

**Meeting of the Council of Governors**  
**PART 1**  
**Held on 18 November 2020 at 10.30 am**  
**At Royal Papworth Hospital and via WebEx**

**MINUTES**

<b>Present</b>	<b>John Wallwork</b>	<b>JW</b>	<b>Chairman</b>
	Janet Atkins	JA	Public Governor
	Stephen Brown	SB	Public Governor
	Susan Bullivant	SBu	Public Governor
	Julia Dunncliffe	JD	Public Governor
	Glenn Edge	GE	Public Governor
	Caroline Edmonds	CE	Appointed Governor
	John Fiddy	JF	Public Governor
	Gill Francis	GF	Public Governor
	Caroline Gerrard	CG	Staff Governor
	Richard Hodder	RHo	Head Governor
	Cllr.Linda Jones	LJ	Appointed Governor
	Trevor McLeese	TMc	Public Governor
	Harvey Perkins	HP	Public Governor
	Rodney Scott	RS	Public Governor
	Martin Ward	MW	Staff Governor
<b>In Attendance</b>	Michelle Barfoot	MBa	Staff Governor - Elect
	Michael Blastland	MB	NED
	Doug Burns	DB	Public Governor –Elect
	Trevor Collins	TC	Public Governor –Elect
	Cynthia Conquest	CC	NED
	Aman Coonar	AC	Staff Governor – Elect
	David Gibbs	DG	Public Governor - Elect
	Tim Glenn	TG	Chief Finance Officer
	Ivan Graham	IG	Chief Nurse
	Abigail Halstead	AH	Public Governor - Elect
	Rhys Hurst	RH	Staff Governor -Elect
	Anna Jarvis	AJ	Trust Secretary
	Eilish Midlane	EM	Chief of Operations
	Oonagh Monkhouse	OM	Director of Workforce
	Joe Pajak	JP	Public Governor -Elect
	Stephen Posey	SP	Chief Executive
	Andy Raynes	AR	Director of Im & T
	Gavin Roberts	GR	NED
	Julie Wall	JYW	PA Minute Taker

<b>Apologies</b>	Roger Hall	RH	Medical Director
	Keith Jackson	KJ	Public Governor
	Cllr.Alex Malyon	AM	Appointed Governor
	Cheryl Riotto	CR	Staff Governor
	Alessandro Ruggiero	AR	Staff Governor
	Ian Wilkinson	IW	NED

Agenda Item (minute reference)		Action by Whom	Date
<b>1</b>	<b>WELCOME, APOLOGIES AND OPENING REMARKS</b>		
	<p>The Chairman (JW) welcomed everyone to the meeting and hoped that everyone was keeping well.</p> <p>Apologies were noted as above.</p> <p>Newly elected Governors were invited to observe this meeting and JW welcomed them. He hoped that they would be able to have a tour of the hospital as soon as it was safe to do so as part of their induction in the New Year.</p> <p>JW mentioned that he was sad to see the Governors leave who were stepping down and asked them to keep in touch.</p> <p>JW Reminded Governors regarding attendance of Board Meetings and explained that there were going to be changes in the New Year. Every other month there are going to be Board development sessions and these would start with an informal update and briefing for Governors and NED's (9am-10am) at the beginning of each meeting. Electronic invitations would be circulated to Governors.</p> <p>JW reported that the hospital was doing well even though it was going into the second wave of COVID-19. There is some anxiety within the hospital but there was also a feeling that Papworth would deal with whatever is thrown at them.</p> <p>JW reported that the build of the HRLI was growing fast and that the building would be watertight by the end of December. The hoardings would then start to come down.</p>		
<b>2</b>	<b>DECLARATIONS OF INTEREST</b>		
	<p>There were no new declarations of interest</p> <p>AJ reminded newly elected governors to return their forms if not done so already.</p>		

Agenda Item (minute reference)		Action by Whom	Date
3	<b>MINUTES OF THE PREVIOUS MEETING – 16 September 2020</b>		
	The minutes of the meeting held on 16 September 2020 were agreed as a correct record.		
4	<b>COVID-19 UPDATE</b>		
	<p>SP said that it was great to see everyone and wanted to thank everyone on behalf of the Board for their contributions throughout the year.</p> <p>SP wanted to explain about the additional structures (tents) outside the hospital and what these were being used for:</p> <ul style="list-style-type: none"> <li>• Support staff with 40 dining places</li> <li>• New changing facilities</li> <li>• Staff testing facilities</li> <li>• Provide counselling for staff to ease pressure after busy year and second wave while staff already tired – additional to restoring normal services</li> </ul> <p><b>SP handed over to EM to give an update:</b></p> <ul style="list-style-type: none"> <li>• The staff have been working exceptionally hard with the restoration of business as usual</li> <li>• The focus on staff wellbeing is very important to the Trust and support was being put into place with wellbeing rooms for staff to take breaks in a calm environment. Mental Health sessions. Resilience Sessions. Free tea and coffee.</li> <li>• The Trust is working with partners on the Bio Medical campus</li> <li>• Collaboration of system partners. The STP is very pleased with the contribution given by RPH and how they “upped the pace” to help neighbouring Trusts</li> </ul> <p><b>COVID-19</b> Data recovered so far has shown good outcomes. This includes:</p> <ul style="list-style-type: none"> <li>• First wave response – subsequent restoration of services</li> <li>• Emergency services were well maintained</li> <li>• Start of second wave – responding with normal activity in place</li> </ul> <p><b>EM</b> agreed that this is going to be a challenging winter.</p> <ul style="list-style-type: none"> <li>• Staff have already been feeling the strain as they have had no respite. They have worked very hard through the first wave, through restoration of activity and now the second wave of cases are coming in.</li> <li>• Today we have nine patients with COVID-19. Eight of the patients are on ECMO. We admit the very sickest of patients</li> </ul>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>nationally.</p> <ul style="list-style-type: none"> <li>We will respond to the normal increase of patients due to Winter</li> <li>The first cohort of redeployed staff are moving on 23 November to respond to second wave</li> <li>There are an additional 35 members of staff getting ready for redeployment</li> </ul> <p>Following feedback from the first wave things are being done differently to prepare for the second wave.</p> <ul style="list-style-type: none"> <li>Staff are being given notice of redeployment</li> <li>Further training is being put into place</li> <li>Supernumerary time in CCU is being arranged, as this is a very different environment to work in when staff have been redeployed from other areas</li> <li>Organisation planning for roll out of staff testing with lateral flow tests</li> <li>There is planning for a huge roll out of vaccination when the vaccines are deemed safe. We have 2200 staff and there will be complex logistics for storage and roll out. RPH and partners are to work together. This will also add to winter pressures.</li> </ul> <p><b>LJ</b> Commented that she was interested in comprehensive staff testing. Cambridge Universities and their staff are working on this and there is concern regarding the recording of data between symptomatic and asymptomatic people. It is felt that residents are anxious about the results of the data. LJ asked how RPH was going to record their data?</p> <p><b>SP</b> explained that it is a national response to testing staff not just RPH. Staff are being tested twice per week. Data is then reported to NHS England. From next Friday all NHS Trusts will be doing this and all will be reported to Public Health England</p> <p><b>CE</b> asked how the planning for vaccine roll out was going.</p> <p><b>SP</b> explained that the plans were being put into place. Ivan and Oonagh with their teams were not resting on their laurels' they were pushing on with the planning</p> <p><b>RHodder</b> asked, as Cambridge is now a hotspot for the virus what rate is there amongst staff testing positive?</p> <p><b>EM</b> explained that there is a very small amount. After lots of testing only 30 staff tested positive. Cases were found to be mainly from people living in Peterborough area.</p> <p>Fortunately because of the design of the building of the hospital there had been no feature of staff to staff infection. Staff are safe in the</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>hospital but we were seeing staff picking up the virus with the increased levels being seen in the community.</p> <p><b>JW</b> explained that the COVID situation is ongoing and unfortunately Roger Hall could not be with us as he is in a meeting regarding this as we speak.</p> <p><b>JW</b> wanted to reiterate that the focus is still on hand washing.</p> <p><b>EM set out the update on recovery -</b></p> <ul style="list-style-type: none"> <li>• CDC determined priority of patient services</li> <li>• ECMO surge went on longer than anticipated</li> <li>• CDC Set key priorities, system basis, key handling of referrals</li> <li>• A new group has been formed – Living with COVID</li> <li>• Sir Simon Stephens had written to all NHS organisations setting out restoration and key targets for recovery planning ahead of any second wave of COVID-19</li> </ul> <ul style="list-style-type: none"> <li>• Consultant to consultant figures are back up</li> <li>• GP Referrals up to 66% which is in line with STP</li> <li>• Not the same flow as previous to COVID but recovering</li> <li>• Virtual clinics are continuing to reduce foot fall in the hospital</li> <li>• There is some under performance of out-patient time used to follow up patients</li> <li>• Diagnostics recovered quickly as it wasn't stopped totally</li> <li>• Radiology was back to normal quickly also because it wasn't stopped totally</li> <li>• Endoscopy capacity was challenging</li> <li>• A second bronchoscopy room has been opened to free up space at Addenbrookes and help support them and other Trusts.</li> <li>• Thoracic Services carried on and has steady recovery</li> <li>• Cancer Services are recovering</li> <li>• Cardiology and Surgery are exceeding this time last year service</li> </ul> <p>This puts us currently in a good strong position going into the second wave</p> <p><b>GE</b> asked about staff redeployment around the Cancer Service. Staff that are identified do they feel capable and is this impacting on teams in any one service?</p> <p><b>JW</b> Commented that we have to remember this has been uncharted territory before now</p> <p><b>IG</b> explained that Clinical Team staff feedback, following the first wave, had been listened to and OM had been working with them to identify staff to be redeployed.</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>Every 4 weeks 25-30 staff will be redeployed. These numbers include a small number from each team in a service at a time so that no teams are put in a position of not being able to carry on the service as normal. This will enable normal activity to run alongside CCU being covered.</p> <p>The First phase cohort are ready to go on 23 November. Some staff could be in CCU longer than four weeks but smaller specialist teams would only do one to two short stints.</p> <p><b>RHodder</b> asked, with the national shortage of radiographers how RPH are staffing the opening of the extra bronchoscopy room.</p> <p><b>EM</b> explained that CUH Bronchoscopy Service was using our space to free up their facilities so their teams were covering this.</p> <p><b>EM</b> reported that there has also been some successful recruiting of radiographers from abroad. A cohort from Nigeria had come over to CT Services and this deserves a “big shout out” to our recruitment team for organising this.</p>		
<b>5</b>	<b>PIPR</b>		
	<p><b>Governors Received the Report</b></p> <p><b>SP</b> informed everyone that the decision was taken to report on PIPR. Many changes were noted due to the pandemic. The report was sent out previous to the meeting so we will not be doing the usual page turn but we will answer any questions.</p> <p><b>SP</b> reported that the Trust was breaking even with the emergency financial regime in place giving more flexibility. There is a slight deficit going forward. There is block funding for the COVID-19 response. The second six months of the year would be approached differently with the funding block and a COVID allocation that was paid prospectively rather than mapping to actual expenditure and that this would be paid through the STP. The challenge for this would be securing the Trust allocation from the STP block.</p> <p><b>JW</b> asked Governors who had any questions to issue them to Tim Glenn.</p> <p><b>No questions were put forward at this point.</b></p>		
<b>6</b>	<b>GOVERNOR MATTERS</b>		
	<p><b>1.Recommendations</b></p> <p><b>a) NED Appointments – Governors received report</b></p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p><b>b) TOR 005 - Governors received copy</b></p> <p><b>JW</b> asked if there were any comments</p> <p><b>AJ</b> confirmed this was reviewed by the committee and ratification was needed.</p> <p><b>No issues were put forward</b></p> <p><b>JW</b> asked RHodder to take General Governor Matters</p> <p><b>2. General</b></p> <p><b>a) Governor Committee Memberships</b></p> <p><b>RHodder</b> wanted to reiterate that there is an attendance issue for some of the committees and asked the Governors if they would like to express their interest in a particular committee they would prefer to join please let him know as some reorganising would be going ahead in next few weeks.</p> <p><b>AJ</b> Suggested chairs of committees to pull together a short meeting to look at interest from governors to move either from one to another or to join a new committee. Full membership is needed for committees to ensure they are quorate.</p> <p><b>JW</b> commented that this would be an important discussion during induction.</p> <p><b>GE</b> suggested that new Governors go to several of the committee meetings so that they could then decide which they would be more interested in and to then sit on those committees.</p> <p><b>b) Minutes of Governor Committees</b></p> <p>Governors received copy of the Forward Planning Committee minutes from the meeting held on 14 October 2020</p> <p><b>c) NHS Providers Showcase</b></p> <p><b>RHodder</b> reported that this was attended by a few CEO's who had a break out meeting to discuss mental health and supporting staff. Discussion took place about how to encourage Governors to be more interested and involved in their Trust by running an Induction Programme for them.</p> <p>It was felt that this should be offered to new and existing Governors</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>who were interested in attending.</p> <p><b>AJ</b> explained that unfortunately due to the pandemic Governors who started in 2020 did not have the usual induction time.</p> <p><b>PK</b> asked if the induction was specific to the Health Service.</p> <p><b>JW</b> explained that NHS Providers do excellent conferences for CEO's, Chairs and Governors</p> <p><b>d) Governor Inductions</b></p> <p><b>AJ</b> informed the Governors that information regarding inductions will follow and dates set up for four remote sessions in the New Year. Those Governors who are not able to attend on the day would be able to work through the recordings of the sessions at their own convenience. Workbooks will be sent out once dates are confirmed.</p> <p><b>RH</b> just wanted to mention that anyone who has not registered for the Annual Members Meeting later today should follow the link sent to them to register with Eventbrite.</p>		
<b>7</b>	<b>Questions Received from Governors or Public Previous to the Meeting</b>		
	No questions were sent previous to meeting		
<b>8</b>	<b>DATE OF NEXT MEETING – 17 March 2021</b>		
	<p><b>Dates arranged for Council of Governor meetings in 2021</b></p> <p>16 June</p> <p>15 September</p> <p>17 November</p>		

The meeting finished at 11.30 am

Signed: 

Date: 17 March 2021

**Royal Papworth Hospital NHS Foundation Trust  
Council of Governors Meeting  
Meeting held on 18 November 2020**