

**Minutes of the Full Council of Governors meeting  
Thursday 4th May 2017, 6.00pm, Clinical Education Centre,  
Russells Hall Hospital, Dudley**

**Present:**

<b>Name</b>	<b>Status</b>	<b>Representing</b>
Mr Darren Adams	Public Elected Governor	Stourbridge
Mr Terry Brearley	Public Elected Governor	Brierley Hill
Mr Richard Brookes	Public Elected Governor	Brierley Hill
Mr Sohail Butt	Staff Elected Governor	Medical and Dental
Dr Richard Gee	Appointed Governor	Dudley CCG
Miss Jenny Glynn	Staff Elected Governor	Allied Health Professionals and Health Care Scientists
Mr Rob Johnson	Public Elected Governor	Halesowen
Mrs Viv Kerry	Public Elected Governor	Halesowen
Mrs Michelle Lawrence	Staff Elected Governor	Nursing & Midwifery
Mrs Joan Morgan	Public Elected Governor	Central Dudley
Mrs Jenni Ord	<b>Chair of Council</b>	DGH NHS FT
Ms Yvonne Peers	Public Elected Governor	North Dudley
Mrs Karen Phillips	Staff Elected Governor	Non Clinical Staff
Mrs Pat Price	Public Elected Governor	Rest of the West Midlands
Mrs Jacky Snowdon	Staff Elected Governor	Nursing & Midwifery
Mrs Mary Turner	Public Elected Governor	DCVS

**In Attendance:**

<b>Name</b>	<b>Status</b>	<b>Representing</b>
Mrs Liz Abbiss	Head of Communications & Patient Experience	DG NHS FT
Mrs Helen Board	Patient & Governor Engagement Lead	DG NHS FT
Mr Paul Bytheway	Chief Operating Officer	DG NHS FT
Mr Jonathan Fellows	Non-executive Director	DG NHS FT
Ms Siobhan Jordan	Interim Chief Nurse	DG NHS FT
Mr Andrew McMenemy	Director of Human Resources	DG NHS FT
Mr Glen Palethorpe	Director of Governance/Board Secretary	DG NHS FT
Ms Diane Wake	Chief Executive	DG NHS FT
Ms Sara Whitbread	Speciality Manager for Day Surgery/Pre-op	DG NHS FT

**Apologies:**

<b>Name</b>	<b>Status</b>	<b>Representing</b>
Mr Fred Allen	Public Elected Governor	Central Dudley
Cllr Adam Aston	Appointed Governor	Dudley MBC
Mr Bill Dainty	Staff Elected Governor	Nursing & Midwifery
Mrs Lydia Ellis	Public Elected Governor	Stourbridge
Mrs Diane Jones	Public Elected Governor	South Staffordshire & Wyre Forest
Mr James Pearson-Jenkins	Public Elected Governor	Tipton & Rowley Regis
Mrs Nicola Piggott	Mrs Nicola Piggott	North Dudley
Mr Paul Taylor	Director of Finance & Information	DG NHS FT
Mr Alan Walker	Staff Elected Governor	Partner Organisations

**COG 17/09**

**Welcome and introductions (Public & Press)**

**18:00pm**

Mrs Ord opened the meeting, welcomed all present and introduced the following people:

Chief Executive, Ms Diane Wake who had joined the Trust in April and brought with her extensive experience especially in the areas of improving organisations quality of care and new care models.

Interim Chief Nurse, Ms Siobhan Jordan who had also joined the Trust in April and had experience of a large number of organisations in the UK and abroad and brings with her extensive CQC inspection experience.

Lead Nurse for Day Surgery, Ms Sara Whitbread who had recently been shortlisted in the HSJ and Nursing Times awards for her work in driving improvements in day case performance which would be the subject of the presentation to follow.

Ms Wake thanked Mrs Ord for the introduction and expressed her intention to be in attendance at meetings of the Full Council and as many of the Council Committees as possible. She added that her first few weeks in the Trust had been spent meeting staff and she had learned more about the good work being undertaken as well as the challenges to address which included staffing levels, ward sizes and had observed that cleanliness varied from very good to not so good in some areas. She had reviewed the Strategic Objectives and the Trust's Quality Priorities and the developed annual plan for this year. She advised that a Chief Executive update would be submitted to future meetings of the Full Council to ensure they remained up to date on topical issues and improvements as well as the positive things happening within the Trust.

**COG 17/09.1 Apologies**

Apologies had been received and recorded as above.

**COG 17/09.2 Declarations of Interest**

Declarations of Interest were noted against enclosure five, NED terms of office, where Mr Fellows would be asked to leave the meeting for that item.

**COG 17/09.3 Quoracy**

The meeting was declared quorate.

**COG 17/09.4 Announcements**

Mrs Ord announced the forthcoming retirement of Mrs Baines, Director of Strategy and Performance and asked Governors to minute a note of thanks for her contribution to the success of the Trust. The Council agreed.

**COG 17/10 Presentations: Day Case including Patient Story**

**18:05pm**

Mrs Ord invited Ms Whitbread, Lead Nurse for Day Surgery to present an update of the day case improvements which would include a patient story which had become a regular feature at Full Council

Ms Whitbread highlighted the following within her presentation:

- Improved patient experience for elective procedures had been delivered utilising an holistic approach listening to and treating patients as individuals
- There has been a decrease in the number of cancelled procedures
- Increased throughput for emergency patients to receive the right care in the right specialty/ward area prioritised on clinical need i.e. high dependency as routine procedures were being taken through day case
- To ensure patients were more comfortable whilst waiting for their procedure, they are encouraged to stay in their own clothes until such time as they were needed to change into hospital gown prior to surgery
- Increased theatre utilisation was possible with this model of care
- Improved financial performance has been seen as a by product of these changes
- Alternative arrangements for entry to the day case theatres have been established to ensure a less anxious experience for those patients with a learning disability

Ms Whitbread noted that the service continued to use patient feedback to further drive improvements and had participated in a peer review exercise to share best practice with others on listening to patients and staff to drive positive changes.

She then shared a patient story video where patients had shared their experience about the positive impact of the changes made, these changes included a pager system that enabled patients to leave the area and be paged when needed for theatre. The video included testimony from a patient who had previously had an operation as an inpatient and had recently been able to have the same procedure completed as a day case patient and had noted how improved his experience had been.

Mrs Ord thanked Ms Whitbread for the very informative presentation and invited questions.

Mrs Morgan asked how long patients waited to be discharged following day surgery.

Ms Whitbread explained that patients needed to meet strict criteria before discharge and this differed from patient to patient but very few were not discharged on the day of surgery.

Mrs Ord asked for more information about the improvements made to theatre utilisation.

Ms Whitbread confirmed that some theatres now worked until 9pm at night. Feedback from patients supported the option to go home later and the day surgery area now stayed open until 11pm, allowing for those to recover from the procedure and be discharged the same day rather than having to stay overnight.

Dr Gee noted that the CCG recognised that the improvements had made a positive difference to patients.

**COG 17/11 Previous Meeting**

**COG 17/11.1 Minutes of the previous full Council of Governors (Enclosure 1)**  
18:30pm

The minutes of the previous meeting held on 2<sup>nd</sup> March 2017 were approved as an correct record subject to amendments as follows:

17/05.1 Dr Gee noted that the word 'SEIS' should read 'STEIS', 'peritoneal' should be replaced with 'perineal' and 'inter uterine' should be replaced with 'intra uterine'

**COG 17/11.2 Matters arising**

There were none that were not included within the action plan next on the agenda.

**COG 17/11.3 Action points**

16/22.1 Governor chat facility – Mrs Phillips advised that after much discussion with all Governor members, the general consensus had been to remain with telephone and email as the main form of communication and asked if all governors were happy to share their telephone numbers..

Mrs Ord suggested that Mrs Phillips canvas opinion from all governors to establish their contact preferences. **The Council agreed that this action was in all respects actioned sufficiently for this item to be closed**

Mrs Phillips noted that the governors had previously held informal social events which had helped Governors to get to know each other better. She asked those present if they would indicate if they still wished these events to continue. A show of hands indicated substantial interest in this and Mrs Phillips agreed to make arrangements for the next social event.

**New action:** Governors to be asked to indicate their preferred method of contact and arrangements to be made for the next governor social event. **Mrs Phillips**

**COG 17/12 Update from Council Committee's chairs**  
18:35pm

**COG 17/12.1 Experience & Engagement Committee (Enclosure 2)**

Mrs Phillips presented her report given as enclosure two and highlighted the following items from the meeting held on 19<sup>th</sup> April 2017;

- Trust membership remained compliant with the Trust terms of authorisation
- Governors were identified to attend the following meetings as governor representatives:
  - o Quality and Safety Group - Mrs Kerry and Mrs Price
  - o Patient Experience Group – Mrs Phillips and Mrs Peers
- The Terms of Reference and been reviewed with agreement made to submit to the full Council for approval

Mrs Ord thanked Mrs Phillips and asked Governor to note the contents of the report and asked those present to approve the Terms of Reference

All present **agreed** to approve the Terms of Reference with abstention.

**COG 17/12.2 Governance Committee (Enclosure 3)**

18:45pm

Mr Palethorpe presented the report given as enclosure three in the absence of the Committee Chair Mr Allen who was at a governor conference in London. He highlighted the following key items that had been covered at the last meeting held on 27<sup>th</sup> April 2017 which had been quorate.

The Committee received reports from the Board of Directors Finance and Performance (F&P) Committee Chair and the Board of Directors Audit Committee Chair in respect of their recent meetings, along with reports from the Trust's Finance Director, Director of HR and the Director of Governance. These reports covered the Trust's Financial and Operational Performance, Workforce KPIs, the Trust's Corporate Risk and Assurance Register Report and the Trust's draft annual governance statement, The Committee also considered its cycle of business and the introduction of more visible assurance over the Trust's clinical governance processes. The Committee wished to report to the Council the following

- Assurance had been received regarding actions being undertaken to address key financial risks and the areas of under and over performance
- An update had been received on the F&P Committee's role in the Digital Trust Project with regards to monitoring its delivery against plan
- Assurance was received from the Director of HR in respect of the Trust's performance against a range of workforce indicators and noted the improvement in performance in respect of mandatory training and appraisals
- On receiving the report from the Chair of Audit Committee, the Governance Committee received assurance that the work of the Trust's auditors (clinical audit, internal audit and external audit) was progressing as planned and any follow up actions needed by Trust management are being monitored
- On considering the Trust's Assurance Register and the responses provided by the Director of Governance, the Committee were assured of its robustness and noted that the register is a live document where a number of risks had moved since its last report. Mr Palethorpe added that an extract of the register had been included as enclosure to this report to ensure that all governors had sight of it
- The Committee reviewed the draft of the Annual Governance Statement following its consideration by the Audit Committee and agreed with the view of the Audit Committee that it represented a fair reflection of the Trust's systems of internal control
- On considering the report provided by the Director of Governance on the Trust's process for dealing with National Patient Safety alerts, the Committee were content that it provided evidence of a sound process
- The Governance Committee annual work plan was considered and agreed that it contained an appropriate focus on both corporate and clinical governance processes and would enhance the reporting received by the Committee

Mr Palethorpe invited all Governors on behalf of the Committee Chair, Mr Allen, to attend the next meeting of the Governance Committee at 5.30pm on 29 June 2017. The meeting would comprise a single agenda item to enable the PwC auditors to present their opinion on the annual report. He noted that the auditors were appointed by the Council and the meeting would provide an opportunity for all Governors to raise questions ahead of the Annual Members Meeting.

Mrs Ord thanked Mr Palethorpe for the update and asked Governors to note the actions taken by the Committee in holding the Trust to account in respect of its

performance and systems of risk management and internal control and to note the year end position in respect of the key risks facing the Trust.

**Action:** invitation to be circulated to all Governors to attend the Governance Committee meeting at 5.30pm on 29<sup>th</sup> June 2017 **HB**

**COG 17/12.3**  
**18:53**

**Governor Development Group (Enclosure 4)**

Mr Johnson presented the report given as enclosure four and reminded those present of the role of the Group in working to support the effectiveness of the Full Council. He highlighted the following items covered at the last meeting held on 11<sup>th</sup> April 2017:

- Arrangements were reviewed for the forthcoming Strategy Workshop to be held on Wednesday 17<sup>th</sup> May where Governors would have an opportunity to discuss the future plans for the Trust and the wider economy with members of the Board of Directors. All governors would be invited and encouraged to attend.
- The Committee noted the work underway to develop work plans for each of the Committees of Council, noting that the Governance Committee had already developed theirs.
- Consideration was given to the process of appointing the Lead Governor and Governor elections commencing in Autumn 2017.
- It was agreed to review Governor attendance at full Council at the next meeting of the Group and contact those with a poor attendance record.

Mrs Ord thanked Mr Johnson for his update and asked all Governors to make every effort to attend the Strategy Workshop and noted the value and importance of Governor involvement in the Trust's orward planning process.

**COG 17/12.4**  
**19:00pm**

**Remuneration & Appointments Committee (Enclosure 5)**

*[Mr Fellows left the meeting at this point]*

Mr Johnson presented the report given as enclosure five where the key item covered was consideration of the proposal to reappoint Mr Fellows and Mrs Becke for one further year. The Committee had carefully considered the evidence provided and discussed the balance of risks between the need to ensure the Board had the skills and experience required to ensure its continued effectiveness and the continued independence and commitment of the Non-executive Directors.

The Committee had agreed that changing two NEDs at the end of their ninth year in 2017/18 would be a greater risk than any possible erosion of independence on the part of the current NEDS by serving a tenth year and agreed to recommend to the full Council that Mr Fellows and Mrs Becke have their terms of office extended until 30<sup>th</sup> October 2018.

Mrs Ord thanked Mr Johnson for the update and asked those present to approve the recommendation for Mr Fellows and Mrs Becke to have their terms of office extended until 30<sup>th</sup> October 2018.

All present **agreed** without abstention.

*[Mr Fellows re-joined the meeting]*

## **COG 17/13 Standing Reports**

### **COG 17/13.1 Finance and Performance report Q4, 2016/17 (Enclosure 6)**

19:05pm

Mr Fellows presented the report given as enclosure six and highlighted the items covered at the last meeting of the Finance and Performance Committee of the Board on 27<sup>th</sup> April 2017:

- The Trust would receive the full STF (Sustainability Transformation Fund) payment of £10.5m based on the year-end financial outturn and had also been notified that it would receive a STF incentive payment of £390k and a bonus of £1,055m.
- Subject to audit the Trust's year end income and expenditure position would be a surplus of £11.584m (including STF monies).
- Spend on pay had exceed its budget by £3.888m and this was attributed to continued high levels of spend on agency and bank staff and the increase in the number of employed staff.
- The Trust had delivered £10,046 CIP savings in 2016/17 and had set a target of £12.5m for 2017/18.
- The A&E four hour wait target had been achieved in March but the 95% had been missed for both Q4 (91.85%) and the year end (94.16%).
- The provisional Referral to Treatment measure for incomplete waits had been achieved in March 92.8% (target 92%) but admitted pathways target had been missed 88.5% (target 90%)
- The six week diagnostic performance target had been achieved in March with a performance of 99.29% which was an improvement on the previous month.

Mrs Phillips asked what the savings target was for agency spend and if the Trust continued to recruit nurses from overseas.

Miss Glynn asked what report Governors would receive to be able to monitor the savings.

Ms Wake replied that a savings target had been set at £5.7m which equated to a 50% reduction in agency spend. Progress would be reported and monitored by the Boards F&P Committee and reported to Governors via the Governance Committee of Council. She added that a review of establishment levels would be undertaken in the first quarter to ensure that the right levels were in place. She noted that steps had already been taken to strengthen the process for the authorisation of bank and agency staff requests. She confirmed that three overseas nurses were now in post which had been disappointing and a decision had been made not to continue with recruitment of overseas nurses.

Mr McMenemy advised that the Trust would focus on developing a sustainable workforce by growing staff locally and gave an example of the recent relaunch of a return to practice initiative in partnership with local universities.

Mr Adams confirmed that the Governance Committee did receive detailed information and noted the outstanding financial performance Trust and congratulated the Board on the achievement.

Mrs Ord thanked Mr Adams for noting the robust performance against what had been a tough and challenging time and which was unlikely to change in the years to come. She invited Governors to highlight any ideas that could potentially contribute to improving efficiency.

Mrs Morgan asked how long it would be before the introduction of electronic patient records in the Trust.

Ms Wake advised this would be implemented in April 2018 and confirmed that Mr Stanton, Chief Information Officer who would attend the Council later in the year to present an update.

**COG 17/13.2 FT Membership report Q4, 2016/17 (Enclosure 7)**

19:16

Mrs Board presented the report given as enclosure seven and asked those present to note the continued compliance with maintaining a public membership of 13,000 that broadly represented the community served by the Trust.

Mrs Ord noted that the foundation trust membership continued to provide support in many ways including volunteering, attending patient panels and support groups and thanked all Governors who had been involved with events at the Trust.

**COG 17/13.3 Board Secretary update (Enclosure 8)**

19:18pm

Mr Palethorpe presented his report and confirmed the following items;

- Governor elections were scheduled for later in the year for eight vacancies arising in public and staff constituencies. He invited Governors to support promotional activities that would commence in July with an information stand at the AMM where potential candidates would have the opportunity to speak to existing governors and learn more about the role
- The Lead Governor appointment process had commenced with a notice circulated to the Council on 11<sup>th</sup> April 2017 calling for expressions of interest to be submitted by Friday 26<sup>th</sup> May 2017. Arrangements had also been made to host information sessions to enable any interested governor to attend to find out more about what the role entailed from the existing Lead Governor and the Board Secretary.
- Terms of Reference reviews are being undertaken by the Experience and Engagement Committee and the Appointments and Remuneration Committee and would be reported within the respective Committee reports to the full Council at the next meeting.
- The Council of Governors 2017/18 Annual Work Plan had been finalised and circulated with the papers for endorsement by the Full Council of governors.

He asked those present to note the items listed as above

Mrs Ord asked Governors to note the items in the report and invited questions. There were none. She encouraged all governors to consider the role of Lead Governor and to seek out either Mr Palethorpe or Mr Johnson in the near future for further information about the role. She supported the plan to appoint in time to provide an overlap prior to the end of term for Mr Johnson in December 2017.

Mr Johnson added that the role had scope for an individual to develop the role in their own way.



Mrs Ord invited governors to endorse the Council of Governors 2017/18 Annual Work items as raised above.

All those present **agreed** to endorse the Council of Governors 2017/18 Annual Work Plan without abstention.

**COG 17/14**     **Quality**  
19:25pm

**COG 17/14.1     Quality Accounts 2016/17 (Enclosure 9)**

Ms Jordan thanked everyone for the warm welcome. She gave a short overview of her previous roles where she had been the Chief Nurse at four previous hospitals: the latter one had also provided community services and was looking forward to the continued development of community services at The Dudley Group. Ms Jordan noted that she would be working hard to prepare the Trust for the forthcoming CQC inspection expected in quarter three of 2017/18. She acknowledged the work of Governors and noted their valued involvement in the Trust's self inspection process.

Ms Jordan presented the report given as enclosure nine and thanked Governors for their comment on the Quality Accounts. She asked Governors to note the following items:

- Patient experience had presented an improving picture of the Trust in a number of areas and noted the improvements in reducing pressure ulcers and falls and improving the nutritional needs of patients
- Infection prevention and control had also performed well during the year against a challenging target

She referred to her previous experience of other hospitals and noted the importance of working closely with staff to gather intelligence, demonstrate good leadership and would continue work to improve professionalism including ensuring the basics were right: improve the image with smart clean uniforms with consideration being given to the reintroduction of belts, clearly displayed name badges and all staff to introduce themselves to patients.

Mrs Ord thanked Ms Jordan for her update and invited questions.

Miss Glynn asked if performance targets used for nursing to help with reporting and improvements could be developed for AHP and HCS staff and added they would be key for measuring improvement and as a way of sharing best practice.

Ms Jordan confirmed KPIs would be developed for this staff group as she had introduced these in other organisations.

Mr McMenemy confirmed that the recently established Recruitment and Retention Strategy Group would also support the development and recruitment of AHP and HCS staff.

Ms Jordan confirmed her support for the development of a professional forum to enable all professions to be represented.

Mrs Price supported the introduction of new uniforms with belts and asked if the issue of keeping belts clean had been the reason they had to be removed previously.

Ms Wake commented that no evidence existed to support the theory that the wearing of belts compromised infection prevention and control and added that they had been removed for manual handling reasons.

Mrs Phillips referred to recent Quality and Safety Review activity that she had attended where patient feedback seemed to indicate that the use of bank staff was associated with lower standards.

Ms Jordan confirmed that Trust uniforms would be provided for bank staff which should re-affirm to patients that they are being looked after by Dudley nurses. She noted that the majority of bank shifts are filled by substantive staff doing an extra shift. She confirmed that the workforce plan would focus on the reducing the reliance on agency and use savings to support a substantive workforce.

Mrs Ord thanked Ms Jordan for her update and noted that agenda item 6.4 had been covered with a verbal update included in this section.

**COG 17/14.2 Lessons Learned from Incidents, Complaints, PALS, and Corporate Learning and Complaints and Claims Report Q4, 2016/17 (Enclosure 10a & 10b)**

19:34pm

Mr Palethorpe presented the Aggregated Learning Report from Incidents, Complaints, PALS and Corporate Learning report/Lessons Learned report given as enclosure 10a and highlighted the following:

He asked Governors to take assurance from the robust processes that were in place and that the Trust remained committed to ensuring that learning occurs from all kinds of reviews and feedback and were able to demonstrate changes made. He gave an example of actions taken as a result of learning:

- Pressure ulcers investigated during quarter four had identified the main themes that related to repositioning, equipment and patient nutrition. In response the Tissue Viability team undertook a roadshow in March and chose 'Red Nose' day to launch this event with the slogan 'Pressure ulcers are NO laughing matter' to encourage staff to engage whilst promoting the importance of pressure are prevention.

Learning is shared Trust wide and actions incorporated and included in corporate action planning activity. The Trust continued to host Listen, Learn and Share Events where case studies are shared with colleagues to take back to their areas and their peers and included an invitation to members of the CCG to attend.

Quality and Safety Reviews continued with four completed during quarter four. He highlighted some of the areas of good practice that had been identified including an excellent medicines management notice board, positive patient feedback of care, dignity and communication. He confirmed that actions were developed to address those areas identified for improvement.

Fractured neck of Femur mortality. A recent audit of The National Hip Fracture Database had showed the Trust to have a higher than national average 30 day mortality performance in 2015. The multidisciplinary group which meets to monitor and improve all aspects of preparation, treatment and care of these patients had developed actions for improvements and performance is now in line with the national average. Ongoing performance is tracked via the Trusts Quality and Safety

Committee and reported through the Governance Committee of Council for assurance.

Falls. The Trust had signed up to the NHS England falls collaborative and had been selected as one of 22 trusts nationally to participate with the aim of reducing falls for patients in hospitals. The Trust had subsequently participated in study workshops and implemented projects on ward areas including improvements to the Fall Safe Under Reporting tool.

He then presented the Complaints and Claims report given as enclosure 10b and highlighted the following:

There had been a small reduction in the number of complaints received during the financial year although many continued to be complex. The Trust had acknowledged 100% of all complaints received within 3 working days. There had been 115 local resolution meetings held with complainants where taking the time to clarify exactly what and where more information was needed which had led to a significant reduction in those coming back dissatisfied.

The total number of complaints received compared to the level of incidents reported represented 2%. The percentage of complaints received compared to all Trust activity remained low at 0.03% for the year ending 31<sup>st</sup> March 2017. The Trust continued to receive a high level of compliments from patients and their families.

Mr Palethorpe advised that the Trust continued to work with NHS Resolution (formerly NHS Litigation Authority) to swiftly settle appropriate claims and strongly defend those that are not appropriate. He added that 38% of clinical claims settled during 2016/17 had no damages awarded against the Trust.

Mr Palethorpe confirmed that Trust viewed every complaint received as an opportunity to learn from where things had not gone so well for patients and to take action to address as appropriate.

Mrs Ord thanked Mr Palethorpe for the update and invited questions.

Miss Glynn asked how the levels of safety incidents reported at the Trust compared to our peers.

Ms Wake replied that the Trusts number of reported incidents were higher than our peers and had a positive view of higher levels of reporting and reflected that we encourage our staff to report all incidents.

Ms Jordan noted that the Trust should expect the number to increase as the reporting provided robust information to gauge what is happening at the front line.

Dr Gee acknowledged the emphasis the Trust placed on learning and took assurance that the feedback contributed directly to improving the overall quality of care. This sentiment was also supported by Mr Adams and Mrs Phillips.

Mr Palethorpe confirmed that the Trust is keen to learn from incidents especially those that were considered a near miss or had the potential to cause harm. He noted that the reporting and analysis continued to evolve. He confirmed that learning from

patient feedback included those concerns raised with the PALS and often reflected situations where patients may not wish to formally complain.

Mrs Ord asked those present to receive the report and acknowledge the actions taken to learn from incidents and complaints and note the overall summary at the 31<sup>st</sup> March 2017.

**COG 17/14.3 Patient Experience report Q4 and 2016/17 (Enclosure 11)**

19:45pm

Mrs Abbiss presented the report given as enclosure 11 and noted that the report now included additional summary information to reflect the request from Council and confirmed that the detailed report is available on the Governor Portal. She then highlighted the following items:

**Patient feedback** – more than 34,000 pieces of feedback had been received during 2016/17. Analysis of the feedback revealed that 74% was positive and 24% was negative. All feedback was scrutinised to identify the key themes of what patients told us we did well and where we needed to improve

**Key themes** – the main items that remained a focus area for improvement actions are communication, care and treatment, appointments and discharge. These are fed into Trust wide action and improvement planning.

**You said, we have** – updates on actions taken for improvement are publicised in this way and forms part of the feedback loop to ensure continued engagement with those that deliver and those that use our services. She noted examples of improvement actions taken during the year which included the provision of a pre-paid parking voucher for those collecting a death certificate, systems put in place to produce appointment letters in larger fonts when requested by patients and the launch of care co-ordinators providing a link between the hospital, GPs and community based services for any patients identified as vulnerable or frail at point of discharge

**Friends and family test (FFT) survey** – In March 2017, all areas achieved a recommended percentage score that was equal to or better than the national average with the exception of ED who had achieved 81% compared to the national average of 87% (Feb 17). Actions to support improved response rates are being refreshed with a rollout out of an FFT SMS messaging system for ED and day case with consideration given to introducing the SMS solution in other areas.

The FFT also provided a free text option which patients used to submit additional feedback. This is then categorised and toned and where comments are identified as negative, this information was shared with staff as appropriate to resolve and implement actions for improvement.

**Patient Experience Group** – membership of the Group includes two Governors who report key items to the Engagement and Experience Committee for review and action as appropriate.

Dr Gee noted his support of the launch of the care co-ordinators adding that local GPs agreed it had made a positive difference to supporting the multi-disciplinary care teams to deliver care more effectively.

Mrs Ord thanked Mrs Abbiss for the update and reminded Governors that the full report was available on the Governor Portal.

**COG 17/14.4 Chief Nurse update**

The Chief Nurse had provided the update under item 17/4.1

**COG 17/15 Workforce Report (Enclosure 12)**

19:55

Mr McMenemy presented his report given as enclosure 12 and asked those present to note the actions being undertaken to improve compliance with targets and take assurance from the progress made:

Sickness absence. The results revealed an improving situation and added there was still work to do.

Appraisals. The number of appraisals had also increased and the focus remained to achieve the 90% target. He thanked managers for their continued effort to achieve this.

Mr McMenemy confirmed that other KPIs (key performance indicators) were being developed to link where appropriate with CQUINS and gave the example of staff flu vaccination uptake as a measureable KPI.

Staff health and wellbeing. In response to feedback received from staff, the Action Heart Gym would soon be offering extended opening hours from 7am to 9.30pm.

Mr McMenemy confirmed that a detailed report was provided to the Council's Governance Committee who had been able to comment on the overall content and design of the report.

Mrs Ord thanked McMenemy for his report and asked that the Workforce report be taken as an earlier agenda item at the next meeting.

Mr Johnson noted that the sickness absence rate amongst nursing had appeared to increase.

Mr McMenemy concurred and explained that the nursing staff group had now been split to enable further analysis of registered and non-registered nursing staff to better understand potential causes and address appropriately

**Action:** Workforce report to next meeting to be taken as an earlier agenda item at the next meeting **HB**

**COG 17/16.0 Any other business**

There was none

**COG 17/17 Close of meeting and forward dates**

20:05pm

Mrs Ord thanked all Governors for their continued support of the work of the Trust and reminded Governors to attend the Annual Members Meeting to be held on Thursday 20<sup>th</sup> July.

The meeting closed at 8.05pm. The next meeting of the Full Council of Governors would be held on Thursday 7<sup>th</sup> September 2017.

Mrs Jenni Ord, Chair of meeting

Signed..... Dated .....

**Action Sheet**

**Council of Governors meeting held December 2016**

Outstanding	Item to be addressed
To be updated	Item to be updated
Complete	Item complete

<i>Item No</i>	<i>Subject</i>	<i>Action</i>	<i>Responsible</i>	<i>Due Date</i>	<i>Comments</i>
17/11.3	Governor social event	Governors to be asked to indicate their preferred method of contact and arrangements to be made for the next governor social event	KP	Next meeting	
17/12.2	Governance Committee meeting 29 <sup>th</sup> June 2017	invitation to be circulated to all Governors to attend the Governance Committee meeting at 5.30pm on 29 <sup>th</sup> June 2017	HB	31 <sup>st</sup> May 2017	
17/15.0	Workforce report	Workforce report to next meeting to be taken as an earlier agenda item at the next meeting	HB	Next meeting	