nature of the work undertaken

7.3.4 *Papers:*

As reported in previous document reviews, the papers presented to the Committee were clear, concise and contained very detailed information where appropriate. They were presented in a standard format with a covering summary paper and communicated clearly the action required of the Committee.

7.3.5 *Minutes:*

The minutes of the Committee meetings were of high standard reflecting discussions at the meeting, including significant debate and challenge involving a wide range of the members, but with clear record of action points and decisions taken.

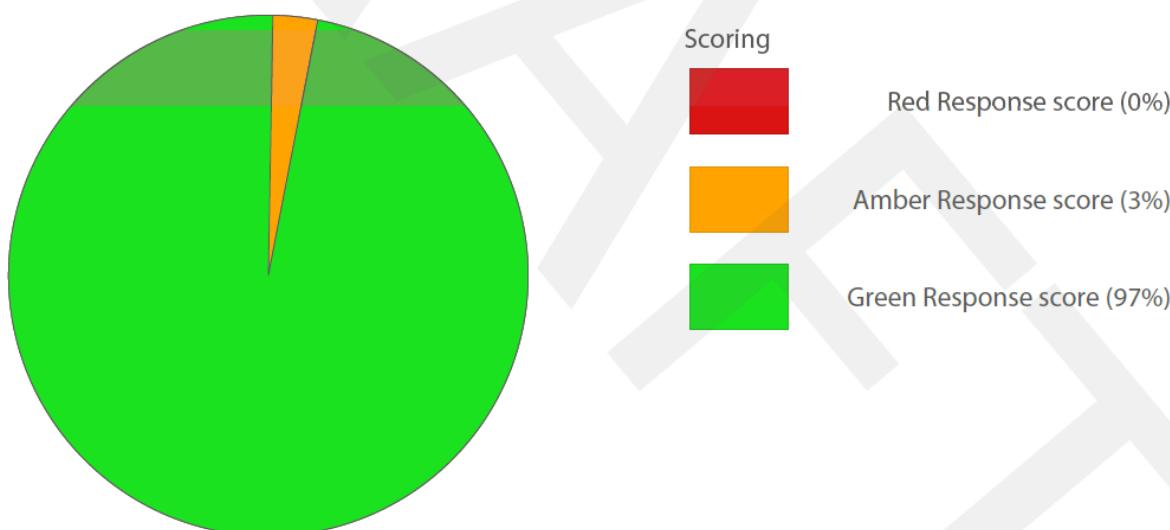
7.3.6 *Reporting to the Council of Governors:*

The quality of reporting back to the Council of Governors was good. There are clear agreements in the minutes as to the recommendations that would be made to COG. There was also evidence of significant detailed consideration and discussion of issues that would not have been possible within the confines of the full COG.

Self-Assessment

The self-assessment questionnaire was completed by 3 Governors answering a total of 11 statements each. The responses were scored between Strongly Agree – Strongly Disagree and a high level summary grouped the responses into “Green”, “Amber”, “Red” categories as illustrated by the pie chart below. None of the statements were answer “N/A”,

This pie chart shows the percentage of red, amber and green responses for the CoG Nomination Sub-Committee [COPY]



The chart shows that the majority of responses were categories as “Green” (97%) with 3% categorised as “Amber” and none categorised as “Red”.

The following statements received the most positive responses:

- I understand the purpose and terms of reference of the Committee (94%)
- The Committee has met its terms of reference over the past 12 months. (94%)

- Attendance and contributions of Committee members is sufficient to ensure the Committee is meeting its terms of reference. (94%)
- The papers provided to the Committee are of good quality. (94%)
- Decision making within the Committee is sufficient to meet the terms of reference of the Committee. (94%)
- Ultimately, the Committee helps support the Council of Governors in its decision making. (94%)
- There are no areas of overlap between any of the other sub-committees. (94%)

There were no statements that scored below 80% and no statements that were scored as a "Red".

7.4 Remuneration Committee

Documentation Review

7.4.1 The Remuneration Committee met three times within the period of the review.

7.4.2 Coverage of Terms of Reference:

The terms of reference are current with a review date of February 2021.

There was strong coverage of the responsibilities outlined in the terms of reference.

The core responsibilities were covered during the period of the review.

7.4.3 Action log / work plan:

An action log was presented to the meetings and there was good evidence in the minutes of active review of the action log.

There was a detailed work plan for the Committee aligned to the Terms of Reference, which was updated and considered at every meeting.

7.4.4 Papers:

The papers presented to the Committee were clear, concise and detailed. They were presented in a standard format with front sheets setting out the action required from the Committee. Where needed, relevant national guidance and legislative context was shared.

7.4.5 Minutes:

The minutes of the Committee meetings were clear and factual with necessary detail as required given the nature of the matters under discussion.

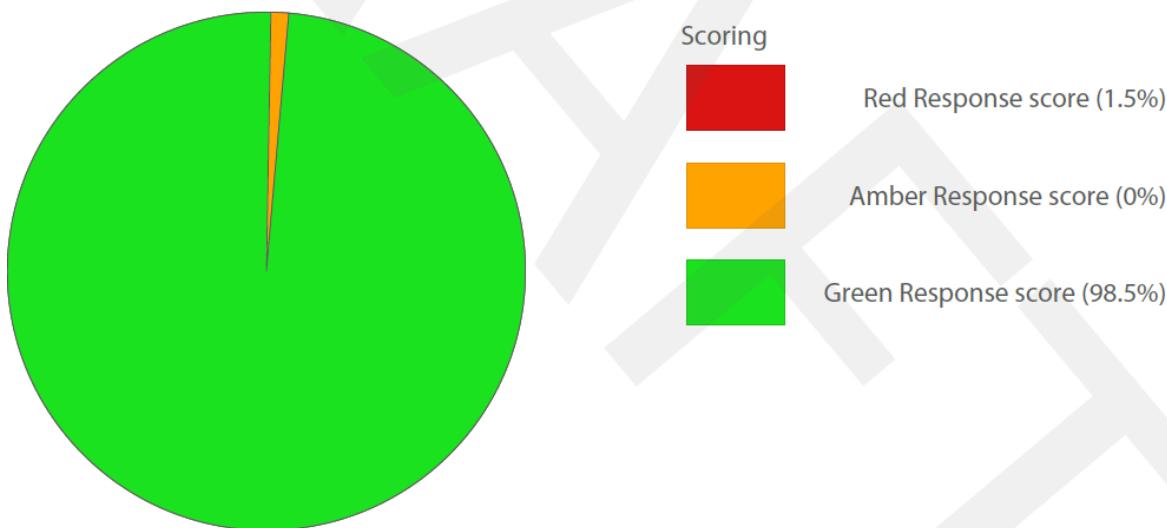
7.4.6 Reporting to the Council of Governors:

The quality of reporting back to the Council of Governors was good. Agreement as to what was to be reported was minuted and there was clarity on the recommendations to be made. There was detailed consideration and discussion of issues within the Committee that would not be possible within a full COG meeting.

Self-Assessment

The self-assessment questionnaire was completed by 6 Governors answering a total of 11 statements each. The responses were scored between Strongly Agree – Strongly Disagree and a high level summary grouped the responses into "Green", "Amber", "Red" categories as illustrated by the pie chart below. None of the statements were answer "N/A",

This pie chart shows the percentage of red, amber and green responses for the CoG Remuneration Sub-Committee



The chart shows that the majority of responses were categories as “Green” (98.5%) with none categorised as “Amber” and 1.5% categorised as “Red”. The pie chart shows an amber colour instead of red as expected. The pie chart is automatically generated by the system and it is not possible to manually change.

The following statements received the most positive responses:

- I understand the purpose and terms of reference of the Committee (94%)
- The meetings are well-organised (meeting arrangements, timeliness of papers etc.) (94%)
- Attendance and contributions of Committee members is sufficient to ensure the Committee is meeting its terms of reference. (94%)
- The Committee reports back to the Council of Governors in a timely manner. (94%)
- Ultimately, the Committee helps support the Council of Governors in its decision making. (94%)

There were no statements that recorded a score of below 80%, however, the following statement received one “Red” response:

- There are no areas of overlap between any of the other sub-committees.

7.5 Training & Development Committee

Documentation Review

7.5.1 The Training and Development Committee had met five times within the period of the review.

7.5.2 *Coverage of Terms of Reference:*

The terms of reference are current with a review date of February 2021.

There has been broad coverage of the expectations outlined in the terms of reference with a wide range of discussions on different issues supported by comprehensive documentation.

7.5.3 *Action log / work plan:*

An action log was presented to all the meetings and there was good evidence in the minutes of active review of the action log.

The work plan aligned directly to the Terms of Reference was considered at every meeting. There are RAG rated and narrative updates of progress.

7.5.4 *Papers:*

Papers presented to the Committee were clear and concise. They were presented in a standard format with summary covering papers setting out the requested action required of the Committee.

7.5.5 *Minutes:*

The minutes of the Committee meetings were of a high standard reflecting the discussions at the meeting and with a clear record of action points and decisions taken.

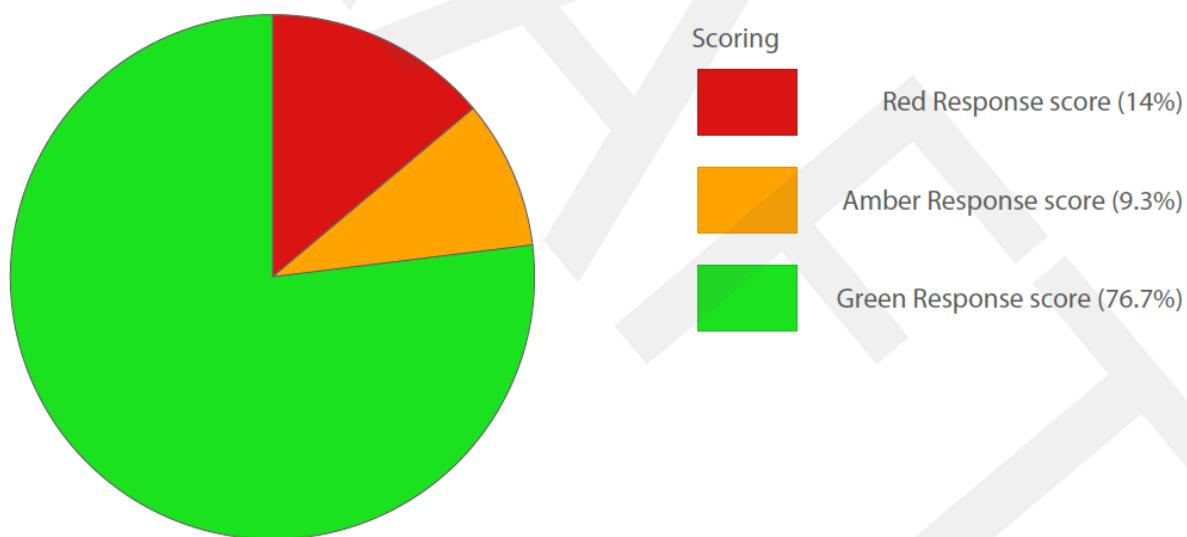
7.5.6 *Reporting to the Council of Governors:*

The quality of reporting back to the Council of Governors was good. There are clear agreements in the minutes as to the information to be reported back to the COG. The Committee provides significant support to the COG in terms of the training and development of Governors, including assurance for the NHSI statement in this respect

Self-Assessment

The self-assessment questionnaire was completed by 4 Governors answering a total of 11 statements each. The responses were scored between Strongly Agree – Strongly Disagree and a high level summary grouped the responses into “Green”, “Amber”, “Red” categories as illustrated by the pie chart below. One statement was listed as “N/A”.

This pie chart shows the percentage of red, amber and green responses for the CoG Training & Development Sub-Committee



The chart shows that the majority of responses were categories as “Green” (76.7%) with 9.3% categorised as “Amber” and 14% categorised as “Red”.

The following statements received the most positive responses:

- I understand the purpose and terms of reference of the Committee (95%)
- The meetings are well-organised (meeting arrangements, timeliness of papers etc.) (90%)
- The papers provided to the Committee are of good quality. (95%)

- Decision making within the Committee is sufficient to meet the terms of reference for the Committee (90%)
- Ultimately, the Committee helps support the Council of Governors in its decision making. (90%)

The following statements received the lower scored responses:

- The Committee has met its terms of reference over the past 12 months (67% - 1 red response, 1 N/A)
- The membership of the Committee is sufficient to meet its terms of reference (i.e. numbers, skills & experiences etc.) (65% - 1 red response)
- There are no areas of overlap between any of the other sub-committees. (65% - 1 red response)

8.0 CONCLUSIONS

- 8.1 This documentary review provides positive evidence that the Council of Governors and its Standing Committees are well supported by the documents they receive; and that decisions are taken following effective sharing of information.
- 8.2 The documents provided support the discharge by the Council of Governors of its statutory responsibilities and no significant weaknesses or risks requiring immediate action have been identified.
- 8.4 The volume of paperwork provided as an essential element of the COG meeting was noted.
- 8.5 The self-assessment noted a number of positive areas, however, further analysis is required of individual statements and comments to ensure suitable recommendations are made.

9.0 RECOMMENDATIONS

- 9.1 It is recommended that the Council of Governors:
 - Consider the content of this report;
 - Seek clarity where required; and
 - Form recommendations on the facts provided which encompass input from all Governors and stakeholders such as the Chair and Trust Secretary, and to deliver a related action plan for further consideration by the Council of Governors.

Report prepared by:

James Day
Interim Trust Secretary

Chris Jennings
Assistant Trust Secretary

27 November 2020

This summary report shows total scores, total percentage scores and a breakdown of responses by statement category and by individual statement.

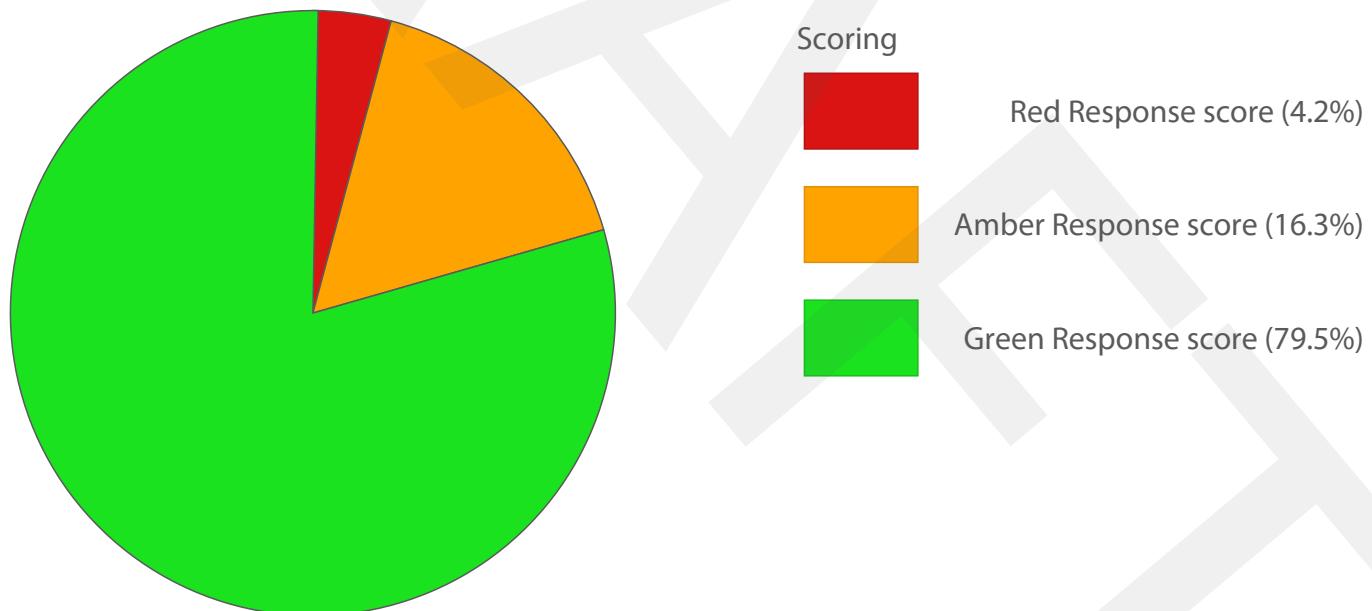
Council of Governors 2020

Number of respondents: 21

Number of statements: 36

					Overall Score	% Score
Council of Governors 2020	31 [4.2%]	120 [16.3%]	587 [79.5%]	18 [2.4%]	2968/3690	80%

This pie chart shows the percentage of red, amber and green responses for the Council of Governors 2020



Key:

Red indicates the number of responses in the strongly disagree or disagree categories and scores either 1 or 2.



Amber indicates the number of responses in the undecided category and scores 3.



Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5.



Grey indicates the number of n/a responses and scores zero.

Breakdown of responses by category/competency.

Council of Governors 2020					Overall Score	% Score
Council of Governors Committee	13	28	127	0	664/840	79%
General Reflections	3	17	126	1	605/730	83%
Sub-Committees	5	29	118	16	607/760	80%
Working Together / Support	0	22	104	0	522/630	83%
Membership Engagement	9	20	54	1	307/415	74%
Training, Learning & Development	1	4	58	0	263/315	83%

Key:

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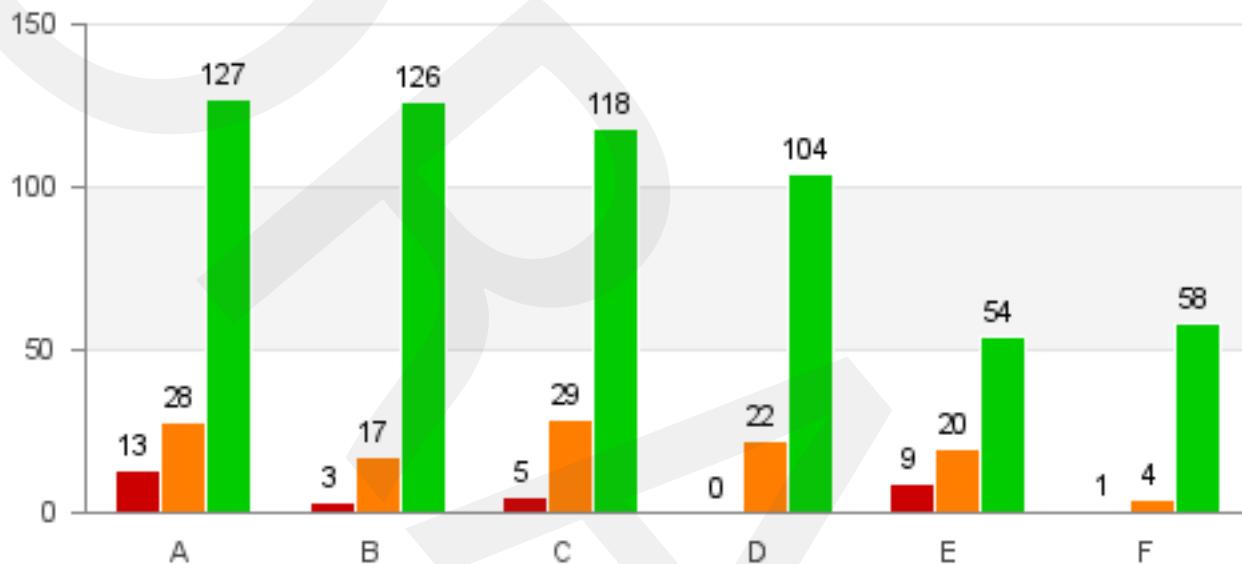


Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5.



Grey indicates the number of n/a responses and scores zero.

Graph of number of red, amber and green responses by statement categories for the Council of Governors 2020 appraisal.



Statement Categories

- A - Council of Governors Committee
- B - General Reflections
- C - Sub-Committees
- D - Working Together / Support
- E - Membership Engagement
- F - Training, Learning & Development

Key:

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Grey indicates the number of n/a responses and scores zero.

Breakdown of report by individual statements

Council of Governors 2020						Score	%age
Council of Governors Committee							
1	The Council of Governors meet sufficiently regularly to discharge its duties	2	2	17	0	85/105	81%
2	The Council of Governors meet at the most appropriate time for the majority of Governors	0	4	17	0	83/105	80%
3	The Council of Governors receive accurate, timely and clear information	1	2	18	0	88/105	84%
4	The Council meeting agendas include all the important topics for discussion	2	4	15	0	82/105	79%
5	The process for agenda setting allows Governors to raise issues and concerns for future meetings	2	5	14	0	81/105	78%
6	The Chair is an effective leader of the Council ensuring its effectiveness on all aspects of its role and setting its agenda	0	3	18	0	89/105	85%
7	The Chair allows adequate time for discussion and decision making on all agenda items	2	1	18	0	83/105	80%
8	Governors with particular skills or experience contribute to or lead discussions in their area of experience	4	7	10	0	73/105	70%
General Reflections							
9	I am clear about my role as a Governor.	0	2	19	0	91/105	87%
10	The Council of Governors understand its key roles as set out in the Constitution	1	1	19	0	85/105	81%

Key:

Red indicates the number of responses in the strongly disagree or disagree categories and scores either 1 or 2.



Amber indicates the number of responses in the undecided category and scores 3.



Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5.



Grey indicates the number of n/a responses and scores zero.

11	The Council of Governors broadly understands the role of the Board of Directors	0	1	20	0	86/105	82%
12	The Council has Governors who possess the necessary skills and background to fulfil their duties	0	4	17	0	85/105	81%
13	The Council of Governors is regularly informed about the financial and operational performance of the Trust	0	3	18	0	90/105	86%
14	The Council of Governors adopt a formal, rigorous and transparent process for the appointment of new Governors	1	0	19	1	87/100	87%
15	Governors have the opportunity to represent the Trust at regional and national events	1	6	14	0	81/105	78%
Sub-Committees							
16	The current structure of Council Committees is appropriate to help carry out the Council's statutory duties	0	4	16	1	82/100	82%
17	Committees are provided with sufficient resources and support to undertake their duties	1	3	16	1	80/100	80%
18	Communication between the Council and its Committees is effective	2	3	15	1	76/100	76%
19	The CoG Remuneration Committee seems to be fulfilling its terms of reference appropriately.	0	3	16	2	79/95	84%
20	The CoG Governance Committee seems to be fulfilling its terms of reference appropriately.	0	3	15	3	73/90	82%
21	The CoG Membership Committee seems to be fulfilling its terms of reference appropriately.	1	6	11	3	67/90	75%
22	The CoG Training & Development Committee seems to be fulfilling its terms of reference appropriately.	1	3	14	3	73/90	82%
23	The CoG Nominations Committee seems to be fulfilling its terms of reference appropriately.	0	4	15	2	77/95	82%
Working Together / Support							

Key:



Red indicates the number of responses in the strongly disagree or disagree categories and scores either 1 or 2.



Amber indicates the number of responses in the undecided category and scores 3.



Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5.



Grey indicates the number of n/a responses and scores zero.

24	The Trust's management are responsive to requests from Governors for information or clarification	0	5	16	0	86/105	82%
25	The Council of Governors receive effective support from the Trust Secretary / Trust Secretary's Office	0	1	20	0	97/105	93%
26	Relationships within the Council are constructive and work effectively	0	7	14	0	82/105	79%
27	Communications between the Trust and the Council of Governors is effective	0	3	18	0	85/105	81%
28	Communications between the Council of Governors and the Board is effective	0	4	17	0	84/105	80%
29	The Council of Governors has access to the Chair, the Board and the Senior Independent Director	0	2	19	0	88/105	84%
Membership Engagement							
30	The Council of Governors has an effective process for communications with all its members	3	3	15	0	76/105	73%
31	The Council of Governors use the Annual Members Meeting to communicate with its members and encourage their participation	2	6	12	1	75/100	75%
32	The Council of Governors play an active role in developing its membership strategy	2	7	12	0	76/105	73%
33	Governors have the opportunity to meet members of the Trust both in and outside the organisation	2	4	15	0	80/105	77%
Training, Learning & Development							
34	New Governors receive induction on joining the Council of Governors	0	1	20	0	90/105	86%
35	The induction programme provides adequate and sufficient information for new Governors	1	1	19	0	86/105	82%
36	The Trust provides the necessary resources for developing and updating Governors' knowledge and capabilities	0	2	19	0	87/105	83%

Key:



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Council of Governors 2020

Comments associated with each statement

1. The Council of Governors meet sufficiently regularly to discharge its duties



Lack of time to rigorously complete its responsibilities to hold NEDs and the Board to account

The meetings are too casual and have no structure therefore it ends up as a chat. As there is no agenda and ends up with little that is achieved. If it is going to be a force it needs to challenge and see evidence not just assurances,



I have not been a Governor for long enough to form an opinion.



The communication from the secretaries office, and frequency of meetings/presentations is excellent

The ability to now use Microsoft Teams means I am able to participate well.

Meetings are sufficient

Four meetings a year is probably not sufficient but we usually have some additional meetings to allow speedier responses.

Meetings already set but also one off and emergency meetings if needed to discharge duties

number of COG meeting is sufficient to conduct the business item required.

they are just about right

We have CoG meetings as well as meetings with NEDs and informal Governor meetings

I believe this to be correct

Council meets sufficiently regularly for discharge of statutory duties but insufficient time for governor discussion of concerns

In addition to the CoG meeting which is where formal ratification of decisions are made, there are a number of other CoG meetings.

I can from the many emails there is plenty of Governors meetings and other meeting which Governors can also attend

I consider that the regularity as present is sufficient

There are adequate meetings arranged and it's difficult for Governors in full employment to take part in all the meetings

The Council of Governors sufficiently meets

The Council of Governors meet sufficiently to discharge its duties. As well as the normal CoG meetings' informal meetings with the Non Executive Directors take place. If there are urgent matters in between times, an extraordinary meeting is arranged.

Yes we have had regular meetings



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2. The Council of Governors meet at the most appropriate time for the majority of Governors



Currently meetings are online - I do not know if they are schedule at the most appropriate time for all Governors



I would prefer some early evenings if possible just to offer flexibility

It is very difficult sometimes to juggle other work commitments but the fact we have dates in advance means that it is more possible to support.

We have now currently gone virtual which is a great help for time etc, however if and when we go back face to face with a new set of governors in place maybe look at timings I know work has been done to align with board meetings etc but I have no issue with the timings

it seems to suit most people.

early evenings are good

There is no one time that is convenient for all governors

For staff governors it can sometimes cause conflicting priorities but the timings do appear to be appropriate for the majority.

The times would seem to be OK from what little experience that I have.

It is difficult at times for me as I am a clinician working 9-5

As the Trust covers a very large geographical area, wherever the face to face meetings are held it means some have to travel further than others. Bearing this in mind, I think the Trust has done well to accommodate the majority of Governors.

3. The Council of Governors receive accurate, timely and clear information



It would be good to have the information for the CoG meeting earlier. 7 days would be ideal, though not always possible.



See item 1 above.

No comments I think we receive over and above clear and accurate information



timing and clarity can be improved .

yes they are ok

Information is accurate, clear and timely

The communication between the Chair/Trust office and CoG is very good. we receive the weekly bulletins that go to staff and Board/meeting papers in a timely way prior to the meetings. We are advised of any press releases prior to publication.

Yes we receive this from Clare

4. The Council meeting agendas include all the important topics for discussion



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Grey indicates the number of n/a responses and scores zero.



to much jargin bullet points on each item would be better to understand the agendars are to long. topics are not broken down for reading



Difficult to comment as a New Governor I am not in a position to know if key matters are always brought to Governors attention

See item 1 above.

Yes however would be good to ask the governors too



Yes important but some scope to look at governor involvement possibly like continue a governor slot on CoG meetings

all agenda items are necessary and fit for purpose.

Important for statutory responsibilities but not for governor concerns which should be important to th3 trust

Confidential ones in part 2. Confidential information that is more urgent than quarterly is facilitated by a separate confidential briefing which is not noted in the CoG minutes. If such a briefing has taken place it could appear as a note in part 2, just giving the date and the name of the director who delivered it.

Important topics are included for discussion

They do, there is also time for questions and the opportunity to raise anything that we wish to discuss.

5. The process for agenda setting allows Governors to raise issues and concerns for future meetings



Agenda is set by the process (Chair and trust secretary), confirmed with small changes by the L/Governor and the rest of us get no real input.



It seems the sub committee agenda is very much set by the Trust. If you what effective Governors they must have responsibility of the agenda.



work in progress but it does depends on individual governors participation.



To date I have not seen any emails asking Governors for potential agenda items - I may have missed this.

See item 1 above.

There is a large group so sometimes it is hard to get round to everybody



in some parts it is fine



This is happening but for probably good reasons this year, change is slow

Governors can raise issues and concerns for future meetings

This is the case. We can also submit questions to the Board in advance of the meeting. The lead Governor meets regularly with the Trust Chair to discuss items of significance to CoG members.

6. The Chair is an effective leader of the Council ensuring its effectiveness on all aspects of its role and setting its agenda



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Governors are limited in asking questions .



Too much is about staff and not those we care for.

I have been impressed with the way the meetings are Chaired and kept on track / on time

Time available for council meetings is full.....maybe we need more meetings

No further comment.

Fantastic chair. Very knowledgeable, approachable, professional and equitable.

The Chair ensures what is usually a heavy agenda, runs to time and that discussion is kept to the topic on the agenda at that time. Answers all questions when able to do so, or takes the question away and responds accordingly.

Yes good to have a chair

7. The Chair allows adequate time for discussion and decision making on all agenda items



It depends what is on the agenda and NEDS to keep to there items within there deliverence to there items



Given the time constraints there is little time for discussion. The Chair does he best but this is the weakest part of the process



See item 1 above.

This is a challenge as the meetings are long and sometimes there are lots of challenges. I admire the way this meeitng is chaired but sometimes it has meant separate discussion has been required. The chair is actively recognising this.

difficult to provide sufficient time for everyone therefore inevitably there are governors being disappointed.

As above the Chair does a very good job especially as the meetings are online.

Part of the chair's job is to keep to time...meetings so full that there is a concern that all governors cannot ask questions. Governors don't help themselves or the situation, by not reading the papers in advance o& he meeting

The chair allows adequate time for discussion and decision making.

As above the chair keeps all meeting on track and time to ensure there is adequate time for questions.

Yes

8. Governors with particular skills or experience contribute to or lead discussions in their area of experience



depends on what the subject is

I saw no real evidence for this to date.

Trust not usually aware of Governor expertise and not likely to use it.

Discussions are lead by Governors who have a view on the subject. As skills and experience of any Governor is generally unknown by other Governors therefore no one can be answered "Agree" to this.



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Grey indicates the number of n/a responses and scores zero.



This was for the task and finish group to look at and to feedback

I believe there is a piece of work in progress to improve this aspect.

Other than at committee meetings, there is little opportunity for this.

This needs to be explored further I have seen this on some occasions.

I am undecided on this as some Governors do, whilst others appear reluctant to join in discussions.



Other meetings available

9. I am clear about my role as a Governor.



Only recently elected

Induction events are good and precise and gives good information to the governor for their role

The role is clearly set out in the briefing documents.

Initially as a new Governor my role was not clear. I now feel very supported with clarity around my role.

Yes

10. The Council of Governors understand its key roles as set out in the Constitution



But new governors require training

See item 9 above.

I understand my role

The CoG has received comprehensive training from the Trust.

Yes

11. The Council of Governors broadly understands the role of the Board of Directors



It can be an issue with new governors.

See item 9 above.

I understand their role

The CoG have received training in this and can also attend Board meetings to gain a better understanding and monitor the performance of the Non Executive Directors.

Yes

12. The Council has Governors who possess the necessary skills and background to fulfil their duties



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Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5.



Grey indicates the number of n/a responses and scores zero.



New Governor so still to form a clear picture on this



I was asked what skills and experience I have. No Governor has ask me to use them to fulfill any duty

but it requires regular review as the health sector changes regularly.



there is a wide range of governors on the council

See item 9 above.

Very diverse skills and backgrounds across the Council of Governors.

There is a good and varied skills mix amongst the Governors.

All agreed

13. The Council of Governors is regularly informed about the financial and operational performance of the Trust



See item 1 above.



Not sure about this

yes we have just about the right information



Received input from New Financial Director who came across as extremely competent. I would expect to see regular financial updates and early warning on any issues.

Less well through Covid Times..... due to the number of statutory information charts at Board meetings being cut back

Very much valued the verbal reports by Mark Madden, in addition to the written reports both internal and by external auditors.

The Council of Governors are regularly informed of financial operations

The Cog receive the monthly Board papers with this information, as well as attending the Annual plan meeting where finances and auditing are presented and discussed. The Trust also provides training to help understand the financial position.

14. The Council of Governors adopt a formal, rigorous and transparent process for the appointment of new Governors



As I understand it, the council of governors meetings are made up by those Governors are able to attend. I did not think any were appointed.



yes they do



I believe they do this but have no in-depth knowledge

However there is always room for improvement!

This seems to be the case from my limited experience.

Yes, there is a formal rigorous and transparent process for appointing new Governors.



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Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5.



Grey indicates the number of n/a responses and scores zero.

Yes good process

15. Governors have the opportunity to represent the Trust at regional and national events



New Governor -difficult to know given timescale

I have insufficient experience to comment.

I am not clear about this? I believe the lead Governor has this opportunity

Not sure



yes we have a governor representing us at regional level

Limited, as invitations are usually very restricted.

These events are very useful, sometimes places are limited but there is always representation.

16. The current structure of Council Committees is appropriate to help carry out the Council's statutory duties



New Governor so cannot really comment

A proposal to align the Sub Committees with those of the Board might allow greater scrutiny of Board activities but not possible until we have Governor observers at Board Committees. Also would be reluctant to lose the current Committees which do not have an equivalence at Board.



just about right as it is diverse

Always seems to be a problem to get as many governors onto all committees....often due, as at present, to election of new governors who wish to know what they are doing before taking on any more responsibility

See item 14 above

There appears to be a robust structure of committees

The current structure works well.

17. Committees are provided with sufficient resources and support to undertake their duties



The agenda is largely provided by the Trust. As the chair is a member of these sub-committees are appointed by Governors and is populated by Governors but they have very little freedom to have control of the agenda . The Trust Chair and the Board must have more respect for the Governors as they have the skills and ability to carry out their role. without



Unable to comment as have not yet enough experience



See item 15 above

we have good support from the admin department and necessary the right paperwork



I have been given support to fulfil my role

The sub-Committees are well organised and support is always on hand.

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Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5

Grey indicates the number of n/a responses and scores zero.

18. Communication between the Council and its Committees is effective

 there is little correspondence from other committees

 See item 15 above.

 They appear to work but have had very limited experience to date

 Would b3 more effective if reports to Council were read before the meeting

 There is good communication

 Updates are provided at CoG meetings by the Chair of each committee.

19. The CoG Remuneration Committee seems to be fulfilling its terms of reference appropriately.

 New Governor difficult to comment so early after appointment

 See item 15 above

 I wanted more information on the new NED contracts and this was made available to me.

 I am not a member of this committee

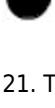
20. The CoG Governance Committee seems to be fulfilling its terms of reference appropriately.

 New Governor difficult to comment so early after appointment

 See item 15 above.

 Some necessary changes are rather slow

 As a new governor unable to comment presently

 I am not a member of this committee

21. The CoG Membership Committee seems to be fulfilling its terms of reference appropriately.

 As above

 Difficult times with political elections (purdah) COVID and other factors causing postponements/cancellations of public/members meetings in the last 2years

 See item 15 above.

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Covid-19 has had a major impact, as the "our voice" meetings were our main forum with members. Mental Health forums also affected. Plans for virtual communication methods are in place.

As a new governor unable to comment presently

I am not a member of this committee

22. The CoG Training & Development Committee seems to be fulfilling its terms of reference appropriately.



As above

See item 15 above.

Great improvements in the Governor training

Active revision taking place

As a new governor unable to comment presently

I am not a member of this committee

23. The CoG Nominations Committee seems to be fulfilling its terms of reference appropriately.



As above

See item 15 above.

I am a new member of this committee, it does seem to be fulfilling its role. I have been booked onto a course regarding this in February 2021

As a new governor unable to comment presently

24. The Trust's management are responsive to requests from Governors for information or clarification



sometimes depends what they want to tell us

As above

See item 15 above.



Very responsive

Responses are given in a timely manner. Governors had requested that acronyms not be used in papers, if they are the full meaning is also used in the first instance.

25. The Council of Governors receive effective support from the Trust Secretary / Trust Secretary's Office



very good admin service

And this has been difficult with changes to the staff in the office over the past 2 years. They have done very well.



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Amber indicates the number of responses in the undecided category and scores 3.



Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5



Grey indicates the number of n/a responses and scores zero.

We could do more ourselves I think, in collaboration with the Trust Office.

Very helpful recently.

Very supportive

Always.

26. Relationships within the Council are constructive and work effectively



To some extent

See item 15 above.

The relationship is very friendly but if your question is is it effective in supporting governors in their role then the answer is no.

To a degree yes but there is some negativity within.



Again very early days to comment but Governors have been helpful and treat everyone with respect

I hope so. Covid has made the job of new governors much more difficult. Virtuality has its benefits (lack of travel...saving time) but the lack of personal contact to oil the wheels of building relationships must have made a difference.

Constructive and supportive.

27. Communications between the Trust and the Council of Governors is effective



See item 15 above.



Good communication



I think they have struck the right balance in not overloading or under informing.

So far yes

28. Communications between the Council of Governors and the Board is effective



See item 15 above.



Lack of opportunity for this except with NEDs at Informal meetings and at CoG.

I agree that when a question is asked then the Council is swift. Often there is assurance but little evidence.



we do have information through the admin dept



My experience is limited - to date it would appear that the Board cascade information and allow for questions

Whereas it is easier to attend Board meetings virtually, and I think more governors do so, I miss the personal contact possible when attending board meetings....and the ability to ask questions directly.



Good communication



Amber indicates the number of responses in the undecided category and scores 3.



Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5



Grey indicates the number of n/a responses and scores zero.

As well as being able to question there is the opportunity to meet with the Board members between the first and second parts of the Board meeting.

so far yes

29. The Council of Governors has access to the Chair, the Board and the Senior Independent Director

See item 15 above.

yes if we need to get in touch with NEDS through the admin dept yes

I have not personally had reason to access the individuals but I would be happy to contact them and feel confident that they would be welcoming

.....definitely

Good access if so required

30. The Council of Governors has an effective process for communications with all its members

This is an ongoing problem and has been under review for some time

Currently being beefed up

There has been very little communication and even less support as the only time they communicate is at CoG meetings.

New Governor too early to comment

There is a process for communication through the trust office but member-Governor contact does not happen.....I'm hopeful of using that conduit and promised my members to do so in my re election nomination statement! We seem to rely on members viewing the trust website (+see question 21)

See item 15 above.

Yes

Effective clear process.

Predominantly through the Trust office which works well.

31. The Council of Governors use the Annual Members Meeting to communicate with its members and encourage their participation

Only a small number of members attend the AMM

Not this year really. A virtual meeting does not lend itself to networking, especially for a very large number of people.

See item 15 above.

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 Grey indicates the number of n/a responses and scores zero.

This does take place

Little involvement from Members in common with other Trusts

don't know

Only experienced an online meeting and it's difficult to encourage members participation in such circumstances

....but it is disappointing how few attend.

As a new governor unable to comment presently

32. The Council of Governors play an active role in developing its membership strategy

See 30

I have been a Governor for over three years and I have seen the Council of Governors as mainly Governors asking questions as individuals. There is no collective strategy.

New Governor too early to comment

Membership of the CoG or membership of the Trust?

See item 15 above.

I am undecided

I am not sure about this yet.

Don't know

Yes through the membership committee

...in committee. It is a really difficult area

33. Governors have the opportunity to meet members of the Trust both in and outside the organisation

See 30 & 32

Covid-19 has meant that all face to face meetings are not appropriate, and meetings/site visits etc are not arranged. Post-covid, which may be some time, will not be a return to the previous ways of working. Virtual attendance at meetings can be arranged but will often be non-participatory if they are large meetings.

As above

See item 15 above.

Don't know

yes

...at the AMM & public meetings. However we don't know who our members are unless we have met them in our local community

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 Grey indicates the number of n/a responses and scores zero.

Yes there are ample opportunities.

This is usually the case in normal circumstances.

34. New Governors receive induction on joining the Council of Governors

 yes through the induction process

Currently working through this process

Are they attending?

No further comment.

Very good induction

A full induction programme is arranged by the Trust, new governors also have the opportunity to learn from existing Governors.

yes

35. The induction programme provides adequate and sufficient information for new Governors

 The Review that I am on has evidence that many Governors are confused by the induction and lost as to how they can perform their role. This review is putting together a proposal that is hoped will make all Governors more involved. There is a strong feeling that it's all activity, going to meetings, without much achievement.

 Still working through induction process so too early to comment

 Although some of the learning is about participation at meetings and building confidence which induction supports but cannot provide all.

can always improve upon

depends what is on the agenda

Meeting other governors and forming a working relationship with them is not easy when it is only virtual at best. Peer learning and support is therefore poorer than it was pre-Covid-19.

See 34 above.

The programme does

This should be revisited about 6-9 months after Induction so new Governors then know what questions to ask

yes

36. The Trust provides the necessary resources for developing and updating Governors' knowledge and capabilities

 New Governor - still working through induction process so too early to comment

 It depends on what the Board's agenda is. If it is to challenge the non-exec's and engage with members very few Governors perform that duty.

 Red indicates the number of responses in the strongly disagree or disagree categories and scores either 1 or 2.

 Amber indicates the number of responses in the undecided category and scores 3.

 Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5.

 Grey indicates the number of n/a responses and scores zero.



through correspondence

The Trust Office circulates a lot of information and publicity for events/training. The South Essex Mental Health Partnerships bulletin is a valuable resource, and the website.

See 34 above.

This has greatly improved for staff governors. Initially the role is quite daunting, however, as knowledge and confidence grows this greatly improves.

There is a training programme, The Trust is very receptive to Governors who wish to learn more.

yes



Red indicates the number of responses in the strongly disagree or disagree categories and scores either 1 or 2.



Amber indicates the number of responses in the undecided category and scores 3.



Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5



Grey indicates the number of n/a responses and scores zero.

General comments for the Council of Governors 2020 appraisal.

I am happy to be a governor of EPUT

As a new Governor, I am still learning and improving my understanding of the role.

Being a 'effective' governor who actively represents the views of their membership & their community has not been easy this year. The absence of public meetings over the past 2 years has made my contact with members very poor. I aim to try to change that!

Covid-19 restrictions have reduced the informal opportunities to understand individual Governor issues. Virtual meetings have proved adequate for formal business but we are missing out on informal learning and taking action as a result of the informal learning. Governors actively involved in sub-committees have far more opportunities to hold the NEDs to account, to influence the next round of training, learning and development and to influence the strategic issues which the Board should be taking into account. Governors not on sub-committees have indicated they find the necessarily lengthy CoG papers disconcerting, in not finding it easy to absorb the information to make comments. We need to fulfil statutory and mandatory roles but some Governors have said they struggle to find the time to read the papers.

As a new Governor with a lack of experience it is difficult to comment on some of the areas as there has not been sufficient time to really experience how the process works. Probably a little too early to ask for an assessment.

I think the Council of Governors works well within EPUT, as the Trust are open with the CoG. Any concerns raised are dealt with quickly and they make every effort to keep Governors informed about current issues for the Trust.

Major changes must be made before the Trust has an effective GoG and group of Governors. The Governors are capable well meaning adults and are able to achieve great things if they feel that they are contributing. Giving them more responsibility will only strengthen the governance of the Trust and the Board need to allow them to prove their commitment.

I think there are far too many questions on this form and it needs to be reduced to about 20 questions.

Nothing further ay present.

none



Red indicates the number of responses in the strongly disagree or disagree categories and scores either 1 or 2.



Amber indicates the number of responses in the undecided category and scores 3.



Green indicates the number of responses in the strongly agree or agree categories and scores either 4 or 5



Grey indicates the number of n/a responses and scores zero.

		Agenda Item: 6(c)i
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	2 December 2020
Report Title:	Council of Governors Governance Committee Assurance Report	
Report Lead:	John Jones, Lead Governor Chair of the CoG Governance Committee	
Report Author(s):	Chris Jennings, Assistant Trust Secretary	
Report discussed previously at:		
Level of Assurance:	Level 1 <input checked="" type="checkbox"/> Level 2	Level 3

Purpose of the Report

This report provides a summary of the Council of Governors Governance Committee meeting discussions held on 9 November 2020

Approval	
Discussion	
Information	✓

Recommendations/Action Required

The Council of Governors is asked to:

- 1 Note the contents of this report.

Summary of Key Issues

The Governance Committee is a standing committee of the Council of Governors with delegated responsibility to provide support to the Council of Governors in ensuring that effective and robust governance processes are in place and operating effectively, enabling the Council to fulfill its statutory duties. All responsibilities are undertaken in support of the Council – it is the Council that holds the responsibility for decisions relating to all issues covered by the Committee.

The Committee met on 9 November 2020 since the last assurance report was provided. Committee members unanimously elected John Jones as the Chair of the committee.

The Committee reviewed its action log and noted the majority of actions had been closed. One action relating to Governors attendance at sub-committee meeting was closed following discussion. One action relating to Governors attending standing committees of the Board was extended to allow this to be taken forward with the new Chief Executive Officer (CEO). One action relating to a procedure for the appointment / re-appointment of the Chair / Non-Executive Directors was extended as this was being undertaken as part of the recent NED recruitment process.

The Committee discussed the following items which have been included on the agenda for Council of Governors on the 2 December 2020:

- Council of Governors Efficacy Review
- Governor Nomination to NHS Providers Governance Advisory Committee (GAC)
- Composition of the Council of Governors

The Committee reviewed the remaining action from the SID Action Plan and agreed this would be moved to the action log for the Committee. The Committee also reviewed the action plan from the Efficacy Review completed in 2019, noting the majority of actions had been completed and agreeing that any open actions would be incorporated into any new recommendations from this year's review.

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	
SO 2: Achieve top 25% performance	✓
SO 3: Valued system leader focused on integrated solutions	

Which of the Trust Values are Being Delivered

1: Open	✓
2: Compassionate	✓
3: Empowering	✓

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:

Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Healthwatch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	
Financial implications (accounted for)	
Governance implications	✓
Impact on patient safety/quality	
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed?	YES/NO
Equality Impact Assessment (EIA) Completed?	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors

Holding the NEDs to account for the performance of the Trust	✓
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	

Acronyms/Terms Used in the Report

CoG	Council of Governors	CEO	Chief Executive Officer
SID	Senior Independent Director		

Supporting Documents and/or Further Reading

Lead

John Jones

Chair of the CoG Governance Committee

		Agenda Item No: 6(c)ii
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	2 December 2020
Report Title:	Council of Governors Nominations Committee Assurance Report	
Report Lead:	Professor Sheila Salmon, Chair of the Trust Chair of Nominations Committee	
Report Author(s):	Tina Bixby, Assistant Trust Secretary	
Report discussed previously at:		
Level of Assurance:	Level 1 <input checked="" type="checkbox"/> Level 2	Level 3

Purpose of the Report		
To present a summary of the Council of Governors Nominations Committee meeting discussions held on 16 November 2020	Approval	
	Discussion	
	Information	✓

Recommendations/Action Required	
The Council of Governors is asked to:	
1 Note the contents of the report	

Summary of Key Issues	
The Nominations Committee is a standing committee of the Council of Governors. It has delegated responsibility to recommend a clear process and delegated authority to enact the process, on behalf of the Council of Governors, for the identification and nomination of suitable candidates that fit the agreed criteria for the appointment and/or reappointment of the Trust Chair and the Non-Executive Directors as well as ensuring compliance with any mandatory guidance and relevant statutory requirements. All responsibilities are undertaken in support of the Council – it is the Council that holds the responsibility for decisions relating to all issues covered by the Committee.	

The Committee met on 16 November 2020.

Appointment of a Non-Executive Director (NED) of the Board

The Committee was joined by Johnny Townson of Harvey Nash and Sean Leahy, Executive Director of People and Culture. The committee was presented with a Confidential Search report along with candidate profiles for longlisting.

Over a one month active search period, the dedicated project team targeted candidates with significant strategic digital transformational change experience and similar from a wide variety of different settings, including but not limited to:

- Recent experience at senior Director or Board level or equivalent in a progressive and complex organisation
- Demonstrable experience of leading commercial thinking using digital technology as an enabler to create better customer/service user outcomes
- Experience of building board level understanding of the potential opportunities and implications of the digital transformation agenda

Alongside proactively approaching potential candidates, Harvey Nash also worked through a wide range of senior digital and technology leaders, from both inside and outside of the NHS, who referred high calibre candidates from their networks.

The role was advertised nationally on NHS Jobs, the Harvey Nash website and promoted via social media. Harvey Nash also circulated the opportunity to their in-house diversity networks, engage which is a diversity and inclusion network of business leaders from a wide

range of cultural backgrounds, and inspire and aspire which connect over 5,000 existing and aspiring senior female leaders and non-executive directors. Diversity monitoring was undertaken as part of the process to demonstrate and promote equality of opportunity.

Throughout the search process, the team personally contacted 337 individuals regarding the search and of these:

- 186 confirmed they were not interested in the role, that is did not meet their preferred requirement, or were unable to offer the time commitment required. A number acted as helpful sources in the wider candidate market.
- 25 candidates have formally applied or will apply for the role and all of which were search candidates.
- 1 candidate has committed to sending over their application in advance of the longlisting meeting on Monday 16 November
- 1 recommended candidate has submitted a CV only application to date, and will formally apply if this was welcomed by the Trust

From this field of 25 candidates Alumni Harvey Nash have:

- Recommended 9 candidates to consider further at longlist
- Recommended 6 candidates for further consideration
- Suggested 6 candidates are possible – for further discussion with the panel
- Recommended 4 candidates are not considered further through the process

The committee debated and agreed that 9 candidates would be telephoned to discuss the role and their suitability.

No contact will be made by Professor Sheila Salmon to ensure her independence. Sean Leahy, a current NED and Harvey Nash will report back their findings at a further Nomination Committee to agree shortlisting. Dates for the interviews, shortlist and approval for the Council are to be agreed outside of the meeting.

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	✓
SO 2: Achieve top 25% performance	✓
SO 3: Valued system leader focused on integrated solutions	✓

Which of the Trust Values are Being Delivered

1: Open	✓
2: Compassionate	✓
3: Empowering	✓

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:

Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Healthwatch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	
Financial implications (accounted for)	
Governance implications	✓
Impact on patient safety/quality	
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed?	YES/NO
Equality Impact Assessment (EIA) Completed?	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	✓
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	

Acronyms/Terms Used in the Report	
NFHT	NED

Supporting Documents and/or Further Reading	

Lead	
Professor Sheila Salmon Chair of the Trust Chair of the Council of Governors Nominations Committee	

		Agenda Item No: 6(c)iii
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	2 December 2020
Report Title:		Council of Governors Membership Committee Assurance Report
Report Lead:		Judith Woolley, Public Governor Chair of the Membership Committee
Report Author(s):		Tina Bixby, Assistant Trust Secretary
Report discussed previously at:		
Level of Assurance:		Level 1 <input checked="" type="checkbox"/> Level 2 <input type="checkbox"/> Level 3

Purpose of the Report

To present a summary of the Council of Governors Membership Committee meeting discussions.

Approval	✓
Discussion	✓
Information	

Recommendations/Action Required

The Council of Governors is asked to:

- 1 Note the contents of the report
- 2 Approve the recommendation to send the Volunteer letter to all members in December.
- 3 Request any further information regarding membership.

Summary of Key Issues

The Membership Committee is a standing committee of the Council of Governors with delegated responsibility to recommend to the Council of Governors appropriate actions to implement the Trust's membership recruitment and engagement strategy and to ensure ongoing development of the strategy in response to the Trust's operating context. All responsibilities are undertaken in support of the Council – it is the Council that holds the responsibility for decisions relating to all issues covered by the committee.

The committee met on 13 November 2020, Reverend Paul Walker joined the committed as an observer and the possibility of joining the committee in the future.

The main focus of the meeting was:

- Future member communication
- Plans for the Your Voice meeting planned for 9 December 2020
- The membership of the committee

The committee noted that the initial communication planned for members had not progressed as hoped as Jim Dean had resigned from the committee.

The committee was advised by Mark Dale that a volunteer newsletter is being prepared by the Volunteer and Patient Experience team. The Committee suggested that a paragraph on Governors could be added to the newsletter and sent to Members in December. The committee agreed that a paragraph would be composed and sent to Mark for discussion with the Volunteer team.

The Your Voice meetings were planned for 2 dates in November (9th and 10th) they were cancelled due to a lack of topic suggestions and ideas received. The committee were advised

that Tina Bixby discussed with Judith Woolley outside the meeting to consider a new date for a single Your Voice meeting that will include all constituencies. The committee agreed the date and discussed the proposed session which is covered in a separate report at the Council meeting.

Christmas message to members – the committee were open to different forms of communication for 2020 and discussed the option of a video. A further update will be given at that Council meeting. Any members who are 'postal address only' will receive a card via the post.

The membership committee noted that it now consists of Judith Woolley (Chair), Mark Dale, Pippa Ecclestone and Michael Waller.

Since the meeting has been held, Jean Juniper and Stuart Scrivener have now joined the committee. Tina has contacted Cllr Sue Shinnick with a view to her joining the committee, which would leave one position vacant.

Governors are again reminded and encouraged to ensure that feedback on the ideas around membership are fed back directly to committee members or via Tina Bixby

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	✓
SO 2: Achieve top 25% performance	✓
SO 3: Valued system leader focused on integrated solutions	✓

Which of the Trust Values are Being Delivered

1: Open	✓
2: Compassionate	✓
3: Empowering	✓

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:

Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Healthwatch	✓
Communication and consultation with stakeholders required	✓
Service impact/health improvement gains	✓
Financial implications (accounted for)	
Governance implications	✓
Impact on patient safety/quality	
Impact on equality and diversity	✓
Equality Impact Assessment (EIA) Completed?	YES/NO
	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	✓
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	

Acronyms/Terms Used in the Report**Supporting Documents and/or Further Reading****Lead**

**Judith Woolley, Public Governor
Chair of the Council of Governors Membership Committee**

SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	Agenda Item No: 6(c)iv 02 December 2020
Report Title:	Council of Governors Training and Development Committee Assurance Report	
Report Lead:	Paula Grayson, Public Governor Chair of the Training and Development Committee	
Report Author(s):	Chris Jennings, Assistant Trust Secretary	
Report discussed previously at:	N/A	
Level of Assurance:	Level 1 x Level 2	Level 3

Purpose of the Report

This report provides a summary of the Council of Governors Training and Development Committee meeting discussions held on 29 October 2020.

Approval

Discussion

Information

x

Recommendations/Action Required

The Council of Governors is asked to:

- 1 Note the contents of the report.

Summary of Key Issues

The Training and Development Committee is a standing committee of the Council of Governors with delegated responsibility to provide support to the Council of Governors in ensuring that effective and robust training, learning and development arrangements are in place to develop Governor's skills, knowledge and capabilities enabling them to be confident, effective, engaged and informed members of the Council. All responsibilities are undertaken in support of the Council – it is the Council that holds the responsibility for decisions relating to all issues covered by the Committee.

The Committee met on the 29 October 2020. Committee members unanimously elected Paula Grayson as the Chair of the Committee. Committee members considered the action log and noted two actions open relating to a member of the Committee providing comments on the Governor induction programme and workbook. The Committee member agreed to provide these comments and the actions remained open. Two actions relating to the setting-up of Governor work groups and reviewing the buddy system were closed as it was suggested these could be considered by the Governor Involvement Task & Finish Group established as a result of the NED / Governor Informal Meeting.

Governor Induction Feedback

Committee members considered feedback received following the three of the planned five Governor Induction sessions undertaken since the 1 September 2020. Committee members noted the majority of the feedback was positive, with a number of suggestions and comments made for future induction sessions. Committee members noted that it was important to reconcile the comments made, as some comments contradicted others where Governors viewed the induction programme from a different perspective. There were some comments that did not directly relate to the induction programme. It was agreed that the comments would be developed into a table and discussed at the next sub-committee meeting to ensure all comments were considered.

Governor Learning Session Feedback Form

Committee members considered a feedback form for potential circulation following any training, learning and development sessions. The form was developed following comments made by Governors in different forums. Committee members amended some of the

questions and agreed the form could be tested following future training sessions.

EPUT Governor Training, Learning and Development Model

Committee members received an update that the Governor Training, Learning & Development model had been sent to new Governors for completion, but none had so far been returned. Committee members agreed to circulate the model to all Governors to allow Governors to think individually about their training, learning and development needs, then if prepared to share their thoughts, to complete the model and return.

Learning & Development Plan 2020/21

Committee members considered the updated Learning & Development Plan for 2020/21. Committee members accepted that some learning sessions had been delayed due to the Covid-19 pandemic and that these would be re-scheduled for 2021. Committee members considered and agreed on prioritising some sessions to ensure important subjects would be covered for this year's plan.

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	<input type="checkbox"/>
SO 2: Achieve top 25% performance	<input type="checkbox"/>
SO 3: Valued system leader focused on integrated solutions	

Which of the Trust Values are Being Delivered

1: Open	<input type="checkbox"/>
2: Compassionate	<input type="checkbox"/>
3: Empowering	<input type="checkbox"/>

Relationship to the Board Assurance Framework (BAF)

Are any existing risks in the BAF affected?	No
If yes, insert relevant risk	
Do you recommend a new entry to the BAF is made as a result of this report?	No

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:

Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Healthwatch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	
Financial implications:	Capital £ Revenue £ Non Recurrent £
Governance implications	<input type="checkbox"/>
Impact on patient safety/quality	
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed?	YES/NO
Equality Impact Assessment (EIA) Completed?	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors

Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	

Impact on Statutory Duties and Responsibilities of Council of Governors	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors	x

Acronyms/Terms Used in the Report

CoG	Council of Governors		
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Supporting Documents and/or Further Reading

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Lead

**Paula Grayson, Public Governor
Chair of the CoG Training and Development Committee**

		Agenda Item: 6(d)
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	2 December 2020
Report Title:	Changes to the Council of Governors and Membership of its Committees	
Report Lead:	Chris Jennings, Assistant Trust Secretary	
Report Author(s):	Chris Jennings, Assistant Trust Secretary	
Report discussed previously at:		
Level of Assurance:	Level 1 ✓ Level 2	Level 3

Purpose of the Report		
<ul style="list-style-type: none"> To note the current composition of Governors (Appendix 1) To note the current Committee members for the Council of Governor Committees (Appendix 2) To note the attendance at Council of Governor Committee meetings (Appendix 3) 	Approval	
	Discussion	
	Information	✓

Recommendations/Action Required	
The Council of Governors Committee is asked to:	
<ol style="list-style-type: none"> 1 Note the contents of this report. 2 Volunteer for membership of CoG Sub-Committees. 	

Summary of Key Issues	
Composition	The current Governor composition is detailed in Appendix 1.
	Clrr. Bob Massey has resigned as Appointed Governor for Essex County Council due to the time commitments required for his existing public roles as Mayor and Chair of his local Town Council. Clrr. Mark Durham has been nominated by Essex County Council to join the Council and the Trust Secretary's Office is currently liaising with Mark to finalise paperwork.
	Jim Dean, Public Governor, Essex Mid & South resigned. Stuart Scrivener has joined the Council in his place.
	Dr. Ruth Jackson left Anglia Ruskin University on the 30 November 2020 and therefore left her role as Appointed Governor for Anglia Ruskin University / Essex Universities. Dr. Matt Webster has joined the Council in her place.
	David Rolph, Public Governor, North East Essex & Suffolk took a sabbatical due to ill health until the end of November 2020. However, David decided to resign as a Governor due to his continued ill health. There is now a vacancy in this constituency and the next candidate has been contacted.
Committee Membership	Following the completion of the Governor elections, all returning Governors agreed to re-join sub-committees. Details of the sub-committees were provided to new Governors as part of the induction programme and numerous requests made for volunteers to join these sub-committees. There has been some uptake, however, there are still vacancies across the majority of sub-committees: <ul style="list-style-type: none"> • Governance Committee (1 x vacancy) • Membership Committee (2 x vacancies) • Training & Development Committee (2 x vacancies) • Nominations Committee (2 x vacancies) Some Governors will be attending the next sub-committee members as observers to see if it

is a meeting that would like to join as a full member.

Governors are asked to volunteer to become members of the above sub-committees. The Sub-committee composition is attached. (Appendix 2)

Governor attendance

Governor attendance at general meetings is reviewed in line with the agreed procedure for monitoring attendance. A summary of attendance to date is attached at Appendix 3.

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	✓
SO 2: Achieve top 25% performance	✓
SO 3: Valued system leader focused on integrated solutions	✓

Which of the Trust Values are Being Delivered

1: Open	✓
2: Compassionate	
3: Empowering	✓

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:

Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Health watch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	
Financial implications	
Governance implications	✓
Impact on patient safety/quality	
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed?	YES/NO
Equality Impact Assessment (EIA) Completed?	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors

Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	
• Ensuring effective and robust governance processes are in place and operating effectively, to enable the Council of Governors to fulfil its statutory duties	✓

Acronyms/Terms Used in the Report

CoG	Council of Governors	
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Supporting Documents and/or Further Reading

Appendix 1: Council of Governors as at 25 November 2020

Appendix 2: Sub-Committee Composition

Appendix 3: Council of Governors Meeting Attendance

Lead

Chris Jennings

Assistant Trust Secretary

ESSEX PARTNERSHIP UNIVERSITY NHS FT

COUNCIL OF GOVERNORS as at 25 November 2020

ELECTED GOVERNORS

Public: Essex Mid & South (9)

Dianne Collins
Mark Dale
Pamela Madison
Sam Rakusen
Judith Woolley
Elizabeth Rotherham
Emmanuel Jessa
Keith Bobbin
Stuart Scrivener

Public: North East Essex & Suffolk (2)

Peter Cheng
David Short
1 vacancy

Public: Milton Keynes, Bedfordshire, Luton & Rest of England (2)

Paula Grayson
John Jones

Public: West Essex & Hertfordshire (5)

Kate Shilling
Michael Waller
Pippa Ecclestone
Jean Juniper
Brian Arney

Staff: Clinical (4)

Marianne Evans
Nosi Murefu
Tracy Reed
Jared Davis

Staff Non Clinical (2)

Lara Brooks
Paul Walker

APPOINTED GOVERNORS

Essex County Council

Vacancy

Southend on Sea Council

Laurie Burton

Thurrock Council

Sue Shinnick

Anglia Ruskin/Essex Universities

Dr Matt Webster

CVS Essex

Diane Fairchild

COUNCIL OF GOVERNORS
Committee Membership at 25 November 2020

Governance	Remuneration	Membership	Training & Development	Nominations
Members (7/8)	Members (8/8)	Members (6/8)	Members (6/8)	Members (6/8)
Brian Arney Keith Bobbin Lara Brooks Peter Cheng John Jones Nosi Murefu Sam Rakusen	Brian Arney Lara Brooks Peter Cheng Paula Grayson John Jones Pam Madison Tracy Reed Judith Woolley	Mark Dale Pippa Ecclestone Jean Juniper Stuart Scrivener Michael Waller Judith Woolley	Keith Bobbin Mark Dale Paula Grayson Sam Rakusen Tracy Reed Matt Webster	Prof Sheila Salmon Brian Arney Pippa Ecclestone Marianne Evans Paula Grayson John Jones
Chair	Chair	Chair	Chair	Chair
John Jones	John Jones	Judith Woolley	Paula Grayson	Prof Sheila Salmon
Meetings 2021	Meetings 2021	Meetings 2021	Meetings 2021	Meetings 2021
2021 - TBC	2021 - TBC	2021 - TBC	2021 - TBC	2021- TBC

Significant Transaction Group – is held on a ‘needs only basis’, the following Governors will be called upon as necessary:
 Brian Arney, Keith Bobbin, Paula Grayson, John Jones, Pam Madison

Governor	Notes	22 May 2020		12/06/2020 (Extra-Ordinary)		23 September 2020		Meetings Attended	Total No of Meetings
		Part 1	Part 2	Part 1	Part 2	Part 1	Part 2		
Brian Arney		✓	✓	✓	✓	✓	✓	3	3
David Bamber	Until June 2020	✓	✓	✓	✓	NR	NR	2	2
Roy Birch	Until June 2020	S	S	S	S	NR	NR	0	2
Keith Bobbin		A	A	✓	A	✓	✓	1.5	3
Lara Brooks	From September 2020					✓	✓	1	1
Laurie Burton		✓	✓	✓	✓	X	X	2	3
Peter Cheng		✓	✓	✓	✓	✓	✓	3	3
Dianne Collins		A	A	✓	✓	✓	✓	2	3
Mark Dale		✓	✓	✓	✓	A	A	2	3
Jared Davis	From September 2020					✓	✓	1	1
Jim Dean	Until September 2020	✓	✓	✓	✓	A	A	2	3
Pippa Ecclestone		✓	✓	✓	✓	✓	✓	3	3
Marianne Evans		✓	✓	A	A	A	A	1	3
Diane Fairchild	From August 2020					X	X	0	1
Paula Grayson		✓	✓	✓	✓	✓	✓	3	3
Ruth Jackson	Until November 2020	A	A	A	A	✓	✓	1	3
Emmanuel Jessa	From September 2020					✓	✓	1	1
John Jones		✓	✓	✓	✓	✓	✓	3	3
Jean Juniper	From September 2020					✓	✓	1	1
Gillian Lock-Bowen	Until August 2020	✓	✓	✓	✓	NR	NR	2	2
Bob Massey	From August 2020					✓	✓	1	1
Nosi Murefu		A	A	A	✓	✓	A	1	3
Sam Rakusen		✓	✓	✓	✓	✓	X	2.5	3
Tracy Reed		✓	✓	✓	✓	✓	✓	3	3
Tanya Robertson	Until September 2020	X	X	X	X	X	X	0	3
David Rolph	From September 2020 - Until October 2020					✓	✓	1	1
Elizabeth Rotherham	From September 2020					A	A	0	1
Kate Shilling		✓	✓	X	X	✓	X	1.5	3
Sue Shinnick		✓	✓	✓	✓	✓	✓	3	3
David Short	From September 2020					✓	✓	1	1
Clive Travis	Until June 2020	X	X	X	X	NR	NR	0	2
Michael Waller		✓	✓	✓	✓	A	A	2	3
Paul Walker	From September 2020					A	A	0	1
Clive White	Until June 2020	✓	✓	✓	✓	NR	NR	2	2
Andy Wood	Until June 2020	✓	A	✓	✓	NR	NR	1.5	2

Judith Woolley		✓	✓	✓	✓	✓	✓	3	3
Alex Zihute	Until June 2020	✓	✓	A	A	NR	NR	1	2

Key	
Attended	✓
Apologies Received	A
No Apologies Received	x
Sabbatical / Agreed Absence	S
Not Required	NR
Holiday	H

Agenda Item No: 6(e)						
SUMMARY REPORT	Council of Governors Part 1	2 December 2020				
Report Title:	Your Voice Update					
Report Lead:	Tina Bixby, Assistant Trust Secretary					
Report Author(s):	Tina Bixby, Assistant Trust Secretary					
Report discussed previously at:	-					
Level of Assurance:	Level 1	<input checked="" type="checkbox"/>	Level 2		Level 3	

Purpose of the Report	Approval	
To update the Council on the latest plans for the Your Voice – virtual teams event on 9 December 2020	Discussion	
	Information	<input checked="" type="checkbox"/>

Recommendations/Action Required
The Council of Governors is asked to <ul style="list-style-type: none"> • note the contents of the report • suggest any further ideas (subject to timescales) and • request any further information.

Summary of Key Issues
Due to COVID-19 Your Voice meetings have not been held since February 2020. The committee were keen to hold meetings with members in a 'live situation'. The membership committee agreed to trial 2 sessions to be held in November for Essex Mid and South and North East Essex with a view to rolling out across other constituencies, depending on their success.
Governors were advised of the plans at the Council of Governor meeting in September and were asked to submit ideas regarding content and theme. There was limited response; Judith Woolley was approached and it was subsequently agreed that an alternative session would be held in December, open to all constituencies with a general themed topic. The session has been booked for 9 December from 11:00-12:15.
After initial discussions with Judith Woolley the following ideas were discussed:
<ul style="list-style-type: none"> • Suggestions: say dementia as a topic, • Short intro, chat to allow people to log on. • a 10-minute talk by an inpatient senior nurse on how the patient is welcomed and looked after with general examples, and how the carer can interface, with examples. Without any confidentiality breaching of course. • A 10-minute talk by a community or outpatient member of staff (could be a nurse, ? OT, support) • A 10-minute talk by Mark on the 111 hash 2 facility • Discussion/questions • No more than 1 hour long, firmly shut at an hour, and advertised as that. • Attendance by staff who will be able to field and follow up difficult questions.
Alex Green and the Chair have been approached and are fully supportive of the proposal for a refreshed approach for the virtual session and future Your Voice meetings.
Plans have being discussed with the Communications Team and the Patient Experience

Team.

Further discussions were held at the membership committee on the 13 November and it was agreed that it was impossible to replicate the usual meeting held in a room and find a topic that was engaging without overuse by PowerPoint.

The session will be a reflection of the last 9/10 months, and members will be encouraged to 'Take a Moment', this is the title we are using for our communication, the Agenda subject to final agreement, is as follows:

- Pre welcome , admin, on mute, starting soon etc (Tina)
- Welcome – Tracy Reed (5 minutes)
- Brief word from the Chair (5 minutes)
- Simon MvVey short Mindfulness session (5 minutes)
- Mark Dale to talk about 111 (5 minutes)
- Questions on 111 – input from members (5 minutes)
- Nurse to talk about the impact of COVID on our MH services (5 minutes)
- Crisis Cafes/sanctuaries, or about a co-working (MIND) (10 minutes)
- Questions on cafes or 111 (5 minutes)
- Additional Governor slot (2/3 minutes)
- Tracy to introduce the video
- Mid and South Essex video (bridge over troubled water) (5 minutes)
- Close - Tracy

A save the date was sent to members and additional reminders will be sent with additional detail. The event will be also be advertised on Facebook, detailed on the Trust website and emailed to over 400 of our stakeholder contacts

The event will be run as Teams event, attendees will be required to ask for the link by contacting the TSO office, this enables us to maintain numbers and should we be oversubscribed we will hold another event in the short term.

This is a new format being tested for a Your Voice meeting and therefore all positive and negative experiences will be considered for any future events.

Finally a slightly different topic, but still 'social' related, Judith has also asked (on behalf of the Membership Committee) that the NED/Governor informal session on 16 December should be Christmas themed and Governors are encouraged to wear there Christmas jumper!

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	✓
SO 2: Achieve top 25% performance	
SO 3: Valued system leader focused on integrated solutions	

Which of the Trust Values are Being Delivered

1: Open	✓
2: Compassionate	✓
3: Empowering	✓

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:

Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Healthwatch	✓
Communication and consultation with stakeholders required	
Service impact/health improvement gains	
Financial implications:	

	Capital £	Revenue £	
	Non Recurrent £		
Governance implications			✓
Impact on patient safety/quality			
Impact on equality and diversity			
Equality Impact Assessment (EIA) Completed?	YES/NO	If YES, EIA Score	

Impact on Statutory Duties and Responsibilities of Council of Governors

Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	✓
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	

Acronyms/Terms Used in the Report

Supporting Documents and/or Further Reading

Lead

Tina Bixby
Assistant Trust Secretary

SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	Agenda Item No: 7(a)
		02 December 2020
Report Title:	Council of Governors Agenda Task and Finish Group Terms of Reference	
Report Lead:	Chris Jennings, Assistant Trust Secretary	
Report Author(s):	Chris Jennings, Assistant Trust Secretary	
Report discussed previously at:	N/A	
Level of Assurance:	Level 1 x Level 2	Level 3

Purpose of the Report

This report provides the terms of reference developed for the Council of Governors Agenda Task and Finish Group for noting and requesting additional volunteers to join the group.

Approval	
Discussion	
Information	x

Recommendations/Action Required

The Council of Governors is asked to:

- 1 Note the contents of the report.
- 2 Volunteer as a member of the group for constituencies noted in the report.

Summary of Key Issues

There is a feeling amongst Governors that the agenda for the Council of Governors is currently overly heavy on Governance and would like alternative ideas for future meetings. It is important that learning is taken from other organisations, but also develop something that is right for the Trust and governing body.

Therefore, a Task and Finish Group has been developed to review the current agenda and develop some ideas for how Council meetings will be held going forward. Some of the items included on the agenda are historic, and have been requested by Governors over the years, so it is right that these items are revisited to understand if they are still relevant or whether information is available elsewhere.

The terms of reference developed for the Task and Finish Group has been attached to this report for information. In order to ensure good representation from all constituencies and without overloading the meeting, the terms of reference sets-out the number of representatives for each constituency. Whoever joins the group would be responsible for gathering the views of Governors within their own constituency and feeding this into the group. The terms of reference was circulated to Governors on the 13 November 2020 and to date the following constituencies still require representation:

- Staff Governor (x2)
- Appointed Governor (x1)

Governors in these constituencies are asked to volunteer to participate in the task and finish group.

The aim is to meet before the end of this year and produce a draft revised agenda ready for use at the next Council meeting in February / March 2021.

Relationship to Trust Strategic Objectives

SO 1: Continuously improve service user experiences and outcomes	x
SO 2: Achieve top 25% performance	x
SO 3: Valued system leader focused on integrated solutions	

Which of the Trust Values are Being Delivered	
1: Open	x
2: Compassionate	
3: Empowering	x

Relationship to the Board Assurance Framework (BAF)	
Are any existing risks in the BAF affected?	No
If yes, insert relevant risk	
Do you recommend a new entry to the BAF is made as a result of this report?	No

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:		
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives		
Data quality issues		
Involvement of Service Users/Healthwatch		
Communication and consultation with stakeholders required		
Service impact/health improvement gains		
Financial implications:		
		Capital £
		Revenue £
		Non Recurrent £
Governance implications		x
Impact on patient safety/quality		
Impact on equality and diversity		
Equality Impact Assessment (EIA) Completed?	YES/NO	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors	x

Acronyms/Terms Used in the Report			
CoG	Council of Governors		

Supporting Documents and/or Further Reading	
Council of Governors Agenda Task and Finish Group Terms of Reference	

Lead	
Chris Jennings	
Assistant Trust Secretary	

ESSEX PARTNERSHIP UNIVERSITY NHS FT

ESSEX PARTNERSHIP UNIVERSITY NHS FT

COUNCIL OF GOVERNORS AGENDA TASK AND FINISH GROUP TERMS OF REFERENCE

Overall Purpose

The purpose of this Task and Finish Group is to review the agenda and governance arrangements for the Council of Governors to develop a new agenda for piloting at the Council of Governors meeting in February / March 2020.

- 1. Name:** Council of Governors Agenda Task and Finish Group
- 2. Chair** Trust Secretary.
- 3. Reporting to:** The Council of Governors (Council) and Chair of the Trust
- 4. Authority**
 - 4.1 The Task and Finish Group is a time limited group with the aim of developing an agenda for piloting at the Council meeting in February / March 2021.
 - 4.2 The group is authorised to undertake a review of the Council of Governors agenda
 - 4.3 Members of the Group should ensure they seek feedback from Governors within their constituency to provide to the Group.
- 5. Functions:**
 - 5.1 To undertake a review of the current Council of Governors agenda to agree amendments to items / papers to create space for additional strategic items / discussions.
 - 5.2 To develop ideas for new agenda items for inclusion on the Council agenda.
 - 5.3 To ensure any new agenda is able to cover the required level of governance for the Committee whilst providing room for greater discussions and strategic items.
- 6. Sub Groups / Working Groups:** None
- 7. Membership:**
 - 7.1 Council of Governors representatives for each constituency:
 - Bedfordshire, Luton & Rest of England (1)
 - Mid & South Essex (2)
 - North East Essex (1)
 - West Essex & Hertfordshire (1)
 - Staff Governors (Clinical and Non-Clinical) (2)
 - Appointed Governor(1)
 - 7.2 Non-Executive Director
 - 7.3 Trust Secretary and Assistant Trust Secretary
 - 7.4 Governors will be placed on a reserve list and will replace any Governors who are not able to attend the meeting to represent their constituency.
- 8. Support to the Group:** Trust Secretary's Office

ESSEX PARTNERSHIP UNIVERSITY NHS FT

- | | |
|-----------------------------------|---|
| 9. Quorum: | 9.1 N/A – the group will not make any formal decisions. However, the attendance at the meeting will be reviewed to ensure all constituencies have been fairly represented. |
| 10. Reporting : | 10.1 The outcome of the Task and Finish Group will be provided to the Chair and the Council of the Trust for approval to pilot a new agenda.
10.2 The agenda will be piloted and the Council asked to comment on the new format
10.3 No minutes will be kept of the meeting, however, informal notes will be kept to ensure any amendments are taken forward. |
| 11. Frequency of Meetings: | The Task and Finish Group will aim to meet as a minimum once, however, further meetings will be scheduled as required. |

		Agenda Item: 7(c)
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	2 December 2020
Report Title:	Governor Nomination to NHS Providers Governor Advisory Committee (GAC)	
Report Lead:	Chris Jennings, Assistant Trust Secretary	
Report Author(s):	Chris Jennings, Assistant Trust Secretary	
Report discussed previously at:		
Level of Assurance:	Level 1 <input checked="" type="checkbox"/> Level 2	Level 3

Purpose of the Report	Approval	✓
This report provides details of the process for identifying the Trust Governor nominee for NHS Providers Governor Advisory Committee (GAC)	Discussion	
	Information	

Recommendations/Action Required
The Council of Governors is asked to:
1 Note the contents of this report. 2 Approve John Jones as the Trust nominee for the NHS Providers Governor Advisory Committee in the mental health category as recommended by the CoG Governance Committee.

Summary of Key Issues
NHS Providers established a Governor Advisory Committee in 2015 (formerly known as the Governor Policy Board) and current members term of office ends in March 2021. This Committee oversees their Governor support work and provides valuable advice on Governor-specific issues.
The GAC comprises eight Governors elected by NHS Providers (NHSP) member Trusts and includes two Chairs who are NHSP Board members.
The election process will be managed by the Civica Election Services commencing on 5 January 2021 and election results will be published in early April 2021.
The election rules state that each Foundation Trust can nominate one Governor to stand for election to one of the eight Governor positions, the categories of which have been detailed in the attached report. The Trust has from the 2 November – 18 December 2020 to submit its nomination. The attached report provides details of the Trust's nomination for the GAC for consideration and approval as recommended by the CoG Governance Committee.

Relationship to Trust Strategic Objectives
SO 1: Continuously improve service user experiences and outcomes
SO 2: Achieve top 25% performance
SO 3: Valued system leader focused on integrated solutions

Which of the Trust Values are Being Delivered
1: Open
2: Compassionate
3: Empowering

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:	
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives	
Data quality issues	
Involvement of Service Users/Healthwatch	
Communication and consultation with stakeholders required	
Service impact/health improvement gains	
Financial implications (accounted for)	
Governance implications	✓
Impact on patient safety/quality	
Impact on equality and diversity	
Equality Impact Assessment (EIA) Completed?	YES/NO
If YES, EIA Score	

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	
• NHS Providers Governor Advisory Committee	✓

Acronyms/Terms Used in the Report			
GAC	Governor Advisory Committee	NHSP	NHS Providers

Supporting Documents and/or Further Reading	
Main Report	

Lead	
Chris Jennings	
Assistant Trust Secretary	

Agenda Item No: 7(d)

SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	02 December 2020		
Report Title:	Lead and Deputy Lead Governor Update			
Report Lead(s)	John Jones, Lead Governor and Brian Arney, Deputy Lead Governor			
Report Author(s):	John Jones, Lead Governor and Brian Arney, Deputy Lead Governor			
Report discussed previously at:				
Level of Assurance:	Level 1 <input checked="" type="checkbox"/>	Level 2 <input type="checkbox"/>	Level 3 <input type="checkbox"/>	

Purpose of the Report

This report provides an update on activities involving the Lead and Deputy Lead Governors

Approval**Discussion****Information****Recommendations/Action Required**

The Council of Governors is asked to:

1. Note the contents of the report.

Summary of Key Issues

The report attached provides information in respect of:

- Our role as your Lead and Deputy Lead Governor
- The Regional Network of Lead Governors
- Member Engagement
- Problems associated with Virtual Governor meetings.
- Virtual Clinical Tours
- Protected Staff Governor time
- Out of Area placements for CAMHS
- ICS Developments and Governance
- Appointment of a new NED
- Meeting with the Chair

Relationship to Trust Strategic ObjectivesSO 1: Continuously improve service user experiences and outcomes SO 2: Achieve top 25% performance SO 3: Valued system leader focused on integrated solutions **Which of the Trust Values are Being Delivered**

1: Open	<input checked="" type="checkbox"/>
2: Compassionate	<input checked="" type="checkbox"/>
3: Empowering	<input checked="" type="checkbox"/>

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:		
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives		
Data quality issues		
Involvement of Service Users/Healthwatch		
Communication and consultation with stakeholders required		
Service impact/health improvement gains		
Financial implications:	Capital £	
	Revenue £	
	Non Recurrent £	
Governance implications		✓
Impact on patient safety/quality		
Impact on equality and diversity		
Equality Impact Assessment (EIA) Completed?	YES/NO	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors	
Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	✓
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
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Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail):	

Acronyms/Terms Used in the Report			
NEDs	Non-Executive Directors	LGs	Lead Governors
STPs	Sustainability and Transformation Partnerships	NHSE/I	NHS England / Improvement
CFO	Chief Finance Officer		

Supporting Documents and/or Further Reading

A horizontal blue header bar at the top of the page contains the word "Lead" in white. Below it, there is a white rectangular area containing two signatures. The first signature on the left is "John Jones" followed by "Lead Governor". The second signature on the right is "Brian Arney" followed by "Deputy Lead Governor". Both names are written in black ink.

UPDATE REPORT FROM THE LEAD AND DEPUTY LEAD GOVERNORS**1 Purpose of Report**

The purpose of this report is to provide an update on activities involving the Lead and Deputy Lead Governors.

2 Summary**2.1 Background**

Foundation Trusts (FTs) are required by NHS Improvement (formerly operating as Monitor) to have in place a nominated Lead Governor who can be a point of contact for NHSI and can liaise with NHSE/I, on behalf of Governors, in circumstances where it would be inappropriate for NHSE/I to contact the Chair and vice versa. The Council of Governors agreed at its meeting on 16 August 2017 that in addition to the Lead Governor, elections should be held to appoint a Deputy Lead Governor to provide for cover as well as succession planning.

2.2 Our role as your Lead and Deputy Lead Governor

As we have said before, our role as a Governor is the same as for all Governors. There may, however, be occasions when we are asked to represent Governors at meetings, coordinate consultations, etc. For this reason, it is important that we get to know our fellow Governors and to understand their views. We would be pleased to hear from Governors, and also to catch up with you at the various Council meetings as well as at the Board of Director meetings which we usually attend. We will also ensure that we provide you with regular updates on the work in which we are involved in our Lead and Deputy Lead Governor roles. While we are 'in lockdown' feel free to contact either of us via email and we will try and sort out any issues which concern you.

2.3 The Regional Network of Lead Governors

Colleagues may recall that this group was established by myself in early 2017 and meets every 3 months, and the last meeting held virtually on 7th September 2020 had 12 attendees.

2.3.1 Member engagement

Most of the FTs reported difficulties with member engagement, especially for the more diffuse Trusts. One acute FT has established a good link with the local newspaper and write a weekly column about the work of Governors. It is recognised that there are dangers in getting too close to the press but the articles are passed through the Trust Secretary's Office for accuracy and it seems to be well received locally. Another Trust has posters up around the sites, similar to those of the Directors, showing who are the Governors.

2.3.2 Problems associated with Virtual Governor meetings

It is felt that virtual Governor meetings are too impersonal. One Trust canvassed their Governors to see if Face to Face would be preferred (when allowed) and all wanted to return to that format. It is anticipated that in future a hybrid model may well be the norm if it shows an improvement on attendance.

2.3.3 Virtual Clinical Tours

These have been tried out but there are issues as to their effectiveness, with a lack of response from patients and issues of patient confidentiality, as well as the risk of some staff control over what we can see.

2.3.4 Protected Staff Governor Time

This was discussed as at some Trusts staff governors were finding it difficult to get released for their Governor duties (as compared with the union reps position). This has now been resolved, as the usual practice in the region is that managers should be making every effort to ensure that Staff Governors can fulfill their roles adequately.

2.3.5 Out of Area Placements for CAMHS

This is a problem that seems to be confined to Cambridge and Peterborough (an MH Trust) and has increased recently, partly due to the pandemic.

2.3.6 ICS Developments and Governance

This is an on-going problem with no resolution in sight for the foreseeable future. However while ICSs are non-statutory bodies the FTs have responsibility for the ICS decisions and accountability/governance should be via the Board rep on the ICS to account for those decisions to the Governors in the usual way. It was generally felt that this accountability was not being fully met and Governors have a duty to ensure it is of a greater profile than has been the case so far. It may be helpful for Governors from different FTs to meet to ensure this is more adequately addressed.

2.4 Appointment of new NED

I can report that I was asked to provide some input to the firm retained to 'headhunt' a new NED via a teleconference, and that this was taken on board when the longlist was considered by the Nominations Committee.

2.5 Meeting with Chair

The scheduled meeting with the Chair to discuss and adjust the Agenda for this meeting was held virtually on 13 November 2020. Additionally, we raised other issues which as Governors we feel should be aired with the Chair. We are grateful for the open and receptive way in which these meetings are conducted.

2.6 Other Matters

May we take this opportunity to thank those of you who have raised queries with either of us. We hope that the answers which you have received have been satisfactory. Please let either of us have any comments on how we are doing as your Lead and Deputy Lead Governors.

May we also thank colleagues for their co-operation with the Trust as we attempt to carry on using a virtual meeting process. We recognise that this is not ideal as so much is achieved by networking at Council and by the usual non-verbal communication, which is lost in a virtual meeting. However, we recognise that this is the best way to maintain contact and involvement with Governors. We are also grateful for the assistance given by the Trust Secretary's Office during these difficult times. Their patience and understanding is a real credit to them all.

Finally, I would like to personally thank Brian for all his assistance and support over many years as Deputy Lead Governor. He has always been there when I needed him and has provided wisdom, understanding and expertise which is much appreciated.

3 Action Required

The Council of Governors is asked to:

- 1 Note the contents of the report.

Report prepared by



John Jones
Lead Governor
Public Governor
2 December 2020



Brian Arney
Deputy Lead Governor
Public Governor
2 December 2020

		Agenda Item No: 7(e)
SUMMARY REPORT	COUNCIL OF GOVERNORS PART 1	02 December 2020
Report Title:	NHS Providers Governor Advisory Committee (GAC) Update	
Report Lead	John Jones, Lead Governor	
Report Author(s):	John Jones, Lead Governor	
Report discussed previously at:		
Level of Assurance:	Level 1 <input checked="" type="checkbox"/> Level 2 <input type="checkbox"/> Level 3 <input type="checkbox"/>	

Purpose of the Report		
To update the Council of Governors on the work of the NHS Providers' Governor Advisory Committee.	Approval	
	Discussion	
	Information	✓

Recommendations/Action Required		
The Council of Governors is asked to:		
1. Note the contents of the report.		

Summary of Key Issues		
The Governor Advisory Committee (GAC) was held on the 15 October 2020 via Zoom attended by John Jones, Lead Governor.		
A summary of discussion at the meeting is provided in the attached report.		

Relationship to Trust Strategic Objectives		
SO 1: Continuously improve service user experiences and outcomes	✓	
SO 2: Achieve top 25% performance		
SO 3: Valued system leader focused on integrated solutions		

Which of the Trust Values are Being Delivered		
1: Open	✓	
2: Compassionate	✓	
3: Empowering	✓	

Corporate Impact Assessment or Board Statements for Trust: Assurance(s) against:		
Impact on CQC Regulation Standards, Commissioning Contracts, new Trust Annual Plan & Objectives		
Data quality issues		
Involvement of Service Users/Healthwatch		
Communication and consultation with stakeholders required		
Service impact/health improvement gains		
Financial implications:	Capital £ Revenue £ Non Recurrent £	
Governance implications	✓	
Impact on patient safety/quality		
Impact on equality and diversity		
Equality Impact Assessment (EIA) Completed?	YES/NO	If YES, EIA Score

Impact on Statutory Duties and Responsibilities of Council of Governors

Holding the NEDs to account for the performance of the Trust	
Representing the interests of Members and of the public	
Appointing and, if appropriate, removing the Chair	
Appointing and, if appropriate, removing the other NEDs	
Deciding the remuneration and allowances and other terms of conditions of office of the Chair and the other NEDs	
Approving (or not) any new appointment of a CEO	
Appointing and, if appropriate, removing the Trust's auditor	
Receiving Trust's annual accounts, any report of the auditor on them, and annual report	
Approving "significant transactions"	
Approving applications by the Trust to enter into a merger, acquisition, separation, dissolution	
Deciding whether the Trust's non-NHS work would significantly interfere with its principal purpose or performing its other functions	
Approving amendments to the Trust's Constitution	
Another non-statutory responsibility of the Council of Governors (please detail): • Training & Development for Governors.	✓

Acronyms/Terms Used in the Report

GAC	Governor Advisory Committee	FT	Foundation Trust

Supporting Documents and/or Further Reading

Main Report

Lead


John Jones
Lead Governor

Agenda Item 7(e)
Council of Governors Part 1 Meeting
2 December 2020

NHS PROVIDERS GOVERNOR ADVISORY COMMITTEE

1 Purpose of Report

The purpose of this report is to provide an update on the work of the NHS Providers Governor Advisory Committee (GAC).

2 Summary

2.1 Background

The NHS Providers Governor Advisory Committee (formerly known as the NHS Providers Governor Policy Board) was established in late 2015 following an election of FT Governors to sit on the Committee that took place initially in April 2015. Further elections were held in February 2018.

The GAC meets four times a year and is comprised of eight elected Governor members and two FT Chair members who sit on the NHS Providers Board. The Group is instrumental in guiding NHS Providers' Governor support programme and aims to represent the broad views of Councils of Governors.

John Jones, as the EPUT nominee in the elections, was invited to join the GAC in February 2019, as a vacancy arose, to represent the 'mental health constituency'.

2.3 Report of meeting held on 15 October 2020 from John Jones

The virtual meeting (via Zoom) of the Governor Advisory Committee (GAC) was held on 15 October 2020 and included:

1. The GAC Report for the last Quarter (Q2) with reports on a number of virtual training events.
2. A national policy update which highlighted the following:
 3. The current political context is uncertain and includes a possible Cabinet reshuffle in the new year as the government's handling of COVID-19 is under extreme scrutiny and the Labour Party polling under new leader Kier Starmer has improved in the last few months
 4. Key milestones may be delayed due to changing priorities as a result of the pandemic but it is expected in Autumn 2020 that there will be further thinking from NHS England and Improvement (NHSE/I) on 'system by default' and whether the Comprehensive Spending Review (CSR) will be for 1 or 3 years. There will also be a consultation on changing A&E measures and the traditional NHS planning round expected alongside consultation on a new system oversight framework
 5. NHS Providers is pushing for national re-prioritisation due to the substantial pressure on funding across the system. In addition, significant legislative change is on the horizon with the NHS Bill expected next year
 6. The NHS is heading into the second wave of the pandemic. Whilst the NHS has a better knowledge of the virus and greater access to PPE than previously, staff fatigue, the addition of winter conditions and the continuing evolution of system partnerships bring an extra complexity. Staff fatigue and burnout are of greatest concern for trust boards at the moment and many are exploring better ways to support staff

7. NHSE/I is moving away from payment by results, block contracts for trusts are being extended to October and system allocations are being issued for the first time however there are concerns around the accountability of system finances

2.4 Thoughts on the future of the governor role

As context to the discussion, we had an overview of the statutory roles of governors as set out in the 2012 Health and Social Care Act. The two overarching responsibilities are to represent the interests of members and the public and to hold the NEDs to account for the performance of the board. To frame the discussion, we looked at the following:

- How well sighted do you feel you, and your council of governors, are on the aims of the system plans (ICS/STP level) that your trust is contributing to?
- How does your council of governors support your trust to work in collaboration with local partners at the moment? (e.g. hearing about partnership arrangements, attending system wide fora to bring governors together)
- What would make it easier to support your trust in its role in a local system? At one Trust, a large conference was held aiming to engage governors and NEDs from the ICS in system level discussions from the outset. The plan was to do this regularly although at present organisational level engagement is being favoured by other system partners. GAC members felt there was very little consultation or engagement in system level activity for governors. Whilst this may be due to COVID with briefings being pushed back, training and inclusion in the system would make it easier for governors to support their trusts. Some suggestions from GAC members included:
 - (a) A good practice guide on how to engage governors in the system
 - (b) Lead governors should understand the strategic direction of the system to help feedback to the CoG
 - (c) Governors invited to strategic presentations
 - (d) Connecting with other trusts and creating a dialogue between governors could be helpful. One Trust Chair reiterated that trust chairs are pressing for enhanced governor arrangements for the system. However, it is important to remember that the ICS is not a separate layer/body but is a collective voice of all partners. It will be important for governors to be engaged from the outset if they are to support any system level changes.

3 Action Required

The Council of Governors is asked to:

- 1 Note the contents of the report.

Report prepared by



John Jones

December 2020