

**Meeting of the Council of Governors
PART I
Held on 15 September 2021
Via MS Teams
Royal Papworth Hospital**

MINUTES

Present	John Wallwork	JW	Chair
	Michelle Barfoot	MBa	Staff Governor
	Stephen Brown	SB	Public Governor
	Susan Bullivant	SBu	Public Governor
	Doug Burns	DB	Public Governor
	Trevor Collins	TC	Public Governor
	Aman Coonar	AC	Staff Governor
	Caroline Edmonds	CE	Appointed Governor
	Caroline Gerrard	CG	Staff Governor
	Abigail Halstead	AH	Public Governor
	Richard Hodder	RHo	Lead Governor
	Rhys Hurst	RHu	Staff Governor
	Christopher McCorquodale	CMc	Staff Governor
	Trevor McLeese	TMc	Public Governor
	Harvey Perkins	HP	Public Governor
	Cllr.Philippa Slatter	PS	Appointed Governor
In Attendance	Michael Blastland	MB	NED
	Cynthia Conquest	CC	NED
	Amanda Fadero	AF	NED
	Tim Glenn	TG	Chief Finance Officer
	Anna Jarvis	AJ	Trust Secretary
	Emma Larcombe	EL	KPMG Rep.
	Diane Leacock	DL	NED
	Eilish Midlane	EM	Chief Operations Officer
	Oonagh Monkhouse	OM	Director of Workforce & OD
	Stephen Posey	SP	CEO
	Andy Raynes	AR	CIO
	Gavin Robert	GR	NED
	Maura Screaton	MS	Chief Nurse
	Julie Wall	JYW	PA-Minute Taker
Apologies	Jag Ahluwalia	JA	NED
	John Fiddy	JF	Public Governor

	Gill Francis	GF	Public Governor
	Julia Dunncliffe	JD	Public Governor
	Pippa Erskine	PE	Public Governor
	John Fitchew	JF	Public Governor
	David Gibbs	DG	Public Governor
	Rodney Scott	RS	Public Governor
	Martin Ward	MW	Staff Governor
	Ian Wilkinson	IW	NED

Agenda Item (minute reference)		Action by Whom	Date
1	WELCOME, APOLOGIES AND OPENING REMARKS		
	<p>The Chairman (JW) welcomed everyone to the meeting. He reminded everyone about using the chat box if they had any questions throughout the meeting.</p> <p>Apologies were noted as above.</p> <p>JW spoke about the sad news of Janet Atkins death last month and how she had spent her last few weeks at Royal Papworth as a patient. The ward arranged a wedding for her which took place a couple of days before she died. She will be sadly missed not only as a Governor but as a volunteer around the hospital.</p> <p>JW congratulated the Governors who had been re-elected and welcomed Cllr Slatter to her first meeting.</p> <p>JW noted the step down of Gill Francis and thanked her for her work as a Governor for many years.</p>		
2	DECLARATIONS OF INTEREST		
	There were no new declarations of interest		
3	MINUTES OF THE PREVIOUS MEETING – 16 June 2021		
	The minutes of the meeting held on 16 June 2021 were agreed as a correct record.		
4	ANNUAL REPORT & ACCOUNTS		
	<p>Received: The Council of Governors received the link to review the Annual Report & Accounts</p> <p>The Annual Report and Accounts were approved by the Board on the 3</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>June 2021.</p> <p>These are available for review on the Royal Papworth Hospital website at: https://royalpapworth.nhs.uk/our-hospital/information-we-publish/annual-reports</p> <p>Reported: By Tim Glenn</p> <p>TG explained that the report showed the flavour of continuation of services, including COVID Research, Trust Strategy, and how the Trust responded well to COVID and the running of other Services simultaneously.</p> <p>Finance Despite an uncertain period and rapid expansion of equipment the Trust are still in a strong position. There was higher expenditure during the pandemic due to an increase in ECMO Services and patients needing ventilators.</p> <ul style="list-style-type: none"> • The Trust are in a healthy cash position • Some money carried forward from previous year • The Government gave extra finance to NHS • Cost improvements and strong price negotiation • Value for money: Trust delivered value for money for the tax payer • Audit: Accounts to be true and fair and finished on time <p>Received: The Council of Governors received copy of the Auditors Annual Report Year end 2020/21 dated 16 June 2021</p> <p>Emma Larcombe from KPMG joined the meeting Emma highlighted some key areas in the report:</p> <ul style="list-style-type: none"> • Public sector expenditure • Provisions – no adjustments and appropriately made • Full Valuation of Trust – No issues following process Trust went through to move • Management override of controls • Journals • All comfortable with no audit adjustments made. There were no concerns or recommendations. This is a testament to the Trust. • Value for Money – changed this year • Sets of considerations for money • Conclusion – no significant risks or weaknesses. Savings seen. • Government process, COVID money spent appropriately, no issues or recommendations raised <p>JW asked CC if she had any comment</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>CC replied that she would like to echo that this was a good audit in terms of spending and would like to point out that this was done under trying circumstances and in fact was done earlier than at other Trusts. She agreed that the Auditors and the Finance team should be commended</p> <p>JW asked if there were any other questions</p> <p>AJ informed everyone that the Quality Report had been circulated</p> <p>SP wanted to reiterate what had been said about the Auditors and Finance team and wished to thank them. He added that the simultaneous working of teams was remarkable.</p> <p>SB asked TG if there was any need for negotiation on the HRLI rent</p> <p>TG replied that his predecessor Roy Clarke had done a fantastic deal on the rental and there would be no financial change but there is a need to maximise the impact of the HRLI with research.</p> <p>Noted: The council of Governors noted the reports</p>		
5	EAST OF ENGLAND ANTI-RACISM STRATEGY 2021		
	<p>Received: The Council of Governors received a copy of the Anti-Racism Strategy</p> <p>Reported: by OM Slides of the Anti-Racism Strategy were shared on screen with the Council of Governors and OM gave a brief run through</p> <p>Focus on Racism: Data shows this is the biggest problem in the NHS</p> <p>Benefits of Diverse Workforce:</p> <ul style="list-style-type: none"> • Innovation, efficiencies, productivity • Staff engagement, health and wellbeing and retention • Patient care and experience <p>The Vision:</p> <ul style="list-style-type: none"> • To develop a plan of action in collaboration with key partners that will deliver sustainable and measurable change <p>Immediate Challenges:</p> <ul style="list-style-type: none"> • Experience, Careers and Our Culture <p>EoE WRES Indicators 2020:</p> <ul style="list-style-type: none"> • Data is mirrored across the EoE <p>RPH WRES Indicators:</p> <ul style="list-style-type: none"> • Our baseline data tells us that 25.1% of our workforce comes from Black, Asian and Minority Ethnic (BAME), backgrounds, and that we have 62 -different nationalities represented across RPH. 		

Agenda Item (minute reference)		Action by Whom	Date
	<p>The purpose of a Collaboration event in September was to better understand the experiences of our colleagues and to agree which areas were a priority in supporting our BAME colleagues</p> <p>Priority Areas For Action:</p> <ul style="list-style-type: none"> • Leadership and Management • Career Progression • Racial Harassment and Abuse from Patients and the Public <p>Identified Outcomes:</p> <p>Mission: To make all employers in the East of England anti-racist workplaces</p> <ul style="list-style-type: none"> • Vision: Core Purpose • Strategic Outcomes: Biggest factors to help achieve the mission • Specific Outcomes: What we need to work on • Expected Impact: What will be different as a result <p>RPH will support all our organisations, leaders, managers and people to understand the impact of racism and to be anti-racist. We will support organisations actively fulfil their role in accelerating change for our workforce and communities to address structural inequalities.</p> <p>Actions to be taken to contribute as a region working together: Good and fair recruitment practice Rules for training including training programmes for BAME National lead on violence</p> <p>Trust WRES Plan 2021/22</p> <p>The WRES Action plan has been reviewed and updated in collaboration with the BAME Network. The Network have identified the following priorities, some of which are carried over from the 2020 plan as a result of delays in implementation because of the Covid19 emergency. The work will be supported by the Equality, Diversity and Inclusion Team and monitored through the EDI Steering Committee and Quality and Risk Committee. The key priorities of the plan are to:</p> <ul style="list-style-type: none"> • Improve BAME staff representation and career progression across senior levels of the organisation • Reduce the gaps in experiences between white staff and BAME staff • Value and promoting the voice of BAME Staff within decision-making. • Support managers to understand structural and individual acts of racism and develop cultural intelligence programmes • Implement Reciprocal Mentoring; this is an 18 month mentoring programme modelled on STP approach. Communication/ engagement/ training and review. 		

Agenda Item (minute reference)		Action by Whom	Date
	<ul style="list-style-type: none"> Reduce bullying and harassment. <p>OM explained that she wished to share this with the Governors to show the work being carried out.</p> <p>JW asked if there were any questions for OM</p> <p>SB asked if the figures were NHS staff only</p> <p>OM replied yes, although discussions will take place with OCS staff who are subcontracted and governed by their own mechanisms to see if there were areas of working together. For example staff awards and the hardship fund have been opened up to OCS staff. We are looking at our ways and their ways of working so that we can work more collaboratively.</p> <p>JW commented that there was excellent work going on</p> <p>AC thanked OM for the work that she was doing as he felt there is reluctance for people to speak up. The events of COVID and the higher rate of disease within the BAME community highlighted more issues. AC agrees it is important to address for the next generation who should not have to put up with these issues.</p>		
6	No Item 6 on the Agenda		
7	ICS SYSTEM DEVELOPMENT UPDATE		
	<p>Reported: By Stephen Posey</p> <p>SP commented that this is the biggest structure change for years and is on track to being established and updated the Council of Governors:</p> <ul style="list-style-type: none"> The appointment of Chair is in process and the shortlisting has been done supported by our Chair JW. The interviews will be held on 30 September 2021. There has been a lot of interest. The CEO appointment process is on its way. Conversations are on-going and relationships are being built. Discussions around how governance is going to work Discretion is left to ICS on how performing and working with partners will go ahead We are sitting on groups nationally and regionally AR is on the agenda later for Shared Care Record update Work is going on around supporting colleagues and partners, particularly through the winter. Maintaining the right balance is important to continue delivering services <p>Discussion:</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>SP asked if there were any questions</p> <p>JW commented that once the key posts were taken on things will become clearer but time is short for structuring.</p> <p>HP stated that he was concerned that not all ICS's are behaving the same and that patient choice was not happening. HP asked to what extent are RPH aware of what is happening with other ICS's</p> <p>SP replied that this is a legitimate concern. Assurance has been heard in conversations that there will not be relaxation of Specialised Services. EoE is the provider of patient flow. ICS nationally and regionally are aware of the issue highlighted.</p> <p>SP asked TG if would like to add anything</p> <p>TG wanted to add that the changes are not massively different to today. There is no real desire for a top end provider and we stay with central commissioners. Regionally there is more debate for structure and local control of budget access. With regard to quality of services debates are happening and we are at the heart of the discussions and driving process.</p> <p>JW thanked TG and SP</p>		
8	PAPWORTH INTIGRATED PERFORMANCE REPORT (PIPR) – July 2021		
	<p>Received: The Council of Governors received the full PIPR – July 2021</p> <p>Reported: by Tim Glenn</p> <p>TG explained that PIPR was back in its usual format.</p> <p>Overall flagging in July 2021:</p> <ul style="list-style-type: none"> • Pressure of current wave of COVID • ECMO is 3-4 times its normal level • Significant increase in emergency admissions which are pandemic related with very poorly patients • Pressures due to staff absence, either annual leave or sickness • Other pressures, decrease of elective admissions and cancellations were creeping up <p>Safe:</p> <ul style="list-style-type: none"> • Good results from “Friends and Family” • Finance in good situation • Decent staffing levels <p>JW informed the Governors that EM and MS had put in a lot of work to balance and maintain services along-side COVID care</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>SP wanted to add to what TG had said to put into context the wider system:</p> <ul style="list-style-type: none"> • There are pressures on the wider NHS. • PIPR reflects stretched targets • Balancing and delivering of elective recovery • 3rd wave of COVID patients in CCU • Workforce are performing better than in other Trusts <p>SP asked if there were any questions</p> <p>MS wanted to assure the Governors that safe staffing is maintained at RPH. The metric in PIPR refers to rates realigning at the moment.</p> <p>EM wanted to add 3 points:</p> <ul style="list-style-type: none"> • In the July report staff were taking long earned annual leave. They were being encouraged to take time as there is going to be a challenging winter coming up. • All clinical teams are being informed by the Clinical Decision Cell to protect Cancer Care and Specialised activity. • The managing of waiting lists is by clinicians who are clinically prioritising patients. <p>Cllr Slatter commented that this is helpful to know for residents where she lives in Trumpington. Trumpington has park land which could be used for staff wellbeing to take a break, walking groups etc. Cllr Slatter added that if she could be of any help to let her know</p> <p>JW thanked Cllr Slatter</p> <p>AH asked if patients were prioritised by clinical need or time on the waiting list</p> <p>EM replied that prioritisation was on clinical review and that patients can move between score systems. RPH have very few 52 week waits and the ones that we have are down to the patient postponing their treatment due to not wanting to attend the hospital during the COVID pandemic</p>		
9	GOVERNOR MATTERS		
	<p>Reported by RH and AJ</p> <p>RH explained that unfortunately there is still no access for new Governors to have a tour of the hospital and the induction will be on line through NHS Providers the same as last year.</p> <p>RH acknowledged the sad loss of Janet Atkins who was a Governor and volunteer. He agreed that she did amazing things for RPH and will</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>be missed.</p> <p>RH reported that Gill Francis had decided not to stand again this year. He wanted to wish her all the very best for the future.</p> <p>AJ informed the Governors that Lorena Andreu Faz had left the Trust to go to new post elsewhere in the NHS and had left on 31 August 2021. The two vacancies had arisen after the poll was declared. It is proposed that the second highest polling candidates will be invited to serve in these positions until the elections in 2022.</p> <p>Recommendation: The Council of Governors is asked to approve the Recommendation in the attached paper.</p> <p>Approval: The Council of Governors approved the Recommendation</p> <p>i. Committee Membership</p> <ul style="list-style-type: none"> • Governors are reminded that the Council of Governors has agreed that Governors should join at least one Committee/Group in addition to their attendance at Council meetings. • RH asked anyone who would like to come forward to please contact him or AJ • RH mentioned that it had been noted that there was an increase in Governors attending Board Meetings and informed the Governors that these meetings will continue to be hybrid. <p>ii. Committee Minutes</p> <ul style="list-style-type: none"> • Access & Facilities Committee -14 July 2021 • Forward Planning Committee – 21 July 2021 • Patient & Public Involvement Committee – 16 August 2021 <p>iii. Corporate Schedule</p> <p>The Council of Governors received a draft copy of the Corporate Meeting Schedule for information</p> <p>AJ shared her screen to show the results of the elections. Governors had received the results previously.</p> <p>AJ informed Governors that the Induction Programme would follow.</p> <p>JW thanked RH and AJ for the update</p>		
10	CAMBRIDGESHIRE AND PETERBOROUGH SHARED CARE RECORD		
	<p>Reported: by AR</p> <p>AR explained that this is a career highpoint for him to see a shared care</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>record for patients put in place and was at a momentous point. Further work was on going and would be discussed at the next Patient and Public Involvement Committee meeting in November.</p> <p>AR shared a presentation of the overview of the Shared Care Record and led the Governor through the pre-circulated document.</p> <ul style="list-style-type: none"> • The Trust is now in the final stages of signing an eight year contract with Orion Health for ShCR. • The Governors noted that ShCR will bring together patient data currently held by the Trust's partners across the health and care system into one single patient record view for direct care purposes. <p>Benefits will include:</p> <ul style="list-style-type: none"> • Better co-ordinated and seamless care. • Quicker diagnosis and treatment. • More time to spend on clinical care. • Better health and care planning. <p>Five messages will be communicated between now and the end of March 2022:</p> <ul style="list-style-type: none"> • Introduction to ShCR. • ShCR implementation plan and Early Adopters. • User benefits and on-boarding users. • Reinforcing the benefits and how to use. • Next stages of ShCR. <p>AR informed the Governors that this presentation is also being cascaded through ICS level forums.</p> <p>Noted: The Council of Governors noted the presentation</p> <p>Questions:</p> <p>JW commented that one issue that patients faced was the same questions regarding medical history each time they are seen and asked if this would be solved</p> <p>AR replied that the expectation is that all information is continued to be added and that there are working groups looking at the common issues so they can be solved</p> <p>SBu commented that she was sold on the benefits but had a concern about security of data and what financial implications that a breach would have</p>		

Agenda Item (minute reference)		Action by Whom	Date
	<p>AR answered that this was a good question and that cyber- attacks are on constant radar. Cyber resilience standards and processes would be in place. This is taken very seriously and is part of on-going work</p> <p>RH commented that this was a major advance and been about 50 years in the waiting. He has enlisted for the group in October and urged anyone who was interested to join a pilot group.</p> <p>AR thanked RH for being an advocate.</p> <p>PS asked if there would be some form of flagging up for individuals who wished not to share certain information for certain reasons</p> <p>AR explained that Governance will be looking at patients who would wish to opt out and have a type of sealed envelope that could not be opened by everyone. There are implications to the care of that patient due to the decision. The Patient and Public Involvement Committee have involvement with this issue.</p> <p>JW thanked AR</p>		
11	QUESTIONS FROM GOVERNORS AND THE PUBLIC		
	No questions were put forward		
12	DATE OF NEXT MEETING – 17 November 2021		

The meeting finished at 12:00

Signed: 

Date: 17 November 2021

Royal Papworth Hospital NHS Foundation Trust
Council of Governors Meeting
Meeting held on 15 September 2021