

Confirmed Minutes - Council of Governors Open Meeting

Date	Thursday, 18 July 2024	Time	15:45-17:15
Venue	Conference Room, Field House, BRI	Chair	Sarah Jones, Chair
Present	<ul style="list-style-type: none"> - Sarah Jones, Chair (SJ) - Aleksandra Atanaskovic, Public Governor, Shipley (AA) - Dermot Bolton, Public Governor, Bradford West (DB) - Mark Chambers, Patient Governor and Lead Governor (MC) – via MS Teams - Professor Alastair Goldman, Partner Governor, University of Bradford (AG) - Ruth Houghton, Staff Governor, All Other Staff Groups (RW) - Dr Farideh Javid, Public Governor, Bradford South (FJ) - Dr Farzana Khan, Staff Governor, Medical & Dental (FK) - Raquel Licas, Staff Governor, Nursing & Midwifery (RL) - Councillor Fozia Shaheen, Partner Governor, Bradford Metropolitan District Council (FS) - Kursh Siddique, Public Governor, Bradford East (KS) - Philip Turner, Public Governor, Keighley (PT) - Helen Wilson, Staff Governor, AHP (HW) - John Waterhouse, Public Governor, Bradford East (JW) - Andy Waller, Public Governor, Rest of England and Wales (AW) - David Wilmshurst, Public Governor, Shipley and Vice Chair (DW) 		
In attendance	<ul style="list-style-type: none"> - Zafir Ali, Non-Executive Director (ZA) - Professor Louise Bryant, Non-Executive Director (LB) - Julie Lawreniuk, Non-Executive Director (JL) - Sughra Nazir, Non-Executive Director (SN) - Altaf Sadique, Non-Executive Director (AS) - Professor Mel Pickup, Chief Executive (MP) - Sajid Azeb, Chief Operating Officer (SA) - Renee Bullock, Chief People & Purpose Officer (RB) - Professor Karen Dawber, Chief Nurse (KD) - Mark Hindmarsh, Director of Strategy & Transformation (MH) - Chris Smith, Acting Chief Finance Officer (CSm) - Dr Ray Smith, Chief Medical Officer (RS) - Jacqui Maurice, Head of Corporate Governance (JM) - Laura Parsons, Associate Director of Corporate Governance/Board Secretary (LP) - Catt Shutt, Assistant Director of HR/Head of Organisational Development (CSh) – for agenda item CGo.7.24.8 only 		

No.	Agenda Item	Actions
CGo.7.24.1	Apologies for Absence The following apologies were received: <ul style="list-style-type: none"> - Khalid Choudhry, Public Governor, Keighley (KC) - Professor Anne Forster, Partner Governor, University of Leeds (AF) - Bryan Machin, Non-Executive Director (BM) - Karen Walker, Non-Executive Director (KW) - Mohammed Hussain, Non-Executive Director (MH) (authorised absence) - Paul Rice, Chief Digital and Information Officer (PR) 	
CGo.7.24.2	Declarations of Interest SJ raised a declaration in relation to a confidential and ongoing matter.	

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CGo.7.24.3	Minutes of the meeting held on 6 February 2024 The minutes were accepted as a correct record.	
CGo.7.24.4	Matters Arising SJ referred to the action log appended to the minutes. The status of the actions was confirmed as follows: <ul style="list-style-type: none"> • <u>CG23006 Summary of pre meeting with NEDs</u>: DW raised a concern around the length of time it takes to recruit staff in the early stages. RB agreed to provide a briefing note at the next COG meeting in relation to the three reviews taking place on policies, recruitment process and progression. RB agreed to include, as part of the reviews, reference to Equality, Diversity and Inclusion (EDI) culture and improvement. DB raised concerns regarding recruitment timescales and the length of time taken from interview to appointment. RB confirmed this forms part of the review underway. <u>Action to remain open</u> • <u>CG2401 – Operational planning</u>: A Governors session took place on 11 March as submission of the operational and financial plans would take place prior to the next CoG meeting. <u>Action closed</u> • <u>CG2402 – Membership plan update</u>: The suggestions presented regarding young people and membership recruitment would be taken to the next Membership Plan Group to agree how these should be progressed. To be discussed at the September Membership Plan Group meeting. <u>Action to remain open</u> 	
CGo.7.24.5	Holding to Account <ul style="list-style-type: none"> • Chairs Report SJ highlighted the following key points: <ul style="list-style-type: none"> - Change in the regulation of the Trust by NHS England (NHSE). To be discussed further at agenda item CGo.7.24.6. - Three new governors have been appointed to the Council with a further two awaiting their final pre-employment checks. - Further discussion will take place at agenda item CGo.7.24.11 in relation to setting up task and finish groups of the Council to review the constitution, governor objectives and policies and procedures. - SJ has met with Chairs and CEOs from various healthcare providers in West Yorkshire. There is greater collaboration across Bradford and District Place due to the ongoing financial challenges. - The 'Brilliant Bradford' awards take place on 26 September 2024 and all governors are invited to attend. - The Clinical Service Unit (CSU) to academy event takes place on 12 September 2024 and all governors are invited to attend. <ul style="list-style-type: none"> • NED feedback (reports from Board) Quality and Patient Safety Academy LB highlighted the following key points: <ul style="list-style-type: none"> - A detailed report on Maternity & Neonatal Services is discussed at the monthly Quality and Patient Safety Academy (QPSA) meetings. 	

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	<p>During January to March 2024, significant concerns were raised by staff and others in relation to safe staffing levels in the department. Daily huddles continue to review staffing levels and the situation has improved. Several external reviews have taken place recently in the Neonatal Unit and these have now concluded with high assurance given and recommendations implemented. Assurance had also been received on the stillbirth and maternal death data.</p> <ul style="list-style-type: none"> - Summary Hospital-level Mortality Indicator (SHMI) data levels remain high due to issues around coding. It was noted that our crude mortality rate remains the lowest in West Yorkshire. CQC inspectors noted that the mortality, governance, learning from deaths and the Structured Judgement Review (SJR) programme were robust, which provides strong assurance of the arrangements in place. - Quarterly infection prevention and control (IPC) reports are received by the QPSA and the latest report was presented to the Board of Directors in July 2024. We remain a high performing Trust with 52 out of 54 IPC framework requirements compliant with 2 partially compliant scores. In response to AG's question relating to the turnaround time in Microbiology services which are carried out at Airedale FT, RS confirmed that he has recently joined the Pathology Joint Venture board to provide clinical oversight. One of the aims is to install an incubator onsite to provide timely results on blood samples. - FK asked if canulation training was available to nurses as well as junior doctors. LB confirmed that it was available to all clinical staff but was a separate part of the junior doctors' training. - There have been several changes since the beginning of the year in relation to the Patient Safety Incident Reporting Framework (PSIRF). There is a strong focus on learning, improvement and strengthening systems but also engagement with those involved. As part of the assurance process Serious Incident reports and Complaints, Litigation, Incidents and PALS (CLIP) reports are provided to the Academy which provide strong assurance and a strong focus on learning and improvement. - A detailed Adults Safeguarding report was presented to the QPSA, highlighting the scope of the service and the challenges they face, particularly in relation to mental health and domestic and sexual violence cases. There are significant challenges within the Children's Safeguarding service relating to poor child mental health and some issues with the IT systems. <p>AG referred to the 'alert' section detailed within the Academy chair reports and asked how these matters were tracked to ensure appropriate follow up. It was agreed to consider this outside of the meeting to ensure that this is clarified in the reports.</p> <p>Finance & Performance Academy JL highlighted the following key points:</p> <ul style="list-style-type: none"> - At the end of March 2024, the financial position was a £4.6m surplus which is a good result for the Trust. The position for the new financial year, April 2024 - March 2025, is proving more challenging with a projected deficit of £14.1m. To achieve this, the Trust needs to deliver £38.9m of savings schemes whilst ensuring our services remain safe. The Academy was not assured that the Trust could deliver its financial plan this year, but was assured on the work that is ongoing to manage 	<p>Academy Chairs CG2403</p>

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	<p>that position and to identify savings.</p> <ul style="list-style-type: none"> - MH is leading on the 'Closing the Gap' programme. A recent report presented to the Academy showed 206 schemes currently identified to deliver £22.9m of potential savings, against the £38.9m required. An update will be provided to the Academy on a monthly basis. - Performance across the Trust remains strong, particularly within urgent care, with 83% of patients seen within the 4-hour target. Operational improvement plans, for Referral to Treatment (RTT), Urgent & Emergency Care and Cancer & Diagnostics, are presented at the Academy on a rolling monthly programme which highlights the schemes that are ongoing to improve performance. <p>JL confirmed that the Trust's yearly budget is £585m with around 70% spent on staffing. PT asked if the Closing the Gap work with regard to quality assurance and patient safety will be reported back to the governors to provide assurance that it will not impact on patient safety. MH confirmed that each of the 206 schemes have had an impact assessment undertaken which is reviewed on a weekly basis by clinical teams and a summary is provided to the Academies and Board. AG queried if a robust process of testing takes place on the impact of not replacing staff or recruiting new staff. JL noted that this is covered by the quality impact assessment work that takes place. Additional scrutiny and consideration is given at weekly meetings to review staffing levels in clinical areas along with non-clinical staffing recruitment.</p> <p>MC asked what assurances the Trust can provide to ensure it is doing all it can to improve the situation and what challenges remain. JL stated that there are remarkable improvements made as shown in the month 3 data. PwC are undertaking an audit of the Closing the Gap work and any recommendations from the audit will be taken forward as appropriate.</p> <p>FJ raised a query regarding the spending costs of locums, particularly in light of cover for the junior doctors strikes. JL confirmed that the Trust has not budgeted for future strikes in the long term, but locum costs are included within some of the 206 schemes.</p> <p>DW sought assurance on the completion of the new surgical unit at St Luke's Hospital (SLH) which was due for handover on the 15 April 2024 and the lessons learnt for future projects. SJ confirmed that the new handover date is the 30 August 2024, with regular communication taking place between the Trust and the Contractor.</p> <p>SN asked for assurance that we are continuing to maintain staffing levels in high-risk areas throughout the Trust in light of a recent BBC article. KD confirmed that the 6 monthly staffing review report was discussed recently at the July Board meeting, which highlighted changes that were required in a number of areas to ensure there is no deterioration in the position.</p> <p>People Academy</p> <p>In KW's absence, RB highlighted the following key points:</p> <ul style="list-style-type: none"> - Closing the Gap discussions has taken place at the Academy and assurance was provided that the proposals and new ways of working to achieve efficiencies were proactively engaging staff. - The Academy recently undertook a review of the 'Thrive Live' 	

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	<p>sessions. Results found that staff liked to see Executives visiting areas that are not within their portfolio to undertake informal walk rounds.</p> <ul style="list-style-type: none"> - Work is ongoing within the HR team to promote involvement within 'Thrive Hive'. Staff are encouraged to deliver sessions on activities they are passionate about such as choir, crafting, cooking and fitness. <p>Chief Executive's Report</p> <p>MP highlighted the following key points:</p> <ul style="list-style-type: none"> - Towards the end of the last financial year there was a huge imperative from NHSE to improve performance in relation to A&E targets and ambulance response times. The Trust is currently performing well in relation to this standard. - Further to a recent documentary on Channel 4 at an A&E hospital in the Midlands, MP has asked for assurance via the Quality Academy around the patient experience through our A&E department. - RS provided an update on the recent BBC article and news item on BBC Look North around Klebsiella infection at the Neonatal Unit in November 2021. It was noted that the Klebsiella infections were not linked to 3 Serious Incidents (SIs) that had occurred in April 2021. The Klebsiella incidents and the 3 SIs were investigated comprehensively throughout the Trust, and have been scrutinised by the ICB, NHSE and our regulators. The outcome of these investigations was that the Neonatal Unit was an excellent service which supports babies and their families exceptionally well and no actions were raised. Currently Bradford's Klebsiella rate, amongst peer groups, is the second best nationally. The IPC process audit recently undertaken by Audit Yorkshire received high assurance. Results from a recent publication in the Health Service Journal showed that the Neonatal service was performing 5-15% better than average when compared to other trusts. <p>DB queried if the three SIs in April 2021 were related to the Klebsiella infections in November 2021. RS confirmed that only one of the three incidents in April related to a Klebsiella infection. There was no infection route identified and the investigation found that there were no significant breaches of IPC regulations, but some learning points were identified.</p> <p>DW asked what reassurance the Trust is providing to parents in light of the recent BBC and Look North report. RS confirmed that staff in the Neonatal Unit have been supported and advised on how they can support parents of babies who may have a concern.</p> <p>SN queried if the Trust's Whistleblowing and FTSU mechanisms are robust enough so that staff feel they can speak up. She also queried if there was a plan to formally reach out and reassure patients about infection risks. RS confirmed that discussion had taken place around whether to contact families already on the ward, but at present no concerns have been raised. In terms of FTSU, it was noted that this could be considered further at the next COG meeting.</p> <p>The Council noted the updates and the assurance provided.</p>	<p>People Academy Chair CG2404</p>

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CGo.7.24.6	<p>Regulation/Oversight of the Trust SJ provided an overview of the regulations governing an NHS Foundation Trust. Day to day regulation of trusts is overseen by the ICB however, NHSE has the legal right to step in and take enforcement actions if required. SJ stated that NHSE will step in when they suspect that there has been a breach of the licence conditions. NHSE has taken enforcement action against our Trust as a 'significant concern' has been raised around our governance. In terms of the four segments of the NHS Oversight Framework (NOF), the Trust has now moved from the default position (segment two) to segment three. The Trust is still in the top quartile for performance and will endeavour to ensure that this remains the case whilst under this period of scrutiny. Scrutiny by NHSE will take place at a monthly meeting of the Integrated Quality Improvement Group (IQIG) made up of representatives from the NHSE Regional office, ICB, CQC and the Trust.</p> <p>SJ advised that the first IQIG meeting took place on 12 July and part of the discussions focussed on the actions required of the Trust and the conditions that will be put on our provider licence. There are lots of activities that the Trust has either complied with, or have underway, and this was seen as a positive, along with work ongoing to build relationships. An Independent Oversight Group (IOG) will maintain oversight of the ongoing independent investigations, including the response of the Trust to any recommendations which are made. It was noted that there will be no representation from the Trust on the IOG.</p> <p>Once the formal letter is received from NHSE to confirm the enforcement undertakings and additional licence conditions, it will be shared with Governors. AG queried if there would be governor representation as part of the discussions and it was noted that the Lead Governor would represent the Governors in this process when required. SJ agreed to discuss with NHSE regarding the possibility of a more formal role for the Lead Governor as part of this process.</p> <p>The Council noted the update.</p>	Chair CG2405
CGo.7.24.7	<p>Matters raised with Governors by members, patients and the public There were no matters to report.</p>	
CGo.7.24.8	<p>Outcomes of staff survey Cat Shutt (CSh), Assistant Director of HR/Head of Organisational Development joined the meeting to provide an overview of the outcomes of the staff survey for 2023. She provided background information on the survey and the action plan being implemented in response to the results.</p> <p>CSh highlighted the following key points:</p> <ul style="list-style-type: none"> - The national NHS survey ran from September to November 2023. - The response rate for our Trust was 43% which is an increase of 6% on the previous year. Our Trust is just below the national average response rate of 46%. - Plans are in place to improve the response rate. - The survey is themed by the NHS people promise and the 7 pillars. - The biggest improvement compared to the national average is in the 	

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	<p>area 'we are always learning'.</p> <ul style="list-style-type: none"> - Year on year the organisation is improving in every area apart from two that have remained stagnant. - The action plan has been approved by the People Academy and the Executive Team. <p>DB asked if it was possible to contextualise some of the data to provide comparisons with other industries and organisations. SJ explained that our results are compared against the NHS national average and local trusts with comparisons being made within the NHS as a whole. RB agreed to review the past four years of staff survey data to identify themes which may help to support an improvement in the scores.</p> <p>The Council noted the update and the assurance provided.</p>	<p>Chief People & Purpose Officer CG2406</p>
CGo.7.24.9	<p>AGM/AMM proposal</p> <p>LP referred to the draft agenda presented. The current date scheduled for our combined AGM/AMM is Thursday 3 October 2024 however, at the present time the annual report and accounts remain in draft form until the external auditor, Deloitte LLP, has had sight of the final report from the Care Quality Commission covering their inspections undertaken in March and April 2024. Until the annual report and accounts are laid before Parliament, we are unable to publish our annual report and accounts and, hold an AGM/AMM. It is therefore proposed that we move our AGM/AMM to take place on a date to be confirmed in January 2025 to align with the Council of Governors meeting.</p> <p>The Council approved the proposal to move the AGM/AMM date.</p>	
CGo.7.24.10	<p>Establishment of Governor Policy / Procedure task and finish group</p> <p>Expressions of interest were sought from Governors to join the Governor policy/procedure and the Constitution review task and finish groups. It was also noted that Board members would form part of the membership of the task and finish groups. Recommendations from these two groups will be presented to the Council of Governors for approval. JM agreed to circulate the remit of each of these groups to provide clarity on time commitment and the scope of the work to be carried out.</p> <p>The Council approved the proposals.</p>	<p>Head of Corporate Governance CG2407</p>
CGo.7.24.11	<p>Establishment of Constitution Review task and finish group</p> <p>Agenda item discussed at CGo.7.24.10</p>	
CGo.7.24.12	<p>Council of Governors work programme</p> <p>This item was deferred to allow for actions from the Governor Policy & Procedure task and finish group to be incorporated into a revised work plan.</p> <p>The Council noted the work programme.</p>	<p>Head of Corporate Governance CG2408</p>
CGo.7.24.13	<p>Any other business</p> <p>No other business was discussed.</p>	

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CGo.7.24.14	Review of meeting SJ noted that she would continue to try and keep the meetings to time.	
CGo.7.24.15	Date and time of next meetings 17 October 2024, 3.30-5.30pm	
CGo.7.24.16	Resolution to move into private session This was approved.	

Actions from the Council of Governors meeting held 18 July 2024

Date of Meeting	Action log ID	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
6.2.24	CG2402	CGo.2.24.10	Membership Plan Update The suggestions presented regarding young people and membership recruitment would be taken to the next Membership Plan Group to agree how these should be progressed.	Head of Corporate Governance	October 2024	18.7.24 - To be discussed at the September Membership Plan Group meeting – <u>action to remain open</u>
18.7.24	CG2403	CGo.7.24.5	Holding to account - NED feedback (reports from Board): Quality Academy AG referred to the 'alert' section detailed within the Academy chair reports and asked how these matters were tracked to ensure appropriate follow up. It was agreed to consider this outside of the meeting to ensure that this is clarified in the reports.	Academy Chairs	October 2024	Committee/Academy chairs will ensure that 'alert' items are followed up as required. <u>Action closed.</u>
18.7.24	CG2404	CGo.7.24.5	Holding to account – Chief Executive's report In terms of FTSU, it was noted that this could be considered further at the next COG meeting.	People Academy Chair	October 2024	For consideration at the October COG meeting.
18.7.24	CG2405	CGo.7.24.6	Regulation/Oversight of the Trust SJ agreed to discuss with region the possibility of a more formal role for the Lead Governor as part of this process	Chair	October 2024	This matter was raised with NHSE. <u>Action closed.</u>
18.7.24	CG2406	CGo.7.24.8	Outcomes of staff survey RB agreed to review the past four years of staff survey data to identify themes to improve the scores.	Chief People & Purpose Officer	October 2024	We have reviewed the past four NHS Staff Survey results for BTHFT, and the overall three top key themes are: <ul style="list-style-type: none"> • Building the confidence and capabilities of our line managers – ensuring they have the support they need to manage effectively; • Civility and respect – defining the values and behaviours we expect from each other,

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						<p>compassionate leadership and how we support each other to speak out;</p> <ul style="list-style-type: none"> Supporting colleague health and wellbeing (including physical health, mental health, nutrition, and financial wellbeing). <p>Whilst a lot of work has been done, and is in progress, to help improve these areas, we continue to build them into our new People Strategy and People Plans to ensure that they remain as priorities. <u>Action closed.</u></p>
18.7.24	CG2407	CGo.7.24.10 & CGo.7.24.11	<p>Establishment of governor task & finish groups</p> <p>JM agreed to circulate the remit of each of these groups to provide clarity on time commitment and the scope of the work to be carried out.</p>	Head of Corporate Governance	October 2024	Information regarding remit circulated. <u>Action closed.</u>
28.4.23	CG23006	CGo.4.23.5	<p>Summary of pre meeting with NEDs</p> <p>DW raised a concern around the length of time it takes to recruit staff in the early stages. FL agreed to note the discussion and examine the process</p>	Acting Director of HR	January 2025	<p>23.10.24 – Update to be provided in January 2025 to allow for the outcome of the reviews to be presented to the People Academy.</p> <p>18.7.24 – RB agreed to provide a briefing note at the October COG meeting in relation to the three reviews taking place on policies, recruitment process and progression.</p>
18.7.24	CG2408	CGo.7.24.12	<p>Council of Governors work programme</p> <p>This item was deferred to allow for actions from the</p>	Head of Corporate	April 2025	

Date of Meeting	Action log ID	Agenda Item	Required Action	Lead	Timescale	Comments/Progress
			Governor Policy & Procedure task and finish group to be incorporated into a revised workplan.	Governance		