COUNCIL OF GOVERNORS

Date: 7th April 2022 **Time:** 17:30 **Venue:** Zoom

AGENDA





Date of next meeting: 9th June 2022

Meeting:	Council of Governors Meeting	NHS
Date:	Thursday 10 th February 2022	Bolton
Time:	17:30-19:30	NHS Foundation Trust
Venue:	Via Zoom	

PRESENT:		
Donna Hall	Chair	DH
Alan Yates	Public Elected Governor	AY
David Barnes	Public Elected Governor	DB
David Edwards	Public Elected Governor	DE
Derek Burrows	Public Elected Governor	DB
Grace Hopps	Public Elected Governor	GH
lqbal Essa	Public Elected Governor	IE
Jack Ramsay	Public Elected Governor	JR
Jane Lovatt	Public Elected Governor	JL
Janet Whitehouse	Public Elected Governor	JW
Janice Drake	Public Elected Governor	JD
Kantilal Khimani	Public Elected Governor	KK
Karen Morris	Public Elected Governor	KM
Kayonda Ngamba	Public Elected Governor	KN
Margaret Parrish	Public Elected Governor	MP
Pauline Lee	Public Elected Governor	PL
Tracey Holliday	Staff Governor	TH
Alan Physick	Staff Governor	AP
Martin Anderson	Staff Governor	MA
Sue Moss	Staff Governor	SM
Ann Schenk	Appointed Governor	AS
Leigh Vallance	Appointed Governor	LV
Susan Baines	Appointed Governor	SB
IN ATTENDANCE:		
Alan Stuttard	Non-Executive Director	AS
Bilkis Ismail	Non-Executive Director	BI
Jackie Njoroge	Non-Executive Director	JN
Malcolm Brown	Non-Executive Director	MB

Non-Executive Director

Non-Executive Director

Chief Operating Officer

Chief Executive

Chief Nurse

Director of People

Director of Corporate Governance

Director of Strategic Transformation

Martin North

Esther Steel

Fiona Noden

James Mawrey

Rae Wheatcroft

Sharon Martin

Karen Meadowcroft

Rebecca Ganz

MN

RG

ES

FN

JM

KΜ

RW

SM

Sophie Kimber-Craig	Consultant Anaesthetist & Associate Medical Director for Clinical Governance (for item 7)	SKC
Victoria Crompton	Corporate Governance Manager	VC

1. Welcome

Attendees were welcomed to the meeting and a special welcome was given to the Governors who were attending their first meeting.

2. Apologies for Absence

Apologies for absence were received from Champak Mistry, Dawn Hennefer and Dipak Fatania.

3. Declarations of Interest

Rebecca Ganz	Chair, iFM Bolton
Esther Steel	Director of Corporate Governance, Blackpool Teaching Hospital FT/ Company Secretary, iFM Bolton

4. Minutes of last meeting

The minutes of the meeting held on 9^{th} December 2021 were approved as a correct record.

5. Matters Arising

An issue was raised regarding whether the Council of Governors, as it is a meeting held in public, should be recorded and shared on the Trust website.

After noting that a number of governors present did not consent to the recording of the meeting it was agreed to discuss further under Any Other Business.

It was noted this is the last meeting for the Director of Corporate Governance/Trust Secretary who was leaving the organisation to take up a position at Blackpool Teaching NHS Foundation Trust.

The Council of Governors formally thanked her for the wonderful job she has done over the last 14 years supporting and informing Governors.

6. Chair update and report from November Board of Directors

Governors received an update from the January Board of Directors meeting, noting the following key points:

- An update was received on the current operational issues and Covid-19 noting that staffing has been the main problem during the Omicron variant.
- Board members received the Learning from Deaths report which also included an update on Nosocomial work.
- A paper was presented by the Chief Nurse outlining the impact of Covid-19 Omicron Variant on Nursing and Midwifery Staffing Levels and Care Provision.
- An update was received on the Operational Plan arrangements.
- The Director of Corporate Governance presented a Lead Roles update.
- Board members approved the Anti-Slavery Statement.

Those Governors who have observed Board of Directors meetings encouraged others to attend a meeting indicating that the meetings were very interesting with lots of challenge from Non-Executive Directors.

7. Mortality Update

Sophie Kimber Craig, Consultant Anaesthetist & Associate Medical Director for Clinical Governance attended the meeting to provide a presentation to Governors on mortality (the presentation is appended to the minutes).

The following key points were noted:

- Bolton NHS FT remains as an outlier for SHMI and HSMR, despite seeing some recent improvements.
- The data recorded when a patient is admitted into hospital affects the mortality indices. This data is obtained from the medical records, if the information has not been recorded properly within the patients notes then it cannot be extracted in a meaningful way.
- There is a significant clinical value in being aware of the overall picture of the patient including why they were admitted as an inpatient and their medical history, as well as noting the impact-as all of this information can have on their mortality indices.
- It is important that mortality data is accurate as this will give a reflection of how well patients are being treated within the Trust.
- There are a number of workstreams which look into quality of care. These include the Trust is reviewing how it responds to deteriorating patients and work is also being done to recognise and respond to sepsis.
- All of the workstreams report into the Mortality Reduction Group and cases where there are concerns are reviewed by the Learning from Deaths Committee.
- It is a priority in the organisation to do the right things for patients and to represent what we are doing correctly.

Following some discussion around the SHMI and HSMR figures, it was agreed that due to the complexity of the subject it would be beneficial for those Governors who are interested to attend a masterclass which would be facilitated by SKC.

Masterclass on SHMI and HSMR to be arranged with SKC.

VC COG/22/01

Resolved: Governors noted the mortality update

8. Operational Update

The Chief Operating Officer provided an operational update, the key points were:

- An increase in cases in January saw us experience the highest number of COVID inpatients of any of the previous waves which was 171.
- As part of our plans for the anticipated rise in admissions, we put plans in place for surge capacity in N block. A team at the Trust made 25 beds available on N3 for internal escalation, and if necessary, additional space in the same area to support this surge at a GM level.
- Staffing was a huge challenge for us and it meant our ability to provide continuous care was under constant pressure.

- Modelling and our own stats show that London and the NW have now passed the peak. Cases do appear to be on the downward path.
- The oximetry at home pathway has played a vital role in helping to provide care for people with COVID in the community, and helped us recognise when people need to come into hospital for more support.
- Approximately 120 members of the military were deployed across GM. We received 30 volunteers who are supporting teams in A&E, Flow and Pharmacy, and delivering FIT testing and portering services.
- We have continued to restrict visiting, we are now in a position to reintroduce visiting, in a safe phased approach. There will of course be caveats in order to maintain safety, and there will be a system for relatives and friends to book a visiting slot.

Elective recovery programme

- As a result of the challenges faced across the system the decision was taken in early January to pause our elective programme across GM.
- As of the beginning of February, we have now restarted all of our elective programme, and the majority of our programmes were restarted in under three weeks.
- Unfortunately, waiting lists are not where we want them to be. Around 1 in 10 people in our population are waiting for treatment, and we already know that our communities are some of the most deprived and vulnerable in the country. This is the highest number since the pandemic began, and that number keeps on growing.
- Our aim is to make sure those who have been waiting significant amounts of time for treatment and those with the most urgent clinical need are prioritised.
- We have contacted all patients who are waiting for treatment to discuss their condition with them, and the next steps, and every patient is being supported with access to the GM Waiting Well resource, to help them stay as well as possible whilst they wait for treatment.

Ambulance handover times were discussed an it was confirmed that work is being done in conjunction with NWAS to look at how the triage system can be improved. An ambulance handover area was previously created and this did help with the issues, but Covid has impacted on the improvements that were seen with there being issues around creating an area with the appropriate infection control requirements.

In response to a query it was confirmed 242 members of staff have not received two Covid vaccinations. 67 of the 242 staff have received their first dose and will be having their second. Some of these members of staff are exempt.

Governors asked that they are informed when visiting restrictions are lifted as this is a topic they are regularly asked about.

It was advised that at the end of 2021 a visiting pilot took place on the stroke ward with one named person being able to book a visiting slot. They were required to take a lateral flow test before attending and wear a face covering. The pilot went well, but there was an outbreak on the ward caused by a visitor. This resulted in visiting being paused and then the Omicron wave began, but from next week a phased approach to visiting will commence in GM. This will begin once again on the stroke unit, and will have to be done carefully and safely.

There have been some areas where visiting has been allowed throughout the pandemic such as maternity and paediatrics. Patients with learning disabilities have also been allowed a named visitor.

Resolved: Governors noted the operational update

9. Governors Quality Sub-Committee Feedback

Governor Strategy Committee

Governors were provided with an update from the recent Governor Strategy Committee where updates were given on the operational plan, strategy engagement and charity.

It was agreed that the Charity presentation will be circulated to Governors along with the details of how to sign up to donate.

10. Governor Workplan

The Director of Corporate Governance presented the workplan which had been prepared with he Chairs and Vice Chairs of the Governor subcommittees.

Governors were reminded that anyone can attend the subcommittees and the agenda and minutes of these meetings are circulated to all.

11. Proposed resolution: that representatives of the press and other members of the public be excluded from the remainder of the meeting having regard to the confidential nature of the business to be transacted.

12. Update to Governor Concerns

As concerns had been raised regarding Donna Hall, Chair and Bilkis Ismail, Senior Independent Director/Non-Executive Director they left the meeting for the Part 2 discussions and Jackie Njoroge, Deputy Chair took the Chair.

An update was provided to the concerns which have previously been raised. There was a lengthy discussion regarding the concerns which were raised with the majority of Governors accepting the updates provided. Unfortunately, a Governor continued to question the systems and processes in place and the conversation became particularly difficult. It was therefore agreed to take the discussions off-line and to circulate a Survey Monkey questionnaire to Governors to establish the general thoughts around topics such as having an nhs.net e-mail addresses for Governors and the recording of the virtual Council of Governor meetings for sharing publicly.

Resolved: the update was noted.

13. Any other business

There was no other business discussed at this meeting.

14. Next meeting

The next Council of Governors meeting will take place on the 7th April 2022.