SEPT
Meeting of the Council of Governors held in Public
Wednesday 4 March 2015
at the Rufus Centre, Steppingley Road, Flitwick MK45 1AH

Please note:
15:30 NED/Governor Informal Meeting
16:30 Briefing Session with Sally Morris, Chief Executive
17:15 Light sandwich refreshments

OUR VISION
“Providing services that are in tune with you”

PART ONE – MEETING HELD IN PUBLIC

AGENDA

<table>
<thead>
<tr>
<th></th>
<th>Apologies for Absence</th>
<th>Cathy Lilley</th>
<th>Verbal</th>
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<tbody>
<tr>
<td>2</td>
<td>Declarations of Interest</td>
<td>Lorraine Cabel</td>
<td>Verbal</td>
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<tr>
<td>3</td>
<td>Minutes of the meeting (Part 1) held on 12 November 2014</td>
<td>Lorraine Cabel</td>
<td>Attached</td>
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<td>4</td>
<td>Action Log and Matters Arising (not covered under agenda items)</td>
<td>Lorraine Cabel</td>
<td>Attached</td>
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<tr>
<td>5</td>
<td>Minutes of the AGM/AMM held on 17 September 2014</td>
<td>Lorraine Cabel</td>
<td>Attached</td>
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<td>6</td>
<td>ITEMS FOR INFORMATION</td>
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<tr>
<td>(a)</td>
<td>Performance and Quality Report</td>
<td>Sally Morris</td>
<td>Presentation</td>
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<td>(b)</td>
<td>Finance Report</td>
<td>Mark Madden</td>
<td>Attached</td>
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<td>(c)</td>
<td>Serious Incidents Update</td>
<td>Andy Brogan</td>
<td>Presentation</td>
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<td>(d)</td>
<td>Quality Visits Update and Schedule for 2015</td>
<td>Mark Madden</td>
<td>Attached</td>
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<td>(e)</td>
<td>Bedfordshire &amp; Luton Disaggregation / Contracting Update</td>
<td>Sally Morris</td>
<td>Verbal</td>
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<td>(f)</td>
<td>Annual and Strategy Planning Update</td>
<td>Nigel Leonard</td>
<td>Attached</td>
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<td>(g)</td>
<td>Quality Accounts/Report 2014/15</td>
<td>Andy Brogan</td>
<td>Attached</td>
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<td>(h)</td>
<td>Corporate Governance Statement (Governor Training &amp; Development)</td>
<td>Nigel Leonard</td>
<td>Verbal</td>
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<td>(i)</td>
<td>CQC Inspection Update</td>
<td>Andy Brogan  Verbal</td>
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<td>(j)</td>
<td>Constituency and Council of Governor Composition Review</td>
<td>Nigel Leonard  Attached</td>
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<td>(k)</td>
<td>Training &amp; Development Update</td>
<td>Cathy Lilley  Attached</td>
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7 GOVERNANCE ITEMS

(a) Changes to the Council of Governors and its Committees since the last meeting | Cathy Lilley  Attached |

(b) Sub-Committees  
(i) Governance Committee | John Jones  Attached |

(c) Policies and Procedures (none) |

8 ANY OTHER BUSINESS | Lorraine Cabel  Verbal |

9 QUESTIONS & ANSWERS SESSION FROM MEMBERS OF THE PUBLIC |

10 Date and Time of Next Meeting  
17:30 on Wednesday 20 May 2015 at The Lodge, Runwell Chase, Wickford SS11 7XX |

Lorraine Cabel  
Chair
Council of Governors Meeting: Part 1 12 November 2014

SEPT

MINUTES OF THE COUNCIL OF GOVERNORS MEETING (PART 1)
on Wednesday 12 November 2014
TR1, The Lodge, Runwell Chase, Wickford SS11 7XX

Members present:
Lorraine Cabel   Chair  Evelyn Hoggart   Public Governor
Brian Arney     Public Governor   John Jones   Public Governor
Roy Birch      Public Governor   Lynda Lees   Public Governor
David Bowater  Appointed Governor  Clive Lucas   Public Governor
Susan Butterworth Public Governor  Kresh Ramanah Public Governor
Joy Das        Appointed Governor  Tracy Reed   Staff Governor
Paul Delaney   Staff Governor   Sue Revell   Public Governor
Jackie Gleeson Public Governor   Larry Smith   Public Governor
Paula Grayson  Public Governor   Mandy Tanner Appointed Governor
Eileen Greenwood Public Governor  Jim Thakoordin Public Governor
Shurleea Harding Public Governor  David Watts   Public Governor
Colin Harris   Public Governor  Tony Wright   Public Governor

In attendance:
Sally Morris  Chief Executive
Clive Allanso Assistant Trust Secretary (Interim)
Andy Brogan   Executive Director Clinical Governance & Quality/ Executive Nurse
Randolph Charles Non-Executive Director
Steve Currell  Non-Executive Director
Maxine Forrest Associate Director Communications
Nigel Leonard  Executive Director Corporate Governance
Cathy Lilley  Business Administration Manager (minute taker)
Mark Madden   Executive Chief Finance Officer
Malcolm McCann Executive Director Integrated Services (Essex & Suffolk)
Richard Winter Executive Director Integrated Services (Beds & Luton)
Janet Wood  Non-Executive Director

060/14 APOLOGIES FOR ABSENCE

Apologies for absence were received from the following Governors:
Bob Calver     Public Governor  Michael Preston-Shoot  Appointed Governor
Ann Devlin    Appointed Governor  Barbara Rice   Appointed Governor
Michael Dolling Public Governor  Sudi Sudarsanam Public Governor
Karen Forrest  Staff Governor  Nic Taylor-Barbieri Staff Governor
David Parsons  Public Governor  Clive Travis   Public Governor

No apologies for absence were received from the following Governors:
Bill Archibald  Appointed Governor  Syed Jafari  Appointed Governor
Christina Guy   Public Governor   Zoe Loke   Public Governor
Mahmood Hussain Appointed Governor

Cathy Lilley confirmed that the meeting was quorate.

Signed......................................................... Date........................................
Lorraine Cabel welcomed Governors, staff and members of the public and read out the Trust’s vision statement: “providing services that are in tune with you”. Lorraine extended a particularly warm welcome to the Trust’s new Governors.

061/14 DECLARATIONS OF INTEREST

None.

062/14 MINUTES OF PREVIOUS MEETING HELD ON 12 AUGUST 2014

The minutes of the above meeting were agreed as a correct record. The Council noted that the draft minutes of the Annual General and Annual Members meeting would be presented at the next Council meeting in February for agreeing as an accurate record.

063/14 ACTION LOG AND MATTERS ARISING

The Council received the action log and noted all open actions were covered as agenda items.

064/14 PERFORMANCE AND QUALITY REPORT

Sally Morris presented the report on the operational performance of the Trust as at month 6, 30 September 2014. The presentation (attached at appendix 1) was complemented by the assurance report from the Performance & Finance Committee that had been circulated with the agenda. She highlighted:

- the Trust had a Monitor governance risk rating of green
- that 13 KPIs had been identified as proxy measures of quality – the Trust had achieved 12; the one not achieved was the ‘missed CPA reviews in 12 months’ where 94.8% of patients had been reviewed compared to a target of 95%
- of the 55 priority indicators monitored each month, five hotspots were identified for remedial action of which only one hotspot related to performance against regulatory or contractual requirements and the remaining four related to performance against locally determined stretch targets
- there were 58 CQUIN schemes (commissioning for innovation and improvement) which would make a real difference to the quality of services provided by the Trust
- there were four quality priority initiatives across the Trust for 2014/15 – restrictive practices, pressure ulcers, avoidable fall and improved patient feedback.

The Council received, discussed and noted the report.

065/14 FINANCE REPORT

Mark Madden presented the report on the financial performance of the Trust for quarter 2 to September 2014. The presentation is attached at appendix 1.
Mark highlighted that the Trust’s underlying position was a surplus of £4.1m which exceeds the Monitor plan by £0.3m and is mainly attributable to higher than planned additional income for Specialist Services. He pointed out that the year-end forecast position had been reassessed following agreement of the Heads of Term for the disaggregation of the Bedfordshire and Luton mental health services and consideration of the likely forecast outturn on delegated budgets. The forecast outturn had therefore been restated by £3.1m resulting in a surplus of £1.2m in line with the Trust’s original Monitor plan.

Working capital and cash balances remained strong and the Trust’s continuity of service risk rating was 4 which demonstrated strong financial health. There were no new emerging risks or hotspots. Mark however highlighted that there was a year to date deficit on the Cost Improvement Programme (CIP) of £0.4m and at month 6, the Trust is forecasting a recurrent deficit on its CIP programme of approximately £0.7m.

Paula Grayson acknowledged that in the short term a lapse on achieving the CIP could be managed but asked what lessons had been learnt in the non-delivery of the CIP programme. Mark provided assurance that the Trust analysed the outcomes of its CIP programme and explained that different schemes would produce different learning lessons; however, a common theme was the length of time required to develop and embed the transformation programmes before the realisation of savings was made.

Roy Birch asked if the requirement to produce such high savings would eventually end. Mark reported that this was a system-wide pressure which had been ongoing for the past five years. He did not foresee any reduction in the financial pressures which were now set against a backdrop of increasing demands on service provision. Nigel stressed the importance of the Trust achieving its CQUIN and CIP programmes and pointed out that compared to other trusts, SEPT was making sound progress.

The meeting discussed the financial impact of the disaggregation of Bedfordshire and Luton mental health services on the Trust which included both direct and indirect costs.

The Council discussed and noted the report.

066/14 SERIOUS INCIDENTS UPDATE

Andy Brogan presented an update on patient safety which he stressed continued to remain the top priority for the Board of Directors. He advised that an update on safer staffing would be presented at the next Council meeting. The presentation is attached at appendix 1 which also included comparisons with previous year’s safety thermometer figures as well as a comparison with other trusts.

Shurleea Harding asked if ‘unexpected deaths’ included suicides. Andy explained that an unexpected death was where natural causes were not suspected and would therefore include ‘suicide’.

In response to a question by Shurleea, Andy confirmed that of the eight unexpected deaths for quarter 2, six were suicides.
Paula Grayson endorsed the Trust’s ambition for zero prone restraints and stressed the importance of restraining people without removing their dignity. Andy concurred with these comments and highlighted that although it is a challenge, the Trust ensures that appropriate training is provided to support staff with managing difficult service users/patients and to reduce the use of prone restraints.

The Council noted the report.

Action:
1. Update on Safer Staffing to be presented at the February 2015 Council meeting (AB).

067/14 QUALITY VISITS

Mark Madden presented an update on the outcomes of the quality visits and progress with any issues raised as a result of these visits. He advised that the visits planned for November and December were full, and a calendar of visits for 2015 was currently being developed.

The Council noted the verbal report.

Action:
1. Quality visits calendar for 2015 to be finalised and circulated to Governors (MM/CL).

068/14 ANNUAL AND STRATEGY PLANNING UPDATE

Nigel Leonard presented a verbal update report on the Trust’s annual and strategic planning. He was pleased to report that Monitor had awarded the Trust a ‘green’ rating for its strategic plan submission indicating the strength of the plan including financial projections which incorporated the disaggregation of Bedfordshire and Luton services.

Nigel advised that a review on the Trust’s annual planning process was currently under way but pointed out that the timetable and requirements were set by Monitor and this information was still awaited. However, he expected that there will be a requirement to develop a two year plan as well as refreshing the Trust’s five year plan.

Nigel pointed out that the Chair has requested a small group of Governors be established to help critique the annual plan which would be shared with the Council at its meeting in February 2015.

The Council noted the verbal report.

Action:
1. Governor Annual Planning Group to be established (NL)
2. Draft annual plan to be presented at the Council’s February 2015 meeting.

069/14 BOARD OF DIRECTORS EVALUATION REVIEW UPDATE

Lorraine Cabel advised that copies of the Board of Directors evaluation review action plan were available at the meeting.
The Council noted the availability of the action plan.

**070/14 TRAINING & DEVELOPMENT TASK & FINISH GROUP UPDATE**

Tracy Reed presented the update report from the Training & Development Task & Finish Group and highlighted that the Group was taking forward the actions identified following the Council of Governors self-assessment evaluation. A more detailed report would be provided at the next meeting.

The Council noted the report.

Action:

1. Detailed update report on Governor Learning and Development Pathway at the Council’s February 2015 meeting.

**071/14 GOVERNOR WORK PLAN DEVELOPMENT UPDATE**

John Jones presented the report on the development of a work plan for the Council. He explained the importance of this plan which would provide a framework of options on how Governors can fulfil their statutory accountability roles which in turn would demonstrate how effective Governors and the Council have been.

John stressed that the work plan was an evolving document and had been designed to provide flexibility taking account of the importance of ‘quality’ rather than numbers or frequency. The proposal was for a staged implementation starting in January 2015 with an initial review after the first quarter.

On a show of hands, the Council unanimously approved the work plan and the implementation timetable.

The Council noted the significant progress on the work plan development and thanked those Governors involved in its development which had been led by Dr Dawn Hillier and supported by Cathy Lilley.

The Council:

1. Discussed and noted the report
2. Approved the work plan and implementation timetable
3. Agreed that the implementation and monitoring mechanism is taken forward by the Training & Development Task & Finish Group.

**072/14 CONSTITUENCY AND COUNCIL OF GOVERNOR COMPOSITION REVIEW**

Nigel Leonard presented a verbal update on the review of the Trust’s constituencies and Council of Governor composition. He advised that a task and finish group had been established which comprised Lorraine Cabel, Nigel Leonard, Jennifer Mellani, Clive Allanso and Governors from the Governance Committee. The group’s initial meeting took place on 12 November where it reviewed the statutory requirements and considered various factors which would be taken into account when developing...
possible constituency options which included both local boundaries as well as staff Governor classes and appointed Governors.

Nigel and Jennifer would draw up various options for further consideration by the group prior to presentation to the Council at its next meeting in February 2015.

The Council noted the verbal report.

Action:
1. Options for the Trust’s constituencies to be presented at the Council’s February 2015 meeting (NL/JM).

073/14 DATES OF MEETINGS FOR 2015/16

Cathy Lilley presented the timetable and locations for the Council of Governor meetings for 2015/16 and the proposal to change the format and timings for the NED/Governor informal meetings so that they aligned with the Council meeting dates.

The Council:
1. Noted the report
2. Agreed the alignment of the NED/Governor informal meetings with Council meetings.

053/14 CHANGES TO THE COUNCIL OF GOVERNORS AND COMMITTEES

Cathy Lilley presented the report on the changes to the Council of Governors and its committees and pointed out that all Governor vacancies would remain open until the recommendations from the review of the Trust’s constituencies and composition of the Council were discussed and agreed by the Board of Directors and Council of Governors.

The Council noted the report.

074/14 GOVERNANCE COMMITTEE

John Jones presented the report from the Governance Committee on its activities since the last Council meeting on 12 August 2014. In particular, he highlighted the monitoring of Governor attendance at meetings and the review of the Governors work plan development which was presented in more detail under a previous agenda item.

He reminded the Council that it had previously agreed that the Committee would review its terms of reference six months after it was established in line with good practice. The Committee therefore reviewed the terms of reference and following discussion agreed to recommend that these were still relevant. The Council noted there were no changes to the Committee’s terms of reference and unanimously approved a review date of November 2015.

The Council:
1. Noted and discussed the report
2. Approved the terms of reference with the next review being November 2015.
075/14 REPORT ON MEMBERSHIP ACTIVITIES

Cathy Lilley presented the report on membership activities from 12 August 2014 to date which included an update on the Annual Members Meeting and Public Members Meetings as well as the publication of SEPT News in September.

The Council noted the report.

076/14 ANY OTHER BUSINESS

Nigel Leonard reported that following concerns raised by a few Governors about the garden area in Onyx Ward, work is due to commence shortly to improve the courtyard, demonstrating the Trust’s continued investment in Bedfordshire and Luton locations. The timing of this will align with the work being undertaken at Robin Pinto and is expected to be completed by the end of the year.

077/14 QUESTIONS & ANSWERS SESSION

Roy Birch commented that he found the presentation about the Single Point of Contact project extremely interesting and queried whether this approach was being rolled out across the Trust. Malcolm McCann explained that the SPOC was one of the stages of the mental health transformation programme in Essex only at this stage and an update on the success and learning from the project was being planned.

078/14 DATE OF NEXT COUNCIL OF GOVERNORS MEETING

The date of the next meeting is Wednesday 12 November 2014 in TR1, The Lodge, Runwell Chase, Wickford SS11 7XX.

The meeting closed at 19:15.

NOTE:
Subsequent to this meeting, it was advised that the date of the next meeting had been changed to Wednesday 4 March 2015 to be held at the Rufus Centre, Steppingley Road, Flitwick MK45 1AH.

APPENDIX 1: Presentations

<table>
<thead>
<tr>
<th>Minute Item No</th>
<th>Agenda Item</th>
<th>Presentation</th>
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<tbody>
<tr>
<td>064/14</td>
<td>Performance &amp; Quality Report</td>
<td>Council of Governors Nov 14 - Part 1 Qual</td>
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<tr>
<td>065/14</td>
<td>Finance Report</td>
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<tr>
<td>066/14</td>
<td>Serious Incidents Update</td>
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### Council of Governors Meeting: Action Log (following Part 1 meeting held on 12 November 2014)

<table>
<thead>
<tr>
<th>Minutes Ref</th>
<th>Action</th>
<th>Owner</th>
<th>Deadline</th>
<th>Outcome</th>
<th>Status Comp / Open</th>
<th>RAG rating</th>
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<tbody>
<tr>
<td>074/14</td>
<td><strong>Governance Committee</strong>: Terms of reference annual review</td>
<td>JJ</td>
<td>Nov 15</td>
<td></td>
<td>Open</td>
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<tr>
<td>068/14</td>
<td><strong>Annual and Strategy Planning</strong>: Governor Annual Planning Group to be established</td>
<td>NL</td>
<td>Jan 15</td>
<td>Included in CoG Mar agenda</td>
<td>Open</td>
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<td>068/14</td>
<td><strong>Annual and Strategy Planning</strong>: draft annual plan as agenda item at CoG Feb 2015 meeting</td>
<td>NL</td>
<td>Mar 15</td>
<td>Included in CoG Mar agenda; planning group established</td>
<td>Open</td>
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<tr>
<td>067/14</td>
<td><strong>Quality Visits</strong>: calendar for 2015 to be finalised and circulated to Governors</td>
<td>MM</td>
<td>Jan 15</td>
<td>Included in CoG Mar agenda</td>
<td>Open</td>
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<td>046/14</td>
<td><strong>Serious Incidents</strong> update at Feb 2015 CoG meeting to include safer staffing</td>
<td>AB</td>
<td>Mar 15</td>
<td>Included in CoG Mar agenda</td>
<td>Open</td>
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<td>025/14</td>
<td><strong>Serious Incidents</strong> update at Feb 2015 CoG meeting to include safer staffing</td>
<td>AB</td>
<td>Mar 15</td>
<td>Included in CoG Mar agenda</td>
<td>Open</td>
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<td>043/14</td>
<td><strong>CoG constituency and composition review</strong>: Options to be presented at CoG Feb meeting</td>
<td>NL</td>
<td>Mar 15</td>
<td>Update report presented at CoG Nov 2015 meeting and included in CoG Mar agenda</td>
<td>Open</td>
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<td>032/14</td>
<td><strong>CoG constituency and composition review</strong>: Options to be presented at CoG Feb meeting</td>
<td>NL</td>
<td>Mar 15</td>
<td>Update report presented at CoG Nov 2015 meeting and included in CoG Mar agenda</td>
<td>Open</td>
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<td>049/14</td>
<td><strong>Board Evaluation Review</strong>: progress on action plan to be presented at Nov CoG meeting</td>
<td>LC</td>
<td>Nov</td>
<td>Presented at Nov CoG meeting</td>
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<td>032/14</td>
<td><strong>CoG work plan development:</strong> Timetable to be drafted for consideration by Governance Committee – target date Feb 15. Update to be presented at CoG Nov2014</td>
<td>Gov Cte</td>
<td>Feb 15</td>
<td>Presented and approved Nov CoG meeting</td>
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<td>038/14</td>
<td><strong>CoG annual self-assessment review:</strong> to be reviewed by Governance Committee. Report to be presented by T&amp;D T&amp;F Group at CoG Nov 2014</td>
<td>Gov Cte</td>
<td>Nov</td>
<td>Actions included in the work of the T&amp;D T&amp;F Group</td>
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MINUTES OF THE ANNUAL GENERAL MEETING & ANNUAL MEMBERS MEETING
Held on Wednesday 17 September 2014
The Riverside Suite, Venue 360, 30 Gipsy Lane, Luton LU1 3JH

In the Chair: Lorraine Cabel (Chair of the Trust)

Governors present:
Brian Arney Public Governor Shurleea Harding Public Governor
Roy Birch Public Governor Colin Harris Public Governor
David Bowater Appointed Governor Evelyn Hoggart Public Governor
Susan Butterworth Public Governor John Jones Public Governor
Paul Delaney Staff Governor Lynda Lees Public Governor
Joy Das Appointed Governor Deborah Ridley-Joyce Public Governor
Michael Dolling Public Governor Larry Smith Public Governor
Karen Forrest Staff Governor Jim Thakoordin Public Governor
Jackie Gleeson Public Governor Mandy Tanner Appointed Governor
Paula Grayson Public Governor Tony Wright Public Governor

In attendance:
Sally Morris Chief Executive
Andy Brogan Executive Director Clinical Governance & Quality
Randolph Charles Non-Executive Director
Steve Cotter Non-Executive Director
Alison Davis Non-Executive Director
Sam Fuller Patient Experience Manager
Dr Dawn Hillier Non-Executive Director
Nigel Leonard Executive Director Corporate Governance
Malcolm McCann Executive Director Integrated Services (Essex & Suffolk)
Mark Madden Executive Chief Finance Officer
Rob Murray Audit Director, Ernst & Young
Dr Milind Karale Executive Medical Director
Richard Winter Executive Director Integrated Services (Beds & Luton)
Janet Wood Non-Executive Director
Cathy Lilley Assistant Trust Secretary (minute taker)

Other: Members of the Trust and members of the public

01/14 WELCOME AND INTRODUCTION

Lorraine Cabel, Trust Chair, opened the meeting and welcomed Directors, Governors, presenters, staff, members and the public.
Lorraine pointed out that the Trust’s annual report and account reflects the achievements and challenges of the Trust, and also provides an outline of some of the Trust’s future priorities.

She particularly highlighted that 2013/14 had seen significant change particularly on the Board of Directors with the appointment of a new Chief Executive as well as three new Executive Directors – under the new leadership of the Chief Executive, these appointments strengthen an already strong and highly effective Board.

Lorraine stated that she was extremely proud of the care provided by the Trust as well as its commitment to maintain an open dialogue with service users, carers and our partner organisations, and during the year had undertaken various visits to front-line services. These visits allowed the Board to remain in touch and to see first-hand the quality of the services the Trust provides, as well as providing an opportunity for a two-way dialogue with staff. One of the priorities for 2015/16 is to further enhance Board visibility.

Lorraine extended her personal thanks to the members of staff for their dedication, professionalism and commitment who continued focus on providing high quality care; and to the Board of Directors for their tenacity and leadership, particularly in managing complex and competing priorities; and to the Council of Governors for their dedication, commitment and support, recognising the enormous amount of work in strengthening the relationship with the Board of Directors. She also took the opportunity of welcoming newly-elected Governors, congratulated those Governors who had recently been re-elected for a further term of office, and thanked those Governors who had stood down during the year.

**02/14 APOLOGIES FOR ABSENCE**

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<th>Name</th>
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<tr>
<td>Robert Calver</td>
<td>Public Governor</td>
<td>Kresh Ramanah</td>
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<td>Ann Devlin</td>
<td>Appointed Governor</td>
<td>Thilak Ratnayake</td>
<td>Staff Governor</td>
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<td>Public Governor</td>
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No apologies were received from:

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<tr>
<td>William Archibald</td>
<td>Appointed Governor</td>
<td>Barbara Rice</td>
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<td>Michael Edmonds</td>
<td>Public Governor</td>
<td>Nic Taylor-Barbieri</td>
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<td>Cllr Velmurugan</td>
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<td>Clive Lucas</td>
<td>Public Governor</td>
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**03/14 DECLARATIONS OF INTEREST**

None.
04/14 MINUTES OF THE AGM HELD ON 12 SEPTEMBER 2013

The minutes of the AGM held on 12 September 2013 were approved as a correct record.

05/14 MATTERS ARISING

None.

06/14 PRESENTATION OF ANNUAL REPORT 2013/14

Sally Morris, Chief Executive, presented a review of the 2013/14 year for the Trust and reported that her first year as CEO has been one of challenges, innovation, excitement and change. The presentation is attached at appendix 1.

Sally highlighted some of the achievements that demonstrated the Trust’s commitment to providing high quality safe services, including:

- Implementation of actions from the Francis, Berwick and Keogh Reports, e.g. the launch of safer staffing boards
- Positive CQC visits
- Working with partners in the community, e.g. COPD Psychology Pilot – an award winning partnership with Southend Hospital
- Various awards, e.g. AIMS accreditation across mental health and learning disability services
- Achievement of 92% of 56 national and local CQUIN Schemes equating to £5.8m income
- Achievement of all 13 key performance indicators (proxy measures of quality) during all four quarters.

With regards to the overall performance of the Trust during 2013/14, Sally reported that the Trust was a sustainable organisation maintaining a strong financial position and had achieved all Monitor targets, with a Finance Continuity of Service Rating of 4 and Governance Rating of green.

Sally provided a brief overview of the Trust’s five year plan and highlighted the priorities for 2014/15 against a backdrop of transferring Beds and Luton mental health services to a new provider; tough financial challenges which included delivering quality services that are safe and effective; quality leadership and workforce; sustainability of services; and innovative and a transformational approach to efficiency and effectiveness.

In conclusion, Sally acknowledged and offered her congratulations and thanks to all Trust staff, the Board of Directors and Council of Governors whose dedication and skills guaranteed that the Trust vision was translated into reality.

The Council of Governors received the annual report for 2013/14.
07/13 PRESENTATION OF ANNUAL ACCOUNTS 2013/13

Mark Madden, Executive Chief Finance Officer, presented the annual accounts for 1 April 2013 to 31 March 2014 including a summary of the Trust’s income and expenditure, divisional performance, capital expenditure and efficiency and income generation initiatives. These had been produced on the basis that the Trust was a going concern and were in accordance with the International Financial Reporting Standards, showing a true and fair view of the Trust’s financial activities.

Mark reported that it had been another challenging but successful year for the Trust having achieved its targets and a surplus in line with plan, against the backdrop of the continued economic recession and the continued drive for efficiencies and quality in the public sector. He also highlighted the difficulties facing the Trust in the year ahead particularly with the disaggregation of the Bedfordshire and Luton mental health services and against a tough financial outlook for 2014/15.

The Council of Governors received the Annual Accounts for 2013/14.

08/13 AUDITORS’ REPORT

Rob Murray, Audit Director - Ernst & Young, presented the External Auditors’ report and confirmed that:
- The Trust’s financial statements were a true and fair view
- The audit of the annual accounts for 2013/14 did not identify any material errors, there were minimal adjustments to the draft financial statements and that the working papers were of a high standard for completion of the audit
- An unqualified limited assurance report had been issued following the examination of the Trust’s Quality Report 2013/14 and the testing of three indicators for accuracy
- An unqualified value for money conclusion had been issued
- A group assurance certificate had been issued
- An audit completion certificate had been issued.

The Council of Governors received and noted the Auditor’s Report for 2013/14.

09/13 THIRD REAPPOINTMENT OF EXTERNAL AUDITORS

Janet Wood, Non-Executive Director and Chair of the Audit Committee, presented the report on the third reappointment of the External Auditors.

Janet reminded the meeting that in 2012, the Council of Governors awarded Ernst & Young a 12 month contract for the provision of an external financial audit service which was renewable annually for a maximum of three years. She reminded the Council of the annual evaluation processes to assess the auditors’ work and fees to ensure the work is of a sufficiently high standard and that the fees are reasonable.
On the recommendation of the Audit Committee, the Council of Governors unanimously agreed by a show of hands to award a contract to Ernst & Young for the provision of external financial audit service covering the financial year 2014/15.

The Council of Governors approved the reappointment of Ernst & Young as the Trust's external auditor for the financial year 2014/15.

10/13 REPORT FROM THE COUNCIL OF GOVERNORS

John Jones, as Lead Governor, presented a report from the Council of Governors which outlined the role of the Council and highlighted its key achievements during 2013 – 2014. He particularly drew attention to the significant changes to the role of a Governor during the last two years as a result of the introduction of the Health & Social Care Act 2012 and thanked Governor colleagues for their enthusiasm and commitment to fulfilling their enhanced role. John also thanked the Board of Directors under the leadership of the Chair for being receptive to the ideas proposed by the Council to carry out its role, and also acknowledged the support of the Trust Secretary Office during the year.

John concluded his presentation by stating that the Council was looking forward to continuing to support the Trust and its members, but recognised the challenges facing the Trust through the changing commissioning environment and the continued squeeze on finances, particularly those affecting mental health services.

11/13 QUESTIONS FROM MEMBERS AND THE PUBLIC

Questions were received, and answered, from a number of the Trust’s members, as well as members of the general public. These included:

**Question 1:** Do all Public Governors regularly attend the Council of Governors meetings?

**Response 1:** Lorraine Cabel acknowledged that attendance at Council of Governor meetings can vary amongst Governors but provided assurance that this is regularly monitored by the Council’s Governance Committee in line with a Council-led procedure. The importance of Governors attending such meetings in order to fulfil their responsibilities was recognised. In addition, support and monitoring mechanisms were being put in place to help Governors to both understand and fulfil their role including detailed guidance notes for prospective Governors which clearly sets out the expectations of a Governor, and the development of a Governor work plan.

**Question 2:** Several members of the public expressed concern and disappointment with the closure of drop-in centres and asked if there was any opportunity for these to be re-established.

**Response 2:** Sally Morris explained that the decisions to close the centres were made by the CCGs against a backdrop of financial pressures and not the Trust. She, however, recognised the importance of these centres for service users as part of an integrated care pathway and suggested that any concerns could be raised with the local authorities and the CCGs directly.
Question 3: Referring to page 38 of the annual report relating to sickness rates, Jim Thakoordin, Public Governor, asked if the Trust undertook regular analysis to understand the reasons for sick leave and actions to be taken to address any issues.

Response 3: Sally Morris confirmed that the monitoring of sickness rates was a high priority as part of the safer staffing work and could be broken down by staff group and ward, and by short and long term sickness and provided assurance that systems were in place to address any hotspots.

Question 4: Larry Smith, Public Governor, asked if there would be a payback following the investment by the Trust in the installation of new boilers as part of the green initiatives.

Response 4: Mark Madden provided assurance that any project of this type would have been reviewed in detail by the Trust’s Investment Committee. In relation to the installation of new boilers, the old boilers were out of date and inefficient and based on a business case, the Investment Committee approved the application for replacement boilers.

Question 5: Would there be an opportunity for the public to meet the new provider(s) of mental health and learning disability services in Bedfordshire and Luton?

Response 5: Sally Morris felt that this was probable as the new provider(s) would undoubtedly wish to meet with the public and patients.

In response to a statement about ex-service men with mental health issues, Roy Birch advised there was an organisation called Combat Stress, a veterans’ mental health charity which offers treatment and support services to ex-service men and women.

Representatives from the Luton Arts Project thanked Richard Winter for his support and vision in helping the group secure future funding.

12/13 CLOSE

Lorraine Cabel closed the meeting by thanking everyone who had attended and contributed to it. She stated that 2013/14 had been a challenging year but ultimately a successful one, and expressed her gratitude to the Chief Executive and all of the Trust’s staff as well as Governors and volunteers, for their hard work during the course of the year.

The meeting closed at 12:45.
## Appendix 1: Presentations and Reports

<table>
<thead>
<tr>
<th>Minutes Ref No</th>
<th>Agenda Item</th>
<th>Presentation/Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>04/14</td>
<td>Minutes of AGM held 12 September 2013</td>
<td>AGM 2013 Minutes FINAL.pdf</td>
</tr>
<tr>
<td>06/14</td>
<td>Presentation of Annual Report 2013/14</td>
<td>AGM 2014 - CEO presentation.pdf</td>
</tr>
<tr>
<td>07/14</td>
<td>Presentation of Annual Accounts 2013/14</td>
<td>AGM 2014 - Finance presentation.pdf</td>
</tr>
<tr>
<td>08/14</td>
<td>Auditor’s Reports</td>
<td>#7 Auditor's Report South Essex Partners</td>
</tr>
<tr>
<td></td>
<td></td>
<td>AGM 2014 - Auditors' report presentation.pdf</td>
</tr>
<tr>
<td>09/14</td>
<td>Appointment of External Auditor</td>
<td>#8 Reappointment of External Auditors S</td>
</tr>
<tr>
<td>10/14</td>
<td>Report from the Council of Governors</td>
<td>AGM 2014 - Report from the CoG present</td>
</tr>
</tbody>
</table>
EXECUTIVE SUMMARY – FINANCIAL PERFORMANCE AS AT MONTH 10 – January 2015

OVERVIEW

The Trust has achieved a surplus of £5.5 million for Month 10 - January 2015, which is in-line with the Monitor plan.

The year-end forecast position remains at £1.2m surplus, however this is reliant on the key assumptions happening by the end of the 2014/15 financial year e.g. expected expenditure within non-delegated budgets and the B&L disaggregation.

The Monitor Continuity of Service Risk Rating remains high at 4, and working capital and cash balances remain very strong.

At the end of Month 10, the Trust is reporting a year to date deficit on its cost improvement programme of £1.2 million, a deterioration of £0.3 million from the previous month which is due to delays in the implementation of transformational schemes within Essex Mental Health. The forecast year end deficit is now £2.9 million, which remains unchanged from last month; this is mainly attributable to the changes in recurrent performance on Essex community services. This still leaves £3.1 million of schemes to be carried forward into 2015/16 and addressed on a recurrent basis. The impact has been factored into the current forecast outturn of the Trust.

A high level summary of the Trust’s financial performance at the end of Month 10 - January 2015 is outlined below. Further commentary is given in the main report.

Financial Performance against Monitor Plan – further information in section 3.2
The Trust’s surplus as at Month 10 is in-line with the 2014/15 plan submitted to Monitor. EBITDA is currently £16.0 million.

Forecast Position– further information in section 3.3
The Trust’s year-end forecast remains a surplus of £1.2 million; this is consistent with the original Monitor Plan, and with the Month 9 forecast.

Continuity of Service Risk Rating – further information in section 3.4
At the end of Month 10 the Trust has achieved a Continuity of Service risk rating of 4, which indicates strong financial health of the Trust.

Budgetary Performance – further information in sections 4.2-4.4
The Trust’s Month 10 position is £2.0 million above the planned year to date surplus position. This is predominately due to delegated budget underspends and additional income.

Cost Improvement Programme – further information in section 4.5
As at Month 10 - January 2015 the position is a year to date deficit of £1.3 million, which continues to largely relate to the Essex mental health QIPP schemes. At Month 10 the Trust is forecasting a recurrent deficit on its CIP programme of around £2.9 million.

Capital Programme – further information in section 5.2
As at end of Month 10, capital expenditure was £2.0 million less than planned; and receipt from property disposal was £3.4 million less than planned resulting in a net variance of £1.4 million less than plan. The net variance on the capital programme year to date when compared to the Reforecast is £0.1 million.
Cash and Working Capital – further information in section 5.3-5.5
At the end of Month 10, the Trust’s cash balance is £50.7 million, £4.5 million higher than Month 9, and £2.8 million lower than the planned position for Month 10.

ASSURANCE:

CQC Registration Standards, Commissioning Contracts:
The Trust’s financial plan for the year includes due regard to CQC Registration Standards and is informed by the value of the Commissioning Contracts

Trust Annual Plan and Objectives:
The Trust’s financial plan for the year is the financial forecast for the Trust’s annual plan and objectives.

NHS Constitution:
This report has no direct impact.

Data Quality:
There is no impact on data quality from this report.

Involvement of Service Users /Links:
Service users have not been involved in developing this report.

Communication and consultation with stakeholders:
This report does not contain any information that is required to be communicated or consulted with any stakeholders.

Service Impact/Health Improvement Gains:
There is no immediate direct impact in relation to this report.

Financial Implications:
Financial implications are outlined in this report.

Governance Implications:
The Trust’s quarterly financial position forms the basis of the Trust’s monitoring return to be submitted to Monitor at the end of April 2015.

Patient Safety/Quality:
This report has no direct impact on patient safety or quality.

ACTION REQUIRED:

1. The Council of Governors is asked to note the content of the report.

Report prepared by: Russell Middleton, Associate Chief Finance Officer

On behalf of

Mark Madden
Executive Chief Finance Officer
## Financial Performance – YTD 2014/15

<table>
<thead>
<tr>
<th></th>
<th>Income £m’s</th>
<th>Expenditure £m’s</th>
<th>Amort. &amp; Deprecn £m’s</th>
<th>Non Operating expenses £m’s</th>
<th>Surplus £m’s</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beds &amp; Luton MH</td>
<td>60.8</td>
<td>-59.9</td>
<td>-1.2</td>
<td>-2.0</td>
<td>-2.2</td>
</tr>
<tr>
<td>Beds Community</td>
<td>38.9</td>
<td>-36.9</td>
<td>-0.1</td>
<td>-0.0</td>
<td>1.9</td>
</tr>
<tr>
<td>Essex MH</td>
<td>97.3</td>
<td>-86.7</td>
<td>-2.9</td>
<td>-4.1</td>
<td>3.6</td>
</tr>
<tr>
<td>SE Community</td>
<td>28.8</td>
<td>-27.9</td>
<td>-0.1</td>
<td>-0.0</td>
<td>0.7</td>
</tr>
<tr>
<td>WE Community</td>
<td>34.2</td>
<td>-33.4</td>
<td>-0.1</td>
<td>-0.0</td>
<td>0.7</td>
</tr>
<tr>
<td>Suffolk</td>
<td>9.9</td>
<td>-9.0</td>
<td>-0.0</td>
<td>-0.0</td>
<td>0.9</td>
</tr>
<tr>
<td><strong>Overall Position</strong></td>
<td><strong>269.8</strong></td>
<td><strong>-253.8</strong></td>
<td><strong>-4.4</strong></td>
<td><strong>-6.1</strong></td>
<td><strong>5.5</strong></td>
</tr>
</tbody>
</table>
## Cost Improvement Programme YTD 2014/15

<table>
<thead>
<tr>
<th></th>
<th>SEPT £m’s</th>
<th>Beds &amp; Luton MH £m’s</th>
<th>Beds Comm £m’s</th>
<th>Essex MH £m’s</th>
<th>Special-ist £m’s</th>
<th>SE Comm £m’s</th>
<th>WE Comm £m’s</th>
<th>Corpor-ate £m’s</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Internal Efficiency Requirement for 2014/15</strong></td>
<td>14.9</td>
<td>3.2</td>
<td>2.1</td>
<td>3.8</td>
<td>1.5</td>
<td>1.4</td>
<td>1.6</td>
<td>1.3</td>
</tr>
<tr>
<td><strong>Additional QIPP Efficiency Requirement from CCG’s</strong></td>
<td>1.6</td>
<td></td>
<td></td>
<td>1.5</td>
<td></td>
<td>0.1</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total Efficiency Savings 2014/15</strong></td>
<td><strong>16.5</strong></td>
<td><strong>3.2</strong></td>
<td><strong>2.1</strong></td>
<td><strong>5.3</strong></td>
<td><strong>1.5</strong></td>
<td><strong>1.5</strong></td>
<td><strong>1.6</strong></td>
<td><strong>1.3</strong></td>
</tr>
<tr>
<td><strong>M10 YTD Surplus / (Deficit)</strong></td>
<td>(1.2)</td>
<td>(0.0)</td>
<td>0.0</td>
<td>(1.1)</td>
<td>(0.2)</td>
<td>(0.1)</td>
<td>0.2</td>
<td>(0.0)</td>
</tr>
<tr>
<td><strong>Forecast Year End Surplus / (Deficit) on 2014/15 plan</strong></td>
<td>(2.0)</td>
<td>(0.0)</td>
<td>0.0</td>
<td>(1.6)</td>
<td>(0.3)</td>
<td>(0.1)</td>
<td>0.1</td>
<td>0.0</td>
</tr>
</tbody>
</table>
SEPT

GOVERNOR QUALITY VISITS UPDATE

1.0 PURPOSE OF REPORT

This report provides the Council of Governors with an update on the outcomes of quality visits and progress with any issues raised as a result of these visits. This report also provides an evaluation of the 15 steps tool used at Quality Visits.

2.0 EVALUATION

The Compliance Team was asked to undertake an evaluation of the 15 steps audit tool used to complete the Quality Visits. The Compliance Team developed a questionnaire, which was circulated to all those who have been involved in undertaking a Quality Visit.

The Compliance Team received 13 responses to the questionnaire (3 x Executive Directors, 3 x Non-Executive Directors, 7 x Governors). The responses ranged from people filling in the questionnaires to providing letters or emails outlining their experiences with the tool.

The questionnaire asked individuals to score a series of questions out of 5, with 5 being the highest. The following conclusions were gained from the answers given:

- The audit tool was easy to use (average score 4/5)
- The audit tool was useful (average score 4.6/5)
- The audit tool was effective in assessing the quality of services visited (average score 4.3/5)
- The audit tool allowed individuals to elicit the information they wanted (majority answered “yes”)
- The audit tool was not always effective in assessing compliance with the CQC standards (average score 3.3/5)

There were also a number of positive comments made in the evaluation of what individuals felt worked well with the audit tool:

- The audit tool focuses on patient outcomes.
- The audit tool simplifies the process to assess the quality indicators that matter to patients and carers, making the visit less bureaucratic.
- The audit tool is a good starting point which can then lead to more searching questions on specific subjects.
- The audit tool collects soft-intelligence, giving a general feel and impression of a service.
- The audit tool provides a good framework and prompt.
- Discussions beforehand about the tool were valuable and joint writing of view afterwards was excellent.
- The audit tool allows auditors to think about how the ward / unit presents itself as a whole using the different headings. The approach is much more relevant to patient experience, patient safety and patient choice.
The audit tool does what it sets out to do. The auditors are not “expert clinicians” so it is a very useful way of them assessing quality.

There were also a number of comments in relation to what could work better:

- There could be a clearer link to what the CQC will review. After the visit, the auditor was not assured that the CQC would share the conclusions of the visit. However, they did feel that the Compliance Team already look at CQC and the quality visit provides softer intelligence.
- The audit only assesses one dimension and a lot overlaps. It was questioned whether the audit tool could link with Mental Health Act Managers Audits.
- There are a lot of questions, felt that it would be better to highlight key questions in each section.
- There could be more time to speak with patients on a 1:1 basis and more time with staff to discuss the ethos of the ward.
- It is not always easy to cover the elements due to the fluid nature of the visit.
- Some areas of good practice and issues to be approved fell into multiple areas on the audit tool.
- The audit tool could be more specifically aligned to patient pathways / outcomes.
- The guidance to use the tool was lengthy and there was no chance to read through before the inspection. However, the Non-Executive Director went through the important areas which helped.
- A training session would have been useful.
- The audit does not truly reflect how a patient feels when accessing services, in terms of being frightened, worried about the future and suffering from a mental health condition.
- Need to consider using / incorporating the tool with CQC compliance reviews and not having another review visit sitting separately. The Trust needs to be mindful of the need to respect patient dignity and privacy and it presently feels there are many reviews.

Overall using the 15 Steps tool appears to be a useful way of structuring a quality visit to Trust services. The tool does align to the CQC standards implicitly and governors should be assured that these links are made explicitly from the feedback provided as part of the Trust’s internal intelligence gathering systems. It is acknowledged that the pack provided is detailed, but it is a nationally developed tool that the Trust is not able to amend. The Trust is not expecting that every part of the tool is completed as a checklist, it is designed to prompt discussion and/or record what is seen in the overall context of quality only. It is therefore recommended that the tool continues to be used but if governors require any support or assistance in advance of a visit, the Compliance Team would be happy to provide this.

3.0 PREVIOUS QUALITY VISITS

Archer Unit (October 2014)

As previously reported, a Quality Visit was undertaken on the 22nd October 2014 to Archer Unit which is an older people’s community health inpatient service in Bedfordshire.

The feedback from the visit was received and circulated to the ward, with the following positive findings:

- The unit was easy to locate with good signposting.
- Staff were welcoming. They also knew the patients, appeared knowledgeable and were patient centred in their approach.
- The unit was bright, airy, smelt nice and looked clean.
- It was noted that the food hygiene rating was 5 and this was displayed on the unit.
- The noticeboards appeared to be well-organised. The safer staffing board was very informative and well-presented.
- All staff members had a name badge.
- All staff knew the patients.
- A patient leaving the unit was very complimentary of the service. Another patient commented they felt very welcome and well-looked after by the staff.
- The visiting team were impressed with the discharge coordinator role. The patients were well-prepared for discharge. The unit was also setting-up a pre-discharge carers group to inform carers of patient care following discharge.
- Each patient was rated as red, amber or green, which the visiting team was a positive practice.
- The information packs for patients were well-organised.
- The staff were very caring and patients were satisfied with the care they received.

There were also a number of minor issues raised during the visit, which were developed into an action plan for the ward to address:

<table>
<thead>
<tr>
<th>Issue Identified</th>
<th>Ward Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>The décor in the training room needs improving (elsewhere is good)</td>
<td>The training room and side room 4 (where the décor was also poor) have now been redecorated.</td>
</tr>
<tr>
<td>A drawer in the medication room was broken and the overall appearance of the</td>
<td>There are currently no plans in place for a refurbishment of the medicines room but staff have been reminded to escalate any requests for repairs</td>
</tr>
<tr>
<td>medication room was poor.</td>
<td>immediately.</td>
</tr>
<tr>
<td>However, the medication was secure and the practice around medication</td>
<td>The nurse in charge informed us that the issue has been raised with the Pharmacy.</td>
</tr>
<tr>
<td>prescribing appeared safe.</td>
<td></td>
</tr>
<tr>
<td>The unit is on the first floor and patients do not have access to the lawn</td>
<td>Debbie Kirk, Matron has confirmed that a member of the inspection team took an action to discuss this issue with Richard Winter, Executive</td>
</tr>
<tr>
<td>area downstairs. In the summer, staff would want to take patients to the lawn</td>
<td>Director, and to contact the volunteer co-ordinator to staff the area.</td>
</tr>
<tr>
<td>area but need approval as the lawn area belongs to another organisation.</td>
<td>Debbie Kirk is awaiting confirmation of the above actions and will then request charitable funds to secure furniture, pots etc.</td>
</tr>
<tr>
<td>It was agreed that the unit manager will put in a request for charitable funds</td>
<td></td>
</tr>
<tr>
<td>to be used for this</td>
<td></td>
</tr>
</tbody>
</table>
The staff informed that the unit is not air conditioned and gets very hot in the summer, making it uncomfortable for the patients.

The issue of the heat on the unit has been escalated to the estates team. Estates will ensure that heating is turned off promptly at the beginning of summer and will monitor temperature levels to enable a baseline on which to consider potential solutions. The unit have received confirmation that portable air conditioning units would not be appropriate due to health and safety concerns.

**Chaucer Ward (November 2014)**

A Quality Visit was undertaken on the 27th November 2014 at Chaucer Ward, which is an older people’s mental health ward in Bedfordshire. The visit was undertaken by Andy Brogan, Executive Director of Clinical Governance & Quality and Executive Nurse, Steve Cotter, Non-Executive Director and Governors Larry Smith, Clive Travis and Paula Grayson.

Feedback from the visit was collated and circulated to the team. The feedback identified a number of positive areas:

- The décor of the ward and the waiting room was good throughout.
- There was good human interaction; staff were smiling, welcoming and supportive.
- The occupational therapist on the ward was welcoming.
- Staff clarified what the patients preferred to be called.
- Patients seemed happy and safe.
- There was a relaxed and pleasant atmosphere.
- Medicines reconciliation is completed on admission.
- Fluids were encouraged by staff.
- There was evidence of involving patients in group activities, such as walking groups, gardening groups and shopping.

There were no issues identified following the visit.

**Westley Ward (December 2014)**

A Quality Visit was undertaken on the 10th December 2014 at Westley Ward, which is an adult mental health ward in Essex. The visit was undertaken by Mark Madden, Executive Chief Finance Officer and Resources Officer, Janet Wood, Non-Executive Director and Governors Tony Wright and Kresh Ramanah.

Feedback from the visit was collated and circulated to the team. The feedback identified a number of positive areas:

- There was a very warm welcome received from all staff, including nursing and occupational therapy.
- The noticeboard was well laid out and visible.
- The staff board was well positioned and visible.
- There was a good standard of decoration and cleanliness.
- Overall, the environment appeared to be safe.
- The environment was tidy, with appropriate furniture in good condition.
- Specialist rooms, such as treatment rooms, were tidy and well labelled.
- All staff seemed friendly and gave a positive feeling for patients and the visiting team.
- Staff have good interaction with patient and there was evidence of a range of activities available.
- Staff were encouraged to use the server to have meals with the patients.
- A community meeting is held each morning with patients, to understand any issues and identify any improvements for the day. The meetings were positive.
- The ward appeared calm and well-organised.

There were also a number of minor issues raised during the visit, which were developed into an action plan for the ward to address:

<table>
<thead>
<tr>
<th>Issue Identified</th>
<th>Ward Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>There were no significant areas for improvement; however, the ward management may wish to consider making the welcome pack more visible.</td>
<td>Welcome Pack to be displayed at entrance to ward to make pack more visible</td>
</tr>
<tr>
<td>Activity equipment used in a separate facility outside of the ward may require update and maintenance. The ward management should consider the use of the Trust funds to support any changes.</td>
<td>Senior sister utilises Trust Funds monies to request equipment for patients to utilise</td>
</tr>
<tr>
<td></td>
<td>Safewards box to be utilised via Westley staff, which is located on Grangewaters Ward at present</td>
</tr>
</tbody>
</table>

**Mayfield Unit (January 2015)**

A Quality Visit was undertaken on the 16th January 2015 at Mayfield Unit, which is an older people’s mental health ward in Essex. The visit was undertaken by Nigel Leonard, Executive Director of Corporate Governance, Steve Currell, Non-Executive Director and Governors Sue Revell and Roy Birch.

Feedback from the visit was collated and circulated to the team. The feedback identified a number of positive areas:

- Staff were warm and friendly, with reception staff welcoming to the ward. This was supported from feedback from staff and carers on the ward.
- Extra care and attention was given to patients to ensure they were comfortable.
- A minor incident occurred on the ward at the time of the visit. Staff were extremely attentive and resolved the issue immediately, whilst maximising the privacy for the patient.
- The food rating had been classified as a 5.
- Carers were very supportive of the ward environment and the quality of the care provided.
- There were examples of the use of high low mattresses.
- The feedback from patients and in particular carers about the unit was first class.
- The visitors interviewed four carers, all of whom were delighted with the care and treatment on the unit.
- The unit was very clean, well-organised and there were no odours.
- Dementia buddies were active on the unit.
The team had actively engaged with a community project to help redecorate the sensory room. This local group attend the unit on a Thursday and Friday. This is an excellent example of community engagement.

- The day board was up to date with details of staffing.
- Leaflets and notices were also up to date and there was evidence of regular carers meetings. The visiting team also recognised the advantages provided by the separate carers room.
- There was evidence of 1:1 care and barrier nursing in place for some individuals on the unit.
- The visiting team were impressed by the quality of the unit, which was calm and well-organised.
- There were names and recognition boxes outside each patient room. There were also a lot of personal items within each room, which was welcomed by the carers.

There were some very minor issues raised during the visit, however, these were rectified at the time of the visit.

**Gloucester Ward (February 2015)**

A Quality Visit was undertaken on the 2nd February 2015 at Gloucester Ward, which is an older people’s mental health ward in Essex. The visit was undertaken by Malcolm McCann, Executive Director of Integrated Services (Essex and Suffolk), Mary-Ann Munford, Non-Executive Director and Governors Deborah Ridley-Joyce, Cllr. Velmuragan and Brian Arney. Feedback is currently being finalised and will be reported at the next meeting.

### 3.0 FUTURE VISITS

The Quality Visit calendar has been developed for 2015 and is listed below. There are a number of places still available for the Quality Visits scheduled for 2015 and Governors are asked to confirm if they would like to attend any of the visits scheduled (maximum 3 Governors per visit) via the Chair’s office. The Quality Visits for September, October, November and December are still in the process of being booked and these will be circulated to Governors once confirmed.

<table>
<thead>
<tr>
<th>Month</th>
<th>Date / Time</th>
<th>Director / NED</th>
<th>Location</th>
<th>Governors currently booked to attend</th>
</tr>
</thead>
<tbody>
<tr>
<td>March</td>
<td>27th March, 10am</td>
<td>Richard Winter / Steve Cotter</td>
<td>Robin Pinto Unit, Luton</td>
<td></td>
</tr>
<tr>
<td>April</td>
<td>13th, 1pm</td>
<td>Milind Karale / Alison Davies</td>
<td>Wood Lea Clinic, Bedford</td>
<td>John Jones, Paula Grayson</td>
</tr>
<tr>
<td>May</td>
<td>7th May, 1pm</td>
<td>Mark Madden / Janet Wood</td>
<td>Cumberledge Intermediate Care Centre, Southend</td>
<td></td>
</tr>
<tr>
<td>June</td>
<td>3rd June, 6pm</td>
<td>Sally Morris / Lorraine Cabel</td>
<td>St. Margaret’s Hospital, Epping</td>
<td>Tony Wright, Colin Harris, Kresh Ramanah</td>
</tr>
<tr>
<td>July</td>
<td>TBC - July</td>
<td>Richard Winter / Steve Cotter</td>
<td>Whitbread Ward, Bedfordshire</td>
<td></td>
</tr>
</tbody>
</table>
### Governor Quality Visits Update

<table>
<thead>
<tr>
<th>Month</th>
<th>Date / Time</th>
<th>Director / NED</th>
<th>Location</th>
<th>Governors currently booked to attend</th>
</tr>
</thead>
<tbody>
<tr>
<td>August</td>
<td>21st, 10am</td>
<td>Nigel Leonard / Steve Currell</td>
<td>Alpine Ward, Wickford</td>
<td></td>
</tr>
<tr>
<td>September</td>
<td>7th September, 10am</td>
<td>Malcolm McCann / Mary-Ann Munford</td>
<td>TBC</td>
<td></td>
</tr>
<tr>
<td>October</td>
<td>5th October, 6pm</td>
<td>Milind Karale / Alison Davies</td>
<td>TBC – Community Health Service, Bedfordshire</td>
<td></td>
</tr>
<tr>
<td>November</td>
<td>TBC - November</td>
<td>Andy Brogan / Randolph Charles</td>
<td>TBC</td>
<td></td>
</tr>
<tr>
<td>December</td>
<td>3rd December 9:30am</td>
<td>Mark Madden / Janet Wood</td>
<td>Knightswick Clinic - TBC</td>
<td></td>
</tr>
</tbody>
</table>

### 4.0 ASSURANCE

**CQC Registration Standards, Commissioning Contracts; Trust Annual Plan and objectives**
The Quality Visits contribute towards ensuring the Trust is compliant with the Essential Standards of Quality and Safety.

**Involvement of Service Users/Healthwatch**
Governors talk to service users as part of the observational visits.

**Communication and consultation with stakeholders**
The Quality Visit process has been developed through comments from the Governors and has been agreed by the Council of Governors meeting.

**Service Impact/Health Improvement Gains**
Any concerns raised by Governors are escalated to the service for comment and action planning where applicable.

**Financial Implications**
There have been costs associated with implementing findings and cost implications may delay or prevent some recommendations being progressed unless a significant potential risk is identified.

**Governance Implications**
Quality Visits are part of the Trust CQC Governance system.

**Patient Safety/Quality**
Quality Visits contribute to the assurance systems in place in the Trust to maintain and improve patient safety and quality.
5.0 ACTION REQUIRED

The Council of Governors is asked to:-

1. Note the content of this report.
2. Agree continued use of the 15 Steps Tool for service quality visits.
3. Advise the Chair’s Office if individual governors would like to participate in quality visits during 2015.

Report prepared by:

Chris Jennings
Compliance Officer

On behalf of:

Mark Madden
Executive Chief Finance and Resources Officer
1.0 PURPOSE OF REPORT

The purpose of this report is to provide the Council of Governors (CoG) with the timetable and arrangements for the Annual Planning process for 2015/16.

2.0 EXECUTIVE SUMMARY

The Council of Governors will recall that the Annual Planning Cycle was subject to significant change last year.

At the end of October Monitor confirmed that the Trust’s five year Strategic Plan was rated green. This rating means that Monitor has no undue concerns from the review of our Strategic Plan and the Trust will remain subject to ongoing delivery as normal. Monitor recognised the disaggregation of Bedfordshire and Luton contracts and encouraged the Trust to review our strategy on a regular basis.

The Board has already dedicated time to discuss the strategic positioning of the Trust in the medium and long term at the Board Development Sessions in November 2014 and February 2015. Further consideration is being given by the Board at the Development Session in March.

The Trust has also completed two Stakeholder Planning Events during 2015 and the outputs from these meetings will influence our plan for 2015/16.

The approach the Trust is adopting is to continue to review of strategic drivers and options for the organisation in the medium term. Discussions have also been held with the Trust’s Senior Leadership Team and the first meeting of the governors planning group is scheduled for Wednesday 4 March 2015.

The planning timetable for 2015/16 is attached in Appendix 1. Monitor has confirmed that at this stage they expect to receive a operational plan for 2015/16 only. The recent guidance has asked for the plan to be reduced to a maximum of 20 pages, plus the completion of a detailed financial information. As expected Monitor, NHS England, the Trust Development Agency and the Local Government Association will be reviewing and comparing the Business Plans from all NHS organisations and Local Authorities within each economy to ensure there is a high degree of collaboration and consistency across all partner agencies.
Monitor and the Trust Development Agency have provided additional support to provider organisations in the form of detailed planning toolkit and this has been assessed by the Trust.

In summary, the Trust is well placed to meet the requirements of this year’s planning process and the attached timetable aligns with the key dates in the Budget Setting Cycle.

The Council of Governors will also need to aware that Monitor has left open the option of requiring all Foundation Trusts to develop a new 5 year plan in the Summer 2015.

### 3.0 ASSURANCE

**CQC Registration Standards, Commissioning Contracts; Trust Annual Plan and objectives**
This report confirms that the Trust is taking action to ensure that it has effective plans for the future and that there are effective governance arrangements in place that will ensure that the Trust maintains a robust planning process.

**Involvement of Service Users /Links**
The report sets out options to engagement of stakeholders.

**Communication and consultation with stakeholders**
The report sets out options to engagement of stakeholders.

**Service Impact/Health Improvement Gains**
The Trust’s Strategic Plans will set out the priorities that the Trust has in relation to service development and clinical quality improvement that will lead to health improvement gains.

**Financial Implications**
There are potential savings associated with meeting commissioner intentions and the Trust’s planning objectives.

**Governance Implications**
This report confirms that effective governance arrangements are in place and that action is being taken to ensure that all statutory requirements are met going forward.

**Patient Safety/Quality**
The process sets out aims to ensure that the Trust’s vision, strategic priorities, service developments and clinical quality priorities are appropriately identified.

### 4.0 RECOMMENDATION

The Council of Governors is asked to note the key dates in the planning timetable.
5.0 ACTION REQUIRED:

The Council of Governors is asked to:

1. To note the planning timetable for 2015/16

Report prepared by

Nigel Leonard
Executive Director of Corporate Governance

4 March 2015
## Appendix One

**Planning Timetable 2015 /16**
The planning timetable is indicative and subject to change once Monitor Guidance is received in early December.

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Board Development Sessions</strong></td>
<td>4 December 2014</td>
</tr>
<tr>
<td></td>
<td>11 February 2015</td>
</tr>
<tr>
<td></td>
<td>11 March 2015</td>
</tr>
<tr>
<td><strong>Leadership Planning Events</strong></td>
<td>10 December 2014</td>
</tr>
<tr>
<td></td>
<td>2 February 2015</td>
</tr>
<tr>
<td><strong>Trust wide / Stakeholder Events</strong></td>
<td>30 January / 5 February 2015</td>
</tr>
<tr>
<td><strong>First meeting of the Council of Governors Planning Group</strong></td>
<td>4 March 2015</td>
</tr>
<tr>
<td><strong>Draft Operational Plan to (Board Part 2)</strong></td>
<td>25 March 2015</td>
</tr>
<tr>
<td><strong>Submission of Planning Documents to Monitor</strong></td>
<td>10 April 2015</td>
</tr>
</tbody>
</table>
1.0 PURPOSE OF REPORT

1.1 This report:

- advises the Council of Governors in terms of its responsibilities in relation to the production of the Quality Report / Account 2014/15; and
- seeks a decision from the Council of Governors in terms of which local quality indicator it wishes to be externally audited for the Quality Report / Account 2014/15.

2.0 EXECUTIVE SUMMARY

2.1 Background

2.1.1 All providers of healthcare services in England under the auspices of the NHS are required (by the NHS Act 2009 and subsequent NHS Regulations issued in 2010, 2011 and 2012) to produce a Quality Account and publish it by the end of June each year.

2.1.2 Monitor also requires NHSFTs to include a Quality Report in the Trust’s Annual Report (by the end of May each year) – this comprises the content of the Quality Account plus some additional information. It is necessary to obtain external independent assurance on the content of this report.

2.1.3 These requirements are designed to improve public accountability for the quality of care that is provided by all providers of NHS services.

2.1.4 The requirements set out by Monitor and the Department of Health identify important responsibilities for the Council of Governors in relation to the development of our final Quality Account/Report. The final guidance in terms of Quality Accounts/Reports for 2014/15 was published on 13th February as follows:

- Detailed Requirements for Quality Reports 2014/15 (Monitor)
- Detailed Guidance for External Assurance on Quality Reports 2014/15 (Monitor)

2.1.5 The arrangements outlined in the above two documents remain largely unchanged from last year.

2.2 Responsibilities of the Council of Governors in the production of the Quality Account / Report

2.2.1 The requirements for the Council of Governors for 2014/15 are to:

a) select a local quality indicator to be subject to substantive sample testing by External Audit (this includes, but is not necessarily limited to, an evaluation of the key processes and controls for managing and reporting the indicator and sample testing of the data used to calculate the indicator).

b) provide a statement (maximum 1000 words) to be included in the published Quality Account and considered by External Audit as part of the external assurance of the content of the Quality Report.
c) receive a report from External Audit on the outcome of their testing and their review of the content of the Quality Account / Report.

2.2.2 Selection of indicators to be subject to external audit – mandated national indicators:

In accordance with Monitor’s “Detailed Guidance for External Assurance on Quality Reports 2014/15”, the Trust has selected the following two mandated national indicators from the choice of three in the guidance to be subject to external audit:

a) 100% of enhanced Care Programme Approach patients receiving follow up contact within 7 days of discharge from hospital; and
b) admissions to inpatient services had access to crisis resolution home treatment teams.

2.2.3 Selection of indicators to be subject to external audit – local indicators:

The local indicators which will be included in our Quality Account 2014/15 from which the Council of Governors can make their selection are:

**Patient Safety**
- Hospital Acquired Infections
- Safety Thermometer (measurement of harm free care)
- Number of serious incidents

**Clinical Effectiveness**
- Smoking cessation in community health services
- Rates of Breastfeeding (prevalence and coverage) in local populations
- Psychiatric readmissions to hospital within 28 days

**Patient Experience**
- Number of complaints received / number of complaints referred to PHSO / % complaints responded to within agreed timescales
- Number of compliments received
- Friends and Family Test
- 18 week referral to treatment target achievement (community health services)

Last year the Council of Governors selected the “Psychiatric readmissions to hospital within 28 days” indicator for external audit testing.

_The Council of Governors are asked to select one of the above indicators as the local indicator to be subject to external audit testing. This will be done on a majority vote method as in previous years. Governors are asked to complete the proforma attached at Appendix 1 and give it to or send it to Cathy Lilley by 7 March 2015._

2.2.4 Preparation of statement from Council of Governors to be included in published Quality Account:

It is understood that it is intended to follow the approach taken last year to develop the statement on the Quality Account / Report from the Council of Governors. John Jones will lead this process, seeking comment from all Governors and drafting a statement for approval by at the Council of Governors meeting in May 2015.

The intention is to circulate the draft Quality Report by the end of April and John Jones will then draft the Governor statement for circulation in the first week of May. It is recognised that there is a tight turnaround time beyond the Trust’s control, and it would therefore be appreciated that any comments on the draft statement are sent by 11th May so that the final draft statement can be considered and approved by the Council of Governors on 20th May 2015.

2.2.5 Receiving a report from External Audit on the outcome of their review:
It is anticipated that the report from External Audit, which will follow the nationally prescribed format, will be presented to the Council of Governors at its meeting on 20 May 2015.

**ASSURANCE**

Issues that the Council of Governors need to be assured of in considering this report:

**CQC Registration Standards, Service Development Strategy**

Quality Reports / Accounts provide an opportunity for the Trust to demonstrate past quality improvements and aspirational quality improvements identified in the trust’s annual plans and service development strategy.

**Involvement of Service Users / Healthwatch**

Service users contribute to the selection of quality account priorities through local planning events and Healthwatch are required to receive a copy of the draft Quality Report / Account and may choose to provide a statement for inclusion in the final published version.

**Communication and Consultation with Stakeholders**

Stakeholders have participated in the Trust’s planning process for 2015/16; their quality priorities will be identified and included in the Quality Report / Account. The draft Quality Report / Account will be circulated to Clinical Commissioning Groups, Healthwatch organisations, Health Overview and Scrutiny Committees and Governors in order for them to provide a statement of not more than 1,000 words for inclusion in the final Report / Account. It will also be circulated to Health and Wellbeing Boards. The final Quality Report / Account will be published in line with Department of Health / Monitor requirements.

**Service Impact / Health Improvement Gains**

The Quality Report / Account process is designed to improve the quality of NHS services and the NHS’ accountability to local people.

**Financial Implications**

None identified in this report. Any implications have been taken into account in the Trust’s financial plan.

**Governance Implications**

Developing and publishing a Quality Account by 30th June 2015 is a legal requirement. Including a Quality Report in the Trusts’ Annual Report (submission deadline 29th May) in line with Monitor guidance (including external auditing requirements) is a Monitor requirement.

**Patient Safety/Quality**

The Quality Report / Account will set out past performance in respect of patient safety and quality and identify clear priorities for 2015/16.

**ACTION REQUIRED**

The Council of Governors is required to:

1. Note the requirements of the Council of Governors in respect of the production of the Quality Account / Report 2014/15, including the process to be followed to produce the statement from the Council of Governors for inclusion in the published Quality Account / Report 2014/15.

2. Identify which one of the local quality indicators listed in section 2.2.3 of the Executive Summary above they wish to be subject to external audit testing. The External Auditors will then produce a report of their findings which will be presented to the Council of Governors prior to final approval of the draft Quality Account / Report 2014/15.
Report prepared by:

Faye Swanson
Director of Compliance and Assurance

On behalf of:

Andy Brogan
Executive Director of Quality and Clinical Governance
## SELECTION OF LOCAL INDICATOR FOR EXTERNAL ASSURANCE

### Name:

### Date:

<table>
<thead>
<tr>
<th>Number</th>
<th>Indicator</th>
<th>Tick 1 Only For Testing</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td><strong>Patient Safety</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hospital Acquired Infections</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td><strong>Patient Safety</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Safety Thermometer (measurement of harm free care)</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td><strong>Patient Safety</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of serious incidents</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Clinical Effectiveness</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Smoking cessation in community health services</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td><strong>Clinical Effectiveness</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Rates of Breastfeeding (prevalence and coverage) in local populations</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td><strong>Clinical Effectiveness</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Psychiatric readmissions to hospital within 28 days</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td><strong>Patient Experience</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of complaints received / number of complaints referred to PHSO / % complaints responded to within agreed timescales</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td><strong>Patient Experience</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Number of compliments received</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td><strong>Patient Experience</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Friends and Family Test</td>
<td></td>
</tr>
<tr>
<td>10</td>
<td><strong>Patient Experience</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>18 week referral to treatment target achievement (community health services)</td>
<td></td>
</tr>
</tbody>
</table>

Please return your completed form **by close of business on 7 March 2014** to:

Email: cathy.lilley@sept.nhs.uk  
Phone: 01268 739679  
Post:  
Trust Secretary Office  
SEPT  
FREEPOST RRKK-KSYT-UHLB  
The Lodge, Runwell Chase, Wickford, Essex, SS11 7XX
CONSTITUENCY FRAMEWORK REVIEW
TASK AND FINISH GROUP

1. PURPOSE OF REPORT

This report outlines and recommends changes to the Council of Governors (CoG).

2. BACKGROUND

As reported at the CoG meetings on 22 May and 12 August 2014, the Chair of the Trust requested that a working group be established to review the Trust’s constituency structure and the composition of the CoG. The Constituency Task and Finish Group was comprised of Governors, led by the Chair and supported by the Associate Director of Legal Services & Trust Secretary and the Executive Director of Corporate Services.

The review has taken account of the expected changes to the Trust’s service provision in the light of the expected transfer of mental health services in Bedfordshire and Luton to other service providers in April 2015 and would also help to meet Monitor’s Code of Governance provision (A.5.2) which aims to ensure that “the Council should not be so large as to be unwieldy. The Council should be of sufficient size for the requirements of its duties”.

Further to the actions agreed at the Group’s meeting on 12 November 2014, the Associate Director of Legal Services/Trust Secretary and the Executive Director of Corporate Governance were asked to prepare and present a range options to the Task and Finish Group in respect of how to change the constituency structure and reduce the size of the CoG.

The options were presented to the Task and Finish group on 29 February 2015. The Group undertook a detailed review of the constituencies and the options available and the recommendations for changes to each constituency are detailed in section 3 below.

3. OPTIONS FOR ADJUSTING THE COMPOSITION OF THE COG

Under the current constitution the CoG is comprised of 48 Governors with 31 Public Governors, 6 staff Governors, 6 appointed (Local Authority) Governors and 5 partnership Governors. Appendix 1 provides information on the current CoG including membership numbers, vacancies and Terms of Office.

3.1 Public Governors

There are currently nine public constituencies within the Constitution:
Table 1: Existing Public Constituencies

<table>
<thead>
<tr>
<th></th>
<th>Public Constituency</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Bedford</td>
</tr>
<tr>
<td>2</td>
<td>Suffolk</td>
</tr>
<tr>
<td>3</td>
<td>Southend</td>
</tr>
<tr>
<td>4</td>
<td>Central Bedfordshire</td>
</tr>
<tr>
<td>5</td>
<td>Rest of Essex (North)</td>
</tr>
<tr>
<td>6</td>
<td>Thurrock</td>
</tr>
<tr>
<td>7</td>
<td>Luton</td>
</tr>
<tr>
<td>8</td>
<td>South Essex (Basildon, Brentwood, Castlepoint, Rochford, Rayleigh)</td>
</tr>
<tr>
<td>9</td>
<td>West Essex</td>
</tr>
</tbody>
</table>

In consideration of the service disaggregation in Bedfordshire (including Central Bedfordshire) and Luton which will result in a significant reduction of the turnover in those catchment areas, the Task and Finish Group reviewed a number of options for Public Governor Constituencies:

- To reduce the number of Governors in the Bedfordshire and Luton Constituencies from a total of 9 to 3.
- To amalgamate a number of constituencies including Bedfordshire and Luton with a reduction in the number of constituencies to 3.
- To reduce the number of Governors in West Essex from 5 to 3.
- To create a ‘Rest of England’ Constituency. The Rest of England constituency would cover the current constituencies of Suffolk and Bedfordshire and Luton and include any other localities that may be covered by SEPT over time. This would also enable the Trust to have the greatest flexibility and reflected the current market testing environment.
- To create an Essex constituency that reflected closer working with North Essex Partnership NHS Foundation Trust. This constituency would include the current Rest of Essex and West Essex.

The Task and Finish Group considered each of the options at length. The group felt that the creation of a Rest of England constituency with effect from 1 April 2015 and potential changes in contract arrangements going forward enabled flexibility for the Trust to add contracts that may be won through future competitive processes. The Task and Finish Group also felt that each constituency should have a minimum of two members to ensure representation at CoG meetings.

In summary, the Task and Finish Group recommend the following Public Constituencies:

Table 2: Creation of a Rest of England and an Essex Constituency

<table>
<thead>
<tr>
<th>Proposed Public Constituencies</th>
<th>No of Governors</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Essex (Basildon, Brentwood, Castlepoint, Rochford, Rayleigh)</td>
<td>7</td>
</tr>
<tr>
<td>Southend</td>
<td>3</td>
</tr>
<tr>
<td>Thurrock</td>
<td>2</td>
</tr>
<tr>
<td>Essex</td>
<td>5</td>
</tr>
<tr>
<td>Rest of England</td>
<td>7</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>24</strong></td>
</tr>
</tbody>
</table>
The comparison to the existing public constituencies is shown in Table 3 below:

Table 3: Comparison between the Current and Proposed number of Public Constituencies

<table>
<thead>
<tr>
<th>Proposed Constituencies</th>
<th>Current Constituency</th>
<th>Current Number of Governors</th>
<th>Proposed Number of Governors</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Essex</td>
<td>South Essex</td>
<td>7</td>
<td>7</td>
<td>No change</td>
</tr>
<tr>
<td>Southend</td>
<td>Southend</td>
<td>3</td>
<td>3</td>
<td>No change</td>
</tr>
<tr>
<td>Thurrock</td>
<td>Thurrock</td>
<td>2</td>
<td>2</td>
<td>No change</td>
</tr>
<tr>
<td>Rest of England</td>
<td>Bedford</td>
<td>3</td>
<td>7</td>
<td>-6</td>
</tr>
<tr>
<td></td>
<td>Central Bedfordshire</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Luton</td>
<td>4</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Suffolk</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Essex (includes West &amp; North Essex)</td>
<td>West Essex</td>
<td>5</td>
<td>5</td>
<td>-1</td>
</tr>
<tr>
<td></td>
<td>Rest of Essex</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
<td>31</td>
<td>24</td>
<td>-7</td>
</tr>
</tbody>
</table>

3.2 Staff Governors
There is a requirement for at least three members of CoG to be elected to form the staff constituency or, where there are classes within it, at least one member of the CoG must be elected by each class and at least three members must be elected altogether.

Within our current constitution there are six staff classes and six Governors. The Task and Finish Group identified current vacancies and the small membership populations for some of the current 6 classes. Following discussion the Task and Finish Group agreed to recommend the reduction in the number of classes from six to two; Clinical and non-clinical. Table 3 below shows the changes to the staff constituencies.

Table 4: Reduction in Staff Governors

<table>
<thead>
<tr>
<th>Staff Class</th>
<th>Current Staff Governors</th>
<th>Proposed Staff Governors</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical</td>
<td>5</td>
<td>2</td>
<td>-3</td>
</tr>
<tr>
<td>Non clinical</td>
<td>1</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Total</td>
<td>6</td>
<td>4</td>
<td>-2</td>
</tr>
</tbody>
</table>

3.3 Appointed Governors
Currently there are 6 Governors appointed by six Local Authorities:

The NHS Act 2006 requires a Foundation Trust to have at least 1 member of the CoG to be appointed by a Local Authority. Provided that this statutory requirement is satisfied we can alter the number of Local Authority appointed Governors.

The Group reviewed a range of options for Local Authority input especially in Bedfordshire and Luton. Although there could be an option for the 3 Local Authorities in Bedfordshire and Luton to agree to share one representative, the Group agreed to
recommend that potentially up to two places could be made available (one for Bedfordshire and one for Central Bedfordshire) to reflect the continued provision of community services. However, the group felt that further consultation with the three Local Authorities would be required before a final decision.

The Group agreed that there would be no change to the following Local Authority representation:

- Essex County Council 1 no change
- Southend Borough Council 1 no change
- Thurrock Council 1 no change

**Table 5: Impact of the option to reduce Bedford and Luton local Authority representation from three to two places**

<table>
<thead>
<tr>
<th>Local Authority</th>
<th>Current Governors</th>
<th>Future Governors</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Essex County Council</td>
<td>1</td>
<td>1</td>
<td>No change</td>
</tr>
<tr>
<td>Southend Borough Council</td>
<td>1</td>
<td>1</td>
<td>No change</td>
</tr>
<tr>
<td>Thurrock Borough Council</td>
<td>1</td>
<td>1</td>
<td>No change</td>
</tr>
<tr>
<td>Bedfordshire Borough Council*</td>
<td>1</td>
<td>1</td>
<td>No change</td>
</tr>
<tr>
<td>Central Bedfordshire Council*</td>
<td>1</td>
<td>1</td>
<td>No change</td>
</tr>
<tr>
<td>Luton Borough Council*</td>
<td>1</td>
<td>0</td>
<td>-1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6</strong></td>
<td><strong>5</strong></td>
<td><strong>-1</strong></td>
</tr>
</tbody>
</table>

*Subject to consultation with Bedfordshire, Central Bedfordshire and Luton Local Authorities.

### 3.4 Partnership Governors

Any partnership organisation specified in the Constitution may appoint one or more members of the CoG.

In respect of the universities the Trust works in partnership with, there currently are two Governors appointed by three Universities (one for University of Bedford and one jointly for Anglia Ruskin and Essex Universities).

The Task and Finish group reviewed current activity levels for completed courses for the last year as follows:

- Anglia Ruskin University – 567
- Essex University – 134
- University of Bedford – less than 90

Following discussion the Task and Finish Group agreed to propose that the number be reduced as follows:
### Proposed Constituencies

<table>
<thead>
<tr>
<th>Proposed Constituencies</th>
<th>Current Constituency</th>
<th>Current Number</th>
<th>Proposed Number</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anglia Ruskin &amp; Essex Universities</td>
<td>Essex</td>
<td>1</td>
<td>1</td>
<td>No change</td>
</tr>
<tr>
<td>University of Bedfordshire</td>
<td>Bedfordshire</td>
<td>1</td>
<td>0</td>
<td>-1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>2</strong></td>
<td><strong>1</strong></td>
<td><strong>-1</strong></td>
<td></td>
</tr>
</tbody>
</table>

In addition to University Partnership Governors, the Trust has enabled direct representation from service user and carer groups on the CoG. The Task and Finish group considered and discussed the option available and have recommended that service users and carer groups should be aligned in the same way as the Public Governor constituencies.

The impact of these recommended changes are detailed below:

<table>
<thead>
<tr>
<th>Proposed Constituencies</th>
<th>Current Constituency</th>
<th>Current Service Users &amp; Carers</th>
<th>Proposed Service Users &amp; Carers</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rest of England</td>
<td>Bedfordshire &amp; Luton</td>
<td>1</td>
<td>1</td>
<td>No change</td>
</tr>
<tr>
<td>Essex</td>
<td>West Essex</td>
<td>2</td>
<td>1</td>
<td>-1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3</strong></td>
<td><strong>2</strong></td>
<td><strong>-1</strong></td>
<td></td>
</tr>
</tbody>
</table>

### 4. Summary of the Proposed Changes

On the basis of that one of the Public Governor options is selected and the other options are also agreed, the impact on the total numbers of Governors is as follows:

<table>
<thead>
<tr>
<th>Constituency</th>
<th>Current Numbers</th>
<th>Future Numbers</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public Constituencies</td>
<td>31</td>
<td>24</td>
<td>-7</td>
</tr>
<tr>
<td>Staff Groups</td>
<td>6</td>
<td>4</td>
<td>-2</td>
</tr>
<tr>
<td>Appointed Governors*</td>
<td>6</td>
<td>5</td>
<td>-1</td>
</tr>
<tr>
<td>Partnership Governors</td>
<td>5</td>
<td>3</td>
<td>-2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>48</strong></td>
<td><strong>36</strong></td>
<td><strong>-12</strong></td>
</tr>
</tbody>
</table>

*Subject to consultation with Bedfordshire, Central Bedfordshire and Luton Local Authorities.

### 5. IMPLEMENTATION

The reconfiguration of the Trust’s constituencies will need to be implemented through a variation of the Trust’s Constitution. This can take place during 2015 when the Constitution has undergone its annual review and been approved by the Board.
As a number of Governors’ terms of office come to an end in September 2015, the recommendation is to implement this change in readiness for commencement in October 2015. However, one or two Governor positions are not due to come to an end during the next few months, and the Trust would therefore need to agree with these Governors the arrangements for the termination of their office.

Subject to agreement by Council of Governors and the Board of Directors, the new constituencies will be effective from October 2015.

6. ACTION REQUIRED

This Council of Governors is asked to:

1) Consider and approve a reduction in the number of Governors and changes to the constituencies on the basis outlined in this report
2) Consider and agree the timetable for implementation as 1 October 2015.

Report by

Nigel Leonard
Executive Director Corporate Governance
26 February 2015
<table>
<thead>
<tr>
<th>PUBLIC CONSTITUENCIES</th>
<th>Membership Number @ 13.10.14</th>
<th>Governors Number</th>
<th>In place</th>
<th>Vacancies</th>
<th>Term of Office 1st Term</th>
<th>End</th>
<th>Term of Office 2nd Term</th>
<th>End</th>
<th>Term of Office 3rd Term</th>
<th>End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bedford</td>
<td>1338</td>
<td>3</td>
<td>3</td>
<td>0</td>
<td>1</td>
<td>Sep-15</td>
<td>2</td>
<td>Sep-15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Central Bedfordshire</td>
<td>1687</td>
<td>5</td>
<td>5</td>
<td>0</td>
<td>4</td>
<td>Sep-15</td>
<td>1</td>
<td>Sep-15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Luton</td>
<td>1925</td>
<td>4</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>Sep-15</td>
<td>2</td>
<td>Sep-15</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Suffolk</td>
<td>12</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>May-17</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rest of Essex (North)</td>
<td>417</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td>Sep-15</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>South Essex (Basildon, Brentwood, CPR)</td>
<td>4400</td>
<td>7</td>
<td>6</td>
<td>1</td>
<td>4</td>
<td>Sep-15</td>
<td></td>
<td>2</td>
<td>Sep-15</td>
<td></td>
</tr>
<tr>
<td>Southend</td>
<td>2033</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>Sep-15</td>
<td></td>
<td>1</td>
<td>Sep-17</td>
<td></td>
</tr>
<tr>
<td>Thurrock</td>
<td>1379</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>Sep-15</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Essex</td>
<td>1250</td>
<td>5</td>
<td>4</td>
<td>1</td>
<td>1</td>
<td>Sep-17</td>
<td>3</td>
<td>Sep-17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sub-total</td>
<td>14441</td>
<td>31</td>
<td>26</td>
<td>5</td>
<td>13</td>
<td>Sep-17</td>
<td>3</td>
<td>Sep-17</td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STAFF GROUPS</th>
<th>Membership Number</th>
<th>Governors Number</th>
<th>In place</th>
<th>Vacancies</th>
<th>Term of Office</th>
<th>End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Medical Practitioner/Dentist</td>
<td>204</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registered Nurse (MHS)</td>
<td>481</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Registered Nurse (CHS/Midwives)</td>
<td>1425</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Care</td>
<td>156</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1 Nov-15</td>
<td></td>
</tr>
<tr>
<td>Other Clinical Specialities</td>
<td>1368</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1 Sep-15</td>
<td></td>
</tr>
<tr>
<td>Support Services</td>
<td>2446</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1 Sep-15</td>
<td></td>
</tr>
<tr>
<td>Sub-total</td>
<td>6082</td>
<td>6</td>
<td>4</td>
<td>2</td>
<td>2</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>APPOINTED GOVERNORS</th>
<th>Membership Number</th>
<th>Governors Number</th>
<th>In place</th>
<th>Vacancies</th>
<th>Term of Office</th>
<th>End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bedford Borough Council</td>
<td>1</td>
<td>0</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Central Bedfordshire Council</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Essex County Council</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td>1 Jun-16</td>
<td>May-16</td>
</tr>
<tr>
<td>Luton Borough Council</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Southend Borough Council</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td>1 Jun-15</td>
<td>May-16</td>
</tr>
<tr>
<td>Thurrock Council</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>6</td>
<td>5</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PARTNERSHIP GOVERNORS</th>
<th>Membership Number</th>
<th>Governors Number</th>
<th>In place</th>
<th>Vacancies</th>
<th>Term of Office</th>
<th>End</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anglia Ruskin &amp; Essex Universities</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td>1 Nov-14</td>
<td></td>
</tr>
<tr>
<td>University of Bedfordshire</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td>1 Apr-16</td>
<td></td>
</tr>
<tr>
<td>Beds &amp; Luton Service Users &amp; Carers</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td>1 Sep-14</td>
<td></td>
</tr>
<tr>
<td>Essex Service Users &amp; Carers</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>1 Sep-14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Essex Service Users &amp; Carers</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td></td>
<td>1 Jun-16</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>5</td>
<td>5</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>TOTALS</th>
<th>Membership Number</th>
<th>Governors Number</th>
<th>In place</th>
<th>Vacancies</th>
<th>Term of Office</th>
<th>End</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>20523</td>
<td>48</td>
<td>40</td>
<td>8</td>
<td>20</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>17</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>3</td>
<td></td>
</tr>
</tbody>
</table>
PROGRESS REPORT FROM
TRAINING & DEVELOPMENT TASK & FINISH GROUP

1 PURPOSE OF REPORT

This report provides an update on the training and development of Governors.

2 SUMMARY

Under the Health & Social Care Act 2012, the Trust has a duty to take steps to ensure that Governors are equipped with the skills and knowledge they require for their role.

Since the last Council of Governors meeting, the Group has continued to focus on developing the Governor Learning and Development Pathway as approved by the Council at its meeting on 12 February 2014 and an overview of the proposed modules is attached at appendix 1. It is recognised, however, that additional training and/or module development may need to be undertaken to support Governors in meeting their roles and responsibilities.

A revised comprehensive Governor induction programme was held in January 2015 with four new Governors attending. The induction was led by Lorraine Cabel as Chair of the Trust and was supported by Janet Wood, Vice Chair and Non-Executive Director, and Governors including Brian Arney, Evelyn Hoggart, John Jones, Tracy Reed and Deborah-Ridley Joyce, as well as Cathy Lilley. This core module provided an introduction to new Governors to the health system, the FT framework, and governance and the role of the Governor.

During 2015 modules covering the Governors’ work plan, accountability and governance, understanding Trust performance and NHS finance, as well as effective questioning and challenge will be delivered. These will be aimed at both Governors in their first year of their first term of office and also for those Governors who would like a refresher.

Currently, training and development of Governors is managed by the Training & Development Task & Finish Group which reports into the Council of Governors Governance Committee. Due to the importance and significant responsibility of training and developing Governors, as well as recognising that this is an on-going and evolving activity, it is recommended that the Task & Finish Group is stood down and a Training & Development Committee be established as a sub-committee of the Council of Governors. Terms of reference will be developed and considered in the first instance by the Governance Committee prior to presentation to the Council of Governors at its meeting in May 2015 for approval.
3 ACTION REQUIRED

The Council of Governors is requested to:
1 Note the contents of this report
2 Approve the recommendation to establish a Council of Governors Training & Development Committee
3 Agree that the terms of reference of the Training & Development Committee be drafted for review by the Governance Committee prior to presentation to the Council of Governors in May 2015.

Report prepared by

Cathy Lilley
Business Administration Manager (Chair’s Office)
4 March 2015
# Governor Learning & Development Pathway

## Pathway Modules

<table>
<thead>
<tr>
<th>Module</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td>So you want to be a Governor</td>
</tr>
<tr>
<td>1.1</td>
<td>Prospective Governor workshop</td>
</tr>
<tr>
<td><strong>2</strong></td>
<td>Induction</td>
</tr>
<tr>
<td>2.1</td>
<td>Core module: introduction</td>
</tr>
<tr>
<td><strong>Purpose</strong></td>
<td>(i.e. how can I do my job, where do I fit, what next):</td>
</tr>
<tr>
<td>- Understand health system</td>
<td></td>
</tr>
<tr>
<td>- Understand FT framework</td>
<td></td>
</tr>
<tr>
<td>- Understand Governors’ statutory and non-statutory duties</td>
<td></td>
</tr>
<tr>
<td>- Understand concepts and methods of accountability</td>
<td></td>
</tr>
<tr>
<td><strong>Attendees</strong>: Newly appointed/elected Governors</td>
<td></td>
</tr>
<tr>
<td><strong>Presenters</strong>:</td>
<td></td>
</tr>
<tr>
<td>- Chair</td>
<td></td>
</tr>
<tr>
<td>- Vice Chair</td>
<td></td>
</tr>
<tr>
<td>- Senior Independent Director</td>
<td></td>
</tr>
<tr>
<td>- Experienced Governors</td>
<td></td>
</tr>
<tr>
<td><strong>Timing</strong>: ideally within first three months of appointment/election</td>
<td></td>
</tr>
<tr>
<td><strong>Overview</strong>:</td>
<td></td>
</tr>
<tr>
<td>- Introduction to NHS</td>
<td></td>
</tr>
<tr>
<td>- About FTs including SEPT</td>
<td></td>
</tr>
<tr>
<td>- Governance and role of Governor</td>
<td></td>
</tr>
<tr>
<td>‣ Board of Directors</td>
<td></td>
</tr>
<tr>
<td>‣ Difference between Directors and Governors</td>
<td></td>
</tr>
<tr>
<td>‣ Governor statutory responsibilities</td>
<td></td>
</tr>
<tr>
<td>‣ Accountability overview</td>
<td></td>
</tr>
<tr>
<td>‣ Relationships</td>
<td></td>
</tr>
<tr>
<td>‣ Governor contribution</td>
<td></td>
</tr>
<tr>
<td><strong>2.2</strong></td>
<td>Governance (about statutory role)</td>
</tr>
<tr>
<td><strong>Purpose</strong>: to provide a greater depth of understanding of key governance requirements and issues. It builds on the Trust’s core induction programme to help Governors learn in more detail and discuss issues from a position of insight and initial experience in the role</td>
<td></td>
</tr>
<tr>
<td><strong>Attendees</strong>: Governors in the first year of their first term of office and for those Governors who would like a refresher</td>
<td></td>
</tr>
<tr>
<td><strong>Presenters</strong>:</td>
<td></td>
</tr>
<tr>
<td>- NED</td>
<td></td>
</tr>
<tr>
<td>- Executive Director Corporate Governance</td>
<td></td>
</tr>
<tr>
<td>- Trust Secretary</td>
<td></td>
</tr>
<tr>
<td>- Lead Governor</td>
<td></td>
</tr>
<tr>
<td><strong>Timing</strong>: ideally within first six months of appointment/election</td>
<td></td>
</tr>
<tr>
<td><strong>Programme</strong>:</td>
<td></td>
</tr>
<tr>
<td>- Provider licence and compliance framework</td>
<td></td>
</tr>
<tr>
<td>- Constitution</td>
<td></td>
</tr>
<tr>
<td>- Code of Governance</td>
<td></td>
</tr>
</tbody>
</table>
### Governor Learning & Development Pathway

#### Pathway Modules

- **Statutory duties of Governors**
  - Sub-committees (role/purpose)
  - Involvement with planning
  - NED accountability
  - Member/public accountability
- **Statutory responsibilities of the Council of Governors (in next three years)**
  - Appointment of auditor (understand the role/purpose of the auditor – sufficient info to appoint the auditor), NEDs, etc
- **Meeting procedure of the Council of Governors (SOs)**
- **Evaluation and development of the Council of Governors**
- **Council of Governor meetings**
  - Public meetings/closed meetings
  - Format, style – how and what information will be supplied
  - Understanding the formality of the meetings, structure
  - Typical agenda (content/timings)
  - Type of information provided (what Governors need to know to carry out duties/support understanding)
  - Code of conduct in meetings
  - Governors’ attendance requirements
  - Chair, Vice Chair, SID, Lead Governor roles

### 2.3 Understanding Trust performance/NHS finance and business skills

**Purpose:** To help Governors learn more about the detail of the Trust’s finances and business operations:

- Better understanding of financial flows in NHS and financial context in which FTs operate
- Improve appreciation of I&E, CIPs, CQUINs, QIPP and possible strategies to support organisation health
- Understanding of NHS as a business and role of competition
- Understanding of Governor role in mergers/acquisitions/significant transactions, etc

**Attendees:** Governors in the first year of their first term of office and for those Governors who would like a refresher

**Presenters:**

- Executive Chief Finance Officer
- NED (Audit Committee Chair)
- Executive Director Corporate Governance/Director Compliance & Assurance
- Lead Governor

**Timing:** ideally within first six months of appointment/election

**Programme:**

- Trust services overview
  - Understanding the services offered by the Trust
  - Financials:
    - Budget
    - How does it work (i.e. commissioning of services)
    - Payment by results
    - Current performance
    - Monitor’s financial ratings overview
    - Information Governors receive
    - The future
  - Performance:
    - Planning and performance (annual plan/one-five year strategies)
    - Monitoring performance (targets, contracts, corporate priorities)
    - Performance report (what does this mean, how will Governors be able to make
Pathway Modules

assessments/judgements from this information)
- What does this mean re the quality of the Trust’s services?
- CQC and inspections
- Risk management
- Health services overview
  - Health & Social Care Act 2012
  - Government targets and policies
  - Local health economy and the Trust

2.4 Accountability
Purpose: to help Governors build a dynamic and effective accountability relationship with the Board:
- An understanding of what accountability is
- Understand the need for good ground rules in promoting good relationships
- An understanding of a risk-based approach to assessing information needs and be able to use this approach to assess whether they have enough information
- Understand main elements of a performance report
- Confident in making appropriate challenge
Attendees: Governors in the first year of their first term of office and for those Governors who would like a refresher
Presenters:
- NED
- Executive Director Corporate Governance/Director Compliance & Assurance
- Experienced Governors
Timing: ideally within first six months of appointment/election

2.5 Effective questioning and challenge
Purpose: to help Governors work confidently and effectively in posing effective questions to hold NEDs to account for the performance of the Board:
- Practised communication skills to be more effective and confident in the Governor role
- Received practical hints and tips to help communication
- Opportunity to self-reflect on their style of listening and questioning, considering how they may wish to change approach
Attendees: Governors in the first year of their first term of office and for those Governors who would like a refresher
Presenters:
- NED
- Experienced Governors
Timing: ideally within first six months of appointment/election

2.6 Governor role in NED appointments
Purpose: to help Governors understand the process and procedures for the appointment of NEDs/Chair:
- Familiarity with the overall recruitment process
- Awareness of good practice in relation to recruitment
- Understanding the approach to interview questioning
Attendees: Governors serving on the Council’s Nominations Committee and/or sitting on selection panels
Presenters:
<table>
<thead>
<tr>
<th>Pathway Modules</th>
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<tbody>
<tr>
<td>• NED</td>
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<tr>
<td>• HR</td>
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<tr>
<td><strong>Timing:</strong> (ad hoc) at the beginning of a NED/Chair recruitment process</td>
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</tbody>
</table>

### 2.7 Member engagement

**Purpose:** to help Governors in understanding and developing member/public engagement

**Attendees:** Governors in the first year of their first term of office and for those Governors who would like a refresher

**Presenters:**
- NED
- Patient Experience
- Communications

**Timing:** ideally within first year of appointment/election

**Programme:**
- Membership strategy and action plan
- Communications
  - Use of social media
  - Website
  - SEPT News and SEPT Bitesize
- Events

### 2.8 Governor work plan

**Purpose:** to help Governors to understand how to fulfil their statutory responsibilities using a framework of options

**Attendees:** All Governors

**Presenters:**
- Lead Governor
- Business Administration Manager

**Timing:** ideally within first year of appointment/election

**Programme:**
- Interactive session
- Recap on Council of Governors' statutory responsibilities
- Review ways to meet responsibilities
- Managing and completing work plan
- Completing Governor update for website
CHANGES TO THE COUNCIL OF GOVERNORS AND ITS COMMITTEES

1 PURPOSE OF REPORT

This report provides an update on the changes to the membership of the Council of Governors and its Committees since the last meeting held on 12 November 2014.

2 SUMMARY

2.1 Council of Governors Composition

An updated composition of Governors is at Appendix 1 which includes the current Governor vacancies.

The following Governors stood down since the last meeting:
- Anne Devlin (Partnership Governor: Anglian Ruskin & Essex Universities)
- Syed Jafari (Service User & Carer Governor: Beds & Luton)
- Deborah Ridley-Joyce (Public Governor: Central Beds)
- Nic Taylor-Barbieri (Staff Governor: Support Staff)

2.2 Council of Governors Committees

The Council of Governors’ Committees are an integral part of the corporate governance arrangements as included in the Trust’s constitution and Council of Governors standing orders.

The Council is reminded that appointments to Committees are made by the Chair of the Trust in consultation with the Assistant Trust Secretary. All appointments are ratified by the Council.

There have been no new Committee appointments since 12 August 2014; the current Council of Governors Committees and Groups membership is at Appendix 2.

3 ACTION REQUIRED

The Council of Governors is asked to note the contents of this report.

Report prepared by:

Cathy Lilley
Business Administration Manager (Chair’s Office)
4 March 2015
### SEPT
#### Council of Governors: as at 26 February 2015

## Public Governors

### Bedford:
- Paula Grayson (Sep 15)
- John Jones (Sep 15)*
- Dr Clive Travis (Sep 15)*

### Central Bedfordshire:
- Susan Butterworth (Sep 15)*
- Lynda Lees (Sep 15)
- Larry Smith (Sep 15)
- Jim Thakoordin (Sep 15)
- Vacancy

### Luton:
- Michael Dolling (Sep 15)*
- Jackie Gleeson (Sep 15)*
- Zoe Loke (Sep 15)
- Vacancy

### Rest of Essex:
- Robert Calver (Sep 15)*

### South Essex:
- Roy Birch (Sep 17)**
- Eileen Greenwood (Sep 15)**
- Evelyn Hoggart (Sep 15)
- Sue Revell (Sep 15)
- David Watts (Sep 17)
- Tony Wright (Sep 17)
- Vacancy

### Southend:
- Shurleea Harding (Sep 17)**
- Clive Lucas (Sep 15)*
- Vacancy

## Staff Governors

- Tracy Reed – Nurses and Midwives Community Health Services (Sep 15)*
- Vacancy – Medical Practitioner
- Vacancy – Nurses (Mental Health Services)
- Paul Delaney – Social Worker (Nov 15)
- Vacancy – Support Staff
- Karen Forrest – Other Clinical Specialties (Sep 15)*

## Local Authority Governors

- Vacancy – Bedford Borough Council
- Cllr David Bowater – Central Bedfordshire (May 16)*
- Cllr Bill Archibald – Essex County Council (June 16)
- Cllr Mahmood Hussain – Luton Borough Council (May 16)*
- Cllr Velmurugan – Southend Borough Council (June 15)
- Cllr Barbara Rice – Thurrock Council (May 2015)*

## Partnership Governors

- Vacancy – Anglia Ruskin & Essex Universities
- Professor Michael Shoot – University of Bedfordshire (April 16)*
- Vacancy – Beds & Luton Service Users & Carers
- Mandy Tanner – Essex Service Users & Carers***
- Joy Das – West Essex Service Users and Carers (June 16)*

*second term of office          **third term of office            ***guest Governor
## GOVERNANCE COMMITTEE

<table>
<thead>
<tr>
<th>Members</th>
<th>Membership Type</th>
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<tbody>
<tr>
<td>Brian Arney</td>
<td>Public West Essex</td>
<td>6 Public</td>
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<tr>
<td>Eileen Greenwood</td>
<td>Public South Essex</td>
<td></td>
</tr>
<tr>
<td>Evelyn Hoggart</td>
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<td>Public Bedford</td>
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<td>Public Central Beds</td>
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<td>Jim Thakoorind</td>
<td>Public Central Beds</td>
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<tr>
<td>Tracy Reed</td>
<td>Nurses &amp; Midwives</td>
<td>1 Staff</td>
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<tr>
<td>David Bowater</td>
<td>Central Beds Council</td>
<td>2 Appointed</td>
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<tr>
<td>Mandy Tanner</td>
<td>Service User &amp; Carers Essex</td>
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## NOMINATIONS COMMITTEE

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<thead>
<tr>
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<tr>
<td>Lorraine Cabel</td>
<td>Trust Chair</td>
<td>Trust Chair</td>
</tr>
<tr>
<td>David Bowater</td>
<td>Central Beds Council</td>
<td>2 Appointed</td>
</tr>
<tr>
<td>Joy Das</td>
<td>Service User/Carer West Essex</td>
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<tr>
<td>Brian Arney</td>
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<td>6 Elected (Public/Staff)</td>
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<tr>
<td>Jackie Gleeson</td>
<td>Public Luton</td>
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<td>Eileen Greenwood</td>
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<td>John Jones</td>
<td>Public Bedford</td>
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<tr>
<td>Vacancy</td>
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## REMUNERATION COMMITTEE

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<tr>
<td>David Bowater</td>
<td>Central Beds Council</td>
<td>1 Appointed</td>
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<tr>
<td>Vacancy</td>
<td>Staff</td>
<td>1 Staff</td>
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<tr>
<td>Eileen Greenwood</td>
<td>Public South Essex</td>
<td>5 Public</td>
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<tr>
<td>John Jones</td>
<td>Public Bedford</td>
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<tr>
<td>Clive Travis</td>
<td>Public Bedford</td>
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<tr>
<td>Paula Grayson</td>
<td>Public Bedford</td>
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<tr>
<td>Sue Revell</td>
<td>Public South Essex</td>
<td></td>
</tr>
<tr>
<td>Lorraine Cabel</td>
<td>Trust Chair</td>
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## Changes to the Council of Governors

### Council of Governors Meeting Part 1: Committee Membership 4 March 2015

### MEMBERSHIP COMMITTEE – ESSEX

<table>
<thead>
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<tr>
<td>Mandy Tanner</td>
<td>Service User &amp; Carer</td>
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</tr>
<tr>
<td>Paul Delaney</td>
<td>Staff</td>
<td>1 Staff</td>
</tr>
<tr>
<td>Bob Calver</td>
<td>Public Rest of Essex</td>
<td>2 Public (minimum)</td>
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<tr>
<td>Shurleea Harding</td>
<td>Public Southend</td>
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</tr>
<tr>
<td>Brian Arney</td>
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### MEMBERSHIP COMMITTEE – BEDS & LUTON

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<tr>
<td>David Bowater</td>
<td>Appointed Central Beds Council</td>
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<tr>
<td>Vacancy</td>
<td>Staff</td>
<td>1 Staff</td>
</tr>
<tr>
<td>Susan Butterworth</td>
<td>Public Central Beds</td>
<td>2 Public (minimum)</td>
</tr>
<tr>
<td>Michael Dolling</td>
<td>Public Luton</td>
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</tr>
<tr>
<td>Jackie Gleeson</td>
<td>Public Bedford</td>
<td></td>
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<td>John Jones</td>
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### SIGNIFICANT TRANSACTIONS GROUP

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<tbody>
<tr>
<td>Brian Arney</td>
<td>Public West Essex</td>
</tr>
<tr>
<td>David Bowater</td>
<td>Appointed Central Beds (LA)</td>
</tr>
<tr>
<td>Bob Calver</td>
<td>Public Rest of Essex</td>
</tr>
<tr>
<td>Paul Delaney</td>
<td>Staff Social Workers</td>
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<tr>
<td>Jackie Gleeson</td>
<td>Public Luton</td>
</tr>
<tr>
<td>Paula Grayson</td>
<td>Public Bedford</td>
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<tr>
<td>John Jones</td>
<td>Public Bedford</td>
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<tr>
<td>Lynda Lees</td>
<td>Public Central Beds</td>
</tr>
<tr>
<td>Sudi Sudarsanam</td>
<td>Public West Essex</td>
</tr>
<tr>
<td>Jim Thakoordin</td>
<td>Public Central Beds</td>
</tr>
</tbody>
</table>
1 PURPOSE OF REPORT

This report is provided by the Council of Governors Governance Committee and summarises the activities of the Committee from 12 November 2015 to date.

2 SUMMARY

The Governance Committee is a standing committee of the Council of Governors providing support in ensuring that effective and robust governance processes are in place and operate effectively, enabling the Council to fulfil 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 20 January 2015 where the following matters were discussed:

2.1 Governor attendance at meetings: the Committee reviewed the non-attendance record for Governors in line with the monitoring procedure approved by the Council at its meeting in February 2014. The Committee agreed that, if required and in consultation with the Chair, the formal removal process would be implemented.

2.2 Governor training and development update: the Committee received an update on the development of the Governors Learning & Development Pathway. A report on training and development is included under agenda item 6(k).

2.3 Membership of Council of Governors Sub-Committees procedure: the Committee reviewed the guidelines which were introduced in February 2012. The purpose of the guidelines are to ensure:

- There is a common understanding and consistent approach to appointing Governors as members and/or chair of a committee
- An equal opportunity is provided to all Governors to join a committee
- A fair and balanced representation of Governors across all committees
- The committees retain a balance of experienced and new Governors
- Committee membership is regularly monitored and maintained.

The Committee noted that the amendments were minimal and mainly relate to changes which provided clarity and updated information. The revised guidelines are attached at appendix 1. The Committee agreed to recommend to the Council of Governors approval of the guidelines.

2.4 Constituency framework review working group: the Committee received an update report on the discussions of the working group to review the Trust’s constituencies and composition of the Council. A report on proposals from the group is included under agenda item 6(j).
2.5 Monitor’s *Code of Governance*: the Committee noted the good progress made on the action plan which had been developed following the self-assessment review of the Trust’s position against the *Code* for 2013/14. The actions which are mainly to strengthen compliance were identified following a review of the *Code* by the Governance Committee working alongside Board Directors. The Committee noted that the same review process is being planned for reviewing the *Code* for 2014/15.

2.6 *Code of Conduct for Council of Governors*: The Committee agreed to recommend to the Council of Governors an extension to the review period to May 2015.

### 3 RECOMMENDATION AND ACTION REQUIRED

The Council of Governors is asked to:

1. Note the current work of the Council of Governors Governance Committee
2. Agree the revised Membership of the Council of Governors Sub-Committee procedure and guidelines
3. Agree the review date for the *Code of Conduct for Council of Governors* be extended to May 2015.

Report prepared by
Cathy Lilley
Business Administration Manager (Chair’s Office) on behalf of:

John Jones
Chair – Governance Committee
4 March 2015
Council of Governors Committee Membership and Committee Chair Appointment Guidelines

Introduction

The Trust’s Constitution includes a provision for the Council of Governors to appoint committees to assist the Board in carrying out its duties; these committees do not have any statutory powers. The Council of Governors may appoint Governors and may invite Directors and other persons to serve on such committees. Further details are set out in the Council of Governors Standing Orders.

The following procedure has been developed to ensure:

- There is a common understanding and consistent approach to appointing Governors as members and/or chair of a committee
- An equal opportunity is provided to all Governors to join a committee
- A fair and balanced representation of Governors across all committees
- The committees retain a balance of experienced and new Governors
- Committee membership is regularly monitored and maintained.

The approach allows Governors to put themselves forward for appointment to a Committee and for appointments to be made by the Chair of the Trust in consultation with the Business Administration Manager (Chair’s Office). All appointments will be approved by the Council of Governors.

1. Committee Membership Appointment Approval Procedure

1.1 Committee membership is to be reviewed annually to identify any impending vacancies due to forthcoming retirement of Governors. A list of committees’ membership and vacancies will be presented at each Council of Governors meeting. A schedule of meetings will be circulated annually.

1.2 The Business Administration Manager (Chair’s Office) will advise Governors when a vacancy arises. Governors will be asked to put themselves forward for appointment to a committee and provide a brief statement as to the skills and experience they can bring having reviewed the relevant terms of reference; this will be a similar length to elected Governors nomination statements. Governors will be asked to commit to dates of known meetings if they are going to put their name forwards for membership of a committee. Dates will be included in a committee membership nomination form (Attachment A).

1.3 Newly elected/appointed Governors will be asked during the induction process if they wish to become members of a committee. If there are any vacancies, the new Governor will put themselves forward as in 2 above. If there are no vacancies, the new Governor can register their interest in membership of a particular committee(s) with the Trust Secretary.
1.4 Committee members will be appointed by the Trust Chair in consultation with the Business Administration Manager (Chair’s Office) and appointments presented for approval at the next scheduled Council of Governors meeting.

1.5 Details of any changes to membership of any committee will be notified to all Governors as soon as possible following approval by the Trust Chair.

1.6 A reserve list of Governors willing to serve on a particular committee will be kept by the Business Administration Manager (Chair’s Office) and appointments will be made from this list should a vacancy arise.

1.7 Governors interested in becoming a member of a Committee and/or Governors on the reserve list will be invited to attend and participate at meetings but they will not be able to vote at the meeting.

2 Committee Membership Terms

2.1 Each committee shall appoint a Chair.

2.2 The Business Administration Manager (Chair’s Office) will write to all committee members with an invitation to put themselves forward for the role of Chair of the committee.

2.3 Interested committee members will submit a short statement (250 words max) on how their skills and experience can support the role.

2.4 A list of interested Governors together with their nomination statement will be circulated to all committee members for consideration.

2.5 A secret ballot will be held to elect the chair of the committee; if there is only one candidate, the Governor will automatically be elected unopposed.

2.6 The appointment procedure will be facilitated by the Chair’s Office.

3 Committee Chair

3.1 The period of membership of a committee and/or the period of office for a Chair is linked to the Governor’s term of office.

3.2 Governors can be a member and/or Chair of up to two committees.

3.3 However, Governors can be a member of more than two committees in cases where vacancies are proving hard to fill.

3.4 If a Governor has been re-elected or re-appointed following the expiry of their term of office, their membership of any committee shall be reviewed and re-appointment to the committee required.
Attachment A

Council of Governors Committee Membership Nomination Form

Governors are invited to self-nominate for membership of sub-committees of the Council of Governors. Please return the completed form to the Trust Secretary; all nomination forms will be acknowledged within three days of receipt.

All applications will be reviewed by the Trust Chair in consultation with the Business Administration Manager (Chair’s Office).

If you require any further information, please contact the Business Administration Manager (Chair’s Office).

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<thead>
<tr>
<th>NAME OF COMMITTEE</th>
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<tbody>
<tr>
<td>TERMS OF REFERENCE</td>
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<td>FREQUENCY OF MEETINGS</td>
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<td>KNOWN DATES OF MEETINGS</td>
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<td>GOVERNER DETAILS</td>
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<tr>
<td>Full name</td>
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<tr>
<td>Signed</td>
<td>Date</td>
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</table>

NOMINATION STATEMENT

In no more than 200 words, explain why you wish to be a member and/or the Chair of this Committee and what special skills and experience you can bring.