Council of Governors Meeting, 22nd April 2020, 4.45pm – 5.30pm, Virtual Meeting (22/04/2020)

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Questions and Answers - for information



COUNCIL OF GOVERNORS

Meeting to be held on Wednesday 22nd April 2020 4.45pm to 5.30pm, via Virtual Meeting

AGENDA

1.	Welcome, apologies and opening remarks

- 2. **Minutes of meeting held on 29th January 2020** attached (CG/20/08)
- 3. Matters Arising
- 4. Reflection session on Board of Directors meeting
- 5. **Governors' reports –** to note and for information

1.	Lead Governor report	attached (CG/20/09)
	Heather Byron	

- **2. MeDIC 11**th **February 2020** attached (CG/20/10) Samantha Quaye
- **3. Quality and Engagement 25th February 2020** attached (CG/20/11) *Placida Ojinnaka*
- 6. **2020 Governor Election process** for information attached (CG/20/12)
- 7. **Questions and answers –** for information attached (CG/20/13)
- 8. Any other business
- 9. Dates and times of next meetings

In the circumstances of the Covid-19 pandemic the Chairman will hold virtual meetings with Governors. Provisional dates, with details to follow are:

Wednesday 13^{th} May 5.30-6.30 pm Wednesday 24^{th} June 5.30-6.30 pm

Arrangements for the next meetings due to be held on 22nd July 2020 in the Robens Suite, Guy's Hospital will be confirmed in due course:

Board of Directors meeting 3.45 pm - 5.30 pmCouncil of Governors meeting 6.00 pm - 7.30 pm

Council of Governors meeting, 22nd April 2020 Agenda

Chair Approved



Public Council of Governors

Minutes of the meeting held on Wednesday 29th January 2020 at Robens Suite Guy's Hospital

Present: Devon Allison Margaret McEvoy

John Balazs Betula Nelson

Elaine Burns Placida Ojinnaka – *via*

Heather Byron
John Chambers
Marcia Da Costa
Annabel FiddianGreen

Lucilla Poston
Lucilla Poston
Mary Stirling
Rachel Williams

Laura James Peter Yeh
John Knight Simon Yu Tan – *via telephone*

Paula Lewis - Christine Yorke

Franklin

Apologies: Tahzeeb Bhagat Anita Macro

Robert Davidson Matthew Patrick
Jacqui Dyer Samantha Quaye
Jane Fryer Sue Slipman
Tony Hulse Warren Turner

Alice Macdonald

In Attendance: Sir Hugh Taylor (Chairman)

Dr I Abbs
Mr P Cleal
Mr J Findlay
Dr F Harvey
Ms J Parrott
Mr J Pelly
Prof R Razavi
Dr S Shribman
Ms J Screaton
Mr M Shaw
Dame E Sills
Dr P Singh
Dr S Steddon

Attendance: Ms E Youard (Secretary)

Mr S Davies Mr A Gourlay Ms A Knowles

Mr S Weiner

CG/20/01 Welcome apologies and opening remarks

Apologies had been received from Ms S Bowler, Ms B Bryant, Ms V Cheston, Ms A Dawe, Ms M Ridley, Mr D Waldron and Professor J Wendon.

CG/20/02 Minutes of the meeting held on 23rd October 2020

The minutes of the meeting were approved as a true record.

CG/20/03 Matters arising

The question of Governor opportunity to ask questions of the annual audit which had been raised at the October meeting would be followed up.

CG/20/04 Reflections Session on Board of Directors Meeting

The Lead Governor congratulated the Trust Board on the positive progress that had been made in partnership with King's Health Partners and the Royal Brompton and Harefield NHS Foundation Trust (RBH), as reflected in the presentation received at the Board of Directors meeting.

The development of funding flows and financial control working at South East London system level was discussed. The shift away from a national tariff-based financial model would be a significant change. It would require leaders and organisations to work collaboratively to deal with short-term allocations, to introduce new funding schemes, and to find sustainable solutions over the medium-term. The Trust was ideally placed to offer its potential as an innovation hub and environment for attracting research investment.

The Trust's Happy Healthy 2020 campaign attracted Governor interest. This was designed to showcase a range of support packages and benefits for staff. It had been running for some years, supported by Guy's and St Thomas' Charity. Activities promoted included healthy eating and living, physiotherapy and mental wellbeing support. The Trust had submitted its application for London Living Wage accreditation.

Some Governors had attended a training session on Governors and accountability run by NHS Providers on 29th January for Governors from local NHS Foundation Trusts. The Trust's model for engagement between the Governors and Trust Board includes accountability sessions for discussing areas of common interest.

CG/20/05 Report from the Nominations Committee

The Nominations Committee had met on 15th January 2020 to consider the proposal to extend the Chairman's term of office for another year. The Chairman's contribution since April 2018 had been evaluated. There was strong consensus on the positive findings which reflected the Chairman's exceptional leadership of the Trust Board. It was accepted that the evaluation process had been suitable and accorded with November 2019 national guidance. Since no change to the agreement reached in April 2018 had been sought, the Council of Governors endorsed the Nominations Committee's unanimous recommendation that the Chairman should serve out his agreed office to the end of January 2021.

A further meeting with the Nominations Committee to discuss succession planning would be carried out. The Chief Executive had agreed to advise the Nominations Committee on the context.

CG/20/06 Lead Governor Election

Devon Allison had come to the end of her second term as Lead Governor on a nominated non-voting basis. An election was held during the meeting in which the Governors elected Heather Byron to serve as Lead Governor. All candidates were thanked for standing. On behalf of the Council of Governors, the Chairman thanked Devon Allison for her contribution as Lead Governor.

CG/20/07 Research in Women's Health and Research in the NHS

Governors received presentations, from Professor Lucilla Poston and Professor Lucy Chappell, from KCL's Department of Women and Children's Health. One presentation covered women's health research being carried out across King's Health Partners. The second focused on the contribution research makes to NHS services. A new Institute of Women and Children's Heath is being formed to develop the potential for joint working between the NHS and university.

Activities focused on premature birth were highlighted to illustrate how partnership between NHS services and academia supports NHS consultants with teaching and learning, and facilitates academics in working within the clinical service setting, Bringing the different viewpoints together had already helped create a strong skill base. It continues to facilitate a service setting in which research can be translated into clinical practice. This is particularly important in the Trust's local setting in which there are high levels of deprivation and mothers from a wide range of international backgrounds, high levels of clinical support and increased risk of stillbirths and poor health. As an example of research contributing to clinical service improvement, KCL's award winning Prematurity Clinic Model has been adopted and rolled out across the NHS complete with a package of new tests for prematurity risk. KCL runs a national training course for midwives, doctors and sonographers to support the implementation of prematurity clinics.

As a second KCL example, the development of placental growth factor testing through a simple blood test has helped accelerate diagnosis of the risk of pre-eclampsia to enable pregnant women to receive the most appropriate care. This had been nationally recognised in NICE guidance recommendations in 2016 and 2019. It derived from a background of team work embedded into clinical care, together with positive rates of recruitment of women into studies at the Trust.

The presenters showed how Trust Governors could help encourage Trust research as a priority alongside clinical work. The research community should include all professional groups. How research could be built into career progression was an area for development. Integrating research into a broader agenda for population health was a further area to be tackled. The diversity of the South East London population enabled KHP to have global reach, while touching local peoples' lives.

CG/20/08 Governors Reports

Lead Governor Report

The Lead Governor thanked Governors for their participation and engagement in Committees and Working Groups. Devon Allison reflected on the dialogue she had

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been leading alongside UCLH with Transport for London to influence thinking on improving patient journeys using patient transport to reach NHS services. Devon had been leading a proposal for a pilot scheme to test the impact of opening use of bus lanes in specified hours for patient transport. The correspondence had been shared with Governors. A Transport for London response was awaited.

Devon had found the six and a half years during which she had been a Trust Governor and Lead Governor fascinating and rewarding. She had observed pride and care across the Trust. She extended particular commendations for the Trust Workforce team's work for school engagement, and the Essentia team's support for better access and patient transport. Devon was pleased that the Governor-produced Listening Line would continue.

Membership Development, Involvement & Communications

The notes of the Membership Development, Involvement & Communications (MeDIC) Working Group's meeting held on 5th November were noted. The meeting had looked at progress since June, and agreed to select priorities to move the membership strategy forward.

Quality and Engagement

The Quality and Engagement Working Group (QEWG)'s 3rd December meeting had focused on young people's transition from children's to adult services, the Governor access scoping review, and a patient and public engagement update. In due course QEWG proposed to look at cancer strategy as well as the emerging joint clinical strategy with KCH.

It was recommended that good practice elsewhere in London and in wider public services should be sought with respect to widening access initiatives.

Service Strategy

The Service Strategy Working Group (SSWG)'s meeting on 7th January had taken stock of progress with business planning for 2020/21. It had also received a presentation on the development of the Trust Commercial Strategy for 2020-25. The Working Group had committed to introduce virtual access into meetings to assist Governors to engage.

CG/20/09 Questions and Answers

The record of answers to Governors' recent questions was noted.

CG/20/10 Any Other Business

There was no other business.

CG/20/11 Date and Time of Next Meeting

The next meetings would be held on 22nd April 2020 in the Robens Suite at Guy's Hospital: Board of Directors meeting from 3.45 pm to 5.00 pm; and Council of Governors meeting from 6.00 pm to 7.30 pm.

(Post meeting note: it has subsequently been arranged that a virtual meeting would be held during the conditions of the Coronavirus outbreak.)

Council of Governors Meeting, 22nd April 2020 Chair approved draft CoG minutes, 29th January 2020

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This paper is for:		(Sponsor:	Chairman		
Decision Discussion		7	Author:	Lead Governor		
		Ī	Reviewed by:			
Noting	х	(CEO*			
Information		1	ED*			
	<u>.</u>	[Board			
			Committee*			
		<u>-</u>	TME*			
		(Other*			

1. Lead Governor's Report

- 1.1 In this, my first Lead Governor report, I want to open by thanking my governor colleagues again for their support and for bringing so many excellent topics for discussion into our first informal meeting a few weeks ago. I also want to note my thanks and respect to Devon Allison my predecessor for executing the role with such passion during her term and to Sir Hugh Taylor and Elizabeth Youard for their support as I transition into the role.
- 1.2 However, the focus of my report is naturally on the unprecedented times within which we find ourselves. I want to again thank Governor colleagues for their flexibility in how we are engaging and attending meetings virtually, as well as the many offers of support that have been made. I know that I speak for those colleagues when I say a massive thank you to all of the teams who are working tirelessly to ensure the Trust is able to provide its vast range of services and excellent care during this pandemic both across our sites and in the community.
- 1.3 This pandemic has inevitably brought challenges but I wanted to close in recognising the incredible resilience that everyone is demonstrating and reflect on how as a community across the Council of Governors and the Board of Directors we will be closer at the end of this. I applaud the pace at which Corporate Affairs and our Executive teams, supported by Beverley Bryant Chief Digital Information Officer and her team, have been able to pivot our traditional ways of working, to allow us to continue to hold these meetings and stay in touch, at such a difficult time.

Tab 5.1 Lead Governor report

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Council of Governors		NHS
		Guy's and St Thomas'
Membership Development, Involvement and Communications Working Group Report, 11 th February 2020	22 nd April 2020	CG/20/10

This paper is for:		Sponsor:	MeDIC Working Group
Decision		Author:	CEO Planning Officer
Discussion		Reviewed by:	Director of Corporate Affairs
Noting X Information		CEO*	
		ED*	
		Board Committee*	
		TME*	
		Other*	

1. Welcome and apologies for absence

The meeting was attended by: Martin Bailey (Public Governor); Anzila Fida (Membership and Governance Coordinator); Laura James (Staff Governor); Paula Lewis-Franklin (Public Governor); Margaret McEvoy (Public Governor); Adeola Ogunlaja (CEO Planning Officer); Samantha Quaye (Working Group Lead and Public Governor); Philippa Yeeles (Patient and Public Engagement Specialist); Elizabeth Youard (Director of Corporate Affairs)

Dial In: John Knight (Patient Governor); Placida Ojinnaka (Patient Governor); Mary Stirling (Patient Governor)

Apologies: John Chambers (Staff Governor); Michael Carden (Head of Media and Corporate Communications); Paul Cleal (Non-Executive Director); Marcia Da Costa (Public Governor); Tony Hulse (Staff Governor); Betula Nelson (Patient Governor)); Lucilla Poston (Stakeholder Governor); John Powell (Patient Governor); Simon Yu Tan (Patient Governor); Peter Yeh (Public Governor)

2. Notes of the meeting held on 5th November 2019

The minutes of the meeting held on 5th November 2019 were agreed as a true record of the meeting by all present who attended.

3. Matters Arising

There were no matters arising.

4. Membership development discussion on next steps:

The Membership Office had been working collaboratively with the Patient and Public Engagement Team on membership development planning and had provided a presentation for discussion at the meeting.

The meeting discussed the current patient and public membership breakdown by gender, age and ethnicity. MeDIC members were interested in the overall representation of the local population and how the membership numbers and diversity of members compared with other Foundation Trusts. The Membership Office would be getting in touch with other Trusts to find out more about their membership. MeDIC members were also interested in the diversity of the online membership application form and asked for further consideration to be made for members who do not have English as their first language, and for members who do not identify as either male or female. Disability was also a key area which needed focus. The Membership Office would take advice from the Trust's diversity lead on the best approach.

A summary of the findings from the membership survey which was carried out in the summer of 2019 was provided. The findings were mostly positive with 42% of the respondents indicating that they would like to be more active and involved as members, and 47% of the respondents would like to help make service improvements, take part in Trust activities, give advice on patient information and give views on how services are provided. The Membership Office would work closely with the Patient and Public Engagement Team to develop mechanisms to support membership participation with support from Governors. The meeting also discussed the gaps in the content of the membership survey report and membership database which would be explored further with CIVICA, who provided the survey report.

MeDIC members agreed that the possible next steps for exploration could be to explore and follow up with CIVICA on the membership survey report which had some areas for refinement and the possibility of a deeper dive into the findings, benchmarking with other Foundation Trusts, reviewing the membership leaflet and online application form, and identifying priorities that would make the greatest impact. A Task and Finish Group would be developed to support this and the suggested membership development priorities were to be fed back to the next MeDIC meeting in June.

5. 2020 Members' health seminar topics

The topics and dates of the 2020 Members' Health Seminars had been agreed as follow:

Council of Governors Meeting, 22nd April 2020 MeDIC Working Group Report, 11th February 2020 Ophthalmology - Tuesday 2 June, 6-7:30pm, Robens Suite, Guy's Hospital

Genomics - Tuesday 14 July, 6-7:30pm, Robens Suite, Guy's Hospital

Respiratory – Tuesday 15 September, 6-7:30pm, Shepherd Hall, Ground Floor, St Thomas

Movement & Exercise (title subject to change) – Tuesday 10 November, 6-7:30pm, Robens Suite, Guy's Hospital

(Post meeting note: arrangements for the health seminars would be reviewed in light of the current Covid-19 pandemic.)

6. 2020 Council of Governors election timetable - Community Staff Governor

The current Governor for the Community Services staff group, Anita Macro, would reach the end of her first term on Monday 31 August 2020. A draft timetable for the election was provided for the meeting for information. An update regarding the election would be provided at the next Council of Governors meeting on 22nd April 2020.

There was a discussion about the promotion of the election and communications with community staff. Suggestions made were developing a staff governor film ahead of the election, having stalls at Community Services events and speaking with the Community Services leads about further options for engagement and communication.

7. Listening Line – latest issue 7

Listening Line Issue 7 had been finalised and sent for printing. Copies would be distributed to patient and public members by post along with the February issue of the GiST magazine.

8. Any other business

Margaret McEvoy was interested in supporting the Corporate Affairs team if there was any revision being made to the Trust Constitution.

It was agreed that introducing access to the meeting by dial in was a positive way forward. There was further work to be done to open up the meeting in a more inclusive way.

9. Date of next meeting

Tuesday 23rd June 2020, River Room, Gassiot House, St Thomas', 5:30-7:00pm.

(Post meeting note: arrangements for the next meeting would be reviewed in light of the current Covid-19 pandemic.)

Council of Governors		NHS
		Guy's and St Thomas' NHS Foundation Trust
Quality and Engagement Working Group Report, 25th February 2020	22 nd April 2020	CG/20/11

This paper is for:			Sponsor:	QE	WG
Decision		Author:	Ма	rk Tsagli	
		Reviewed by:	Placida Ojinnaka		
Noting		CEO*			
Information)		ED*		
			Board Committee*		
			TME*		
			Other*	Х	Council of Governors

^{*} Specify

1. Welcome and apologies for absence

This report details the meeting of the Quality and Engagement Working Group (QEWG) which took place on 25th February 2020 at the Park Room, Education Centre, 75 – 79 York Road, SE1 7NJ.

In attendance:

This meeting was attended by: Sarah Allen (Head of Patient Experience), Margaret McEvoy (Public Governor), Paula Lewis-Franklin (Public Governor), Alice Godmon (Healthwatch - Southwark), Tony Hulse (Staff Governor), Alison Knox (Deputy Director of Quality and Assurance), Placida Ojinnaka (QEWG Chair), Georgina Parker (Patient Feedback Facilitator), John Powell (Public Governor), Anna Grinbergs - Saull (Patient and Public Engagement Specialist), Mark Tsagli (Patient Experience Specialist)

Apologies were received from:

John Balazs (Lambeth CCG), Tahzeeb Bhagat (Staff Governor), Elaine Burns (Public Governor), Andrea Carney (Trust Patient and Public Engagement Manager, Marcia Da Costa (Public Governor), Annabel Fiddian-Green (Public Governor), Felicity Harvey (Non-Executive Director), Betula Nelson (Public Governor), Priya Singh (Non-Executive Director), Simon Yu Tan (Patient Governor), Peter Yeh (Public Governor).

2. Notes from the last meeting

The notes were approved as an accurate record of the last meeting. The Lead Governor suggested excluding the name of the room from future minutes due to the possibility of last minute room changes.

3. Governor and Healthwatch involvement in the development of 2020-21 Quality Priorities and a Governor selected priority for auditing.

The Deputy Director of Quality and Assurance introduced the papers; Quality Priorities 2020-21 and Indicators for External Audit.

3.1 Quality Priorities 2020-21:

Summarising the key aspects of the Quality Priorities, the Quality Lead then drew Governors attention to the following:

- The Quality Priorities which are short term goals to support the delivery of goals in the trust's 5-year Quality Strategy.
- The Quality Priorities are based on 3 key domains; Patient Safety, Clinical Effectiveness and Patient Experience.
- Extensive data resources were used to inform the priorities; this included patient feedback, incident reports, staff surveys, PALS, Complaints and Patient Outcome data.
- The 2020-21 Quality priorities are due to be selected and Governors input would be welcome to help finalise the proposed priorities.
- The Deputy Director of Quality and Assurance advised that it is a requirement of the Trust Board (working in consultation with key stakeholders CCG, Healthwatch etc.) to finally approve all confirmed 9 Quality Priorities.

Governors welcomed the proposed priorities and shared their views on a few of them.

Improving mental health care awareness: Governors supported this priority. It was felt mental health
challenges transcend the various patient demographic profiles and agreed this should be focussed on.
This view was also shared by the representative from Healthwatch as it was felt this is also in line with the
'Every Contact Counts' initiative.

- Improve learning from deaths: The group supported this priority and felt it was equally important to involve families and friends in investigations to improve the compliance and the associated learning from this.
- Improve the use of insulin across the Trust: This is aimed at helping reduce the number of patients who suffer from hypoglycaemia in hospitals. Governors felt staff awareness of this was low and there was an opportunity to improve levels of awareness among nurses.
- Governors agreed that contacting the right people in the Trust remains a challenge and an area that is worth considering. They additionally raised the challenges with contacting staff via email.

In response to challenges about contacting the Trust on telephone and on email, the Head of Patient Experience outlined work that the Outpatient Transformation work stream was undertaking and also pointed out that the upgrade of the telephone infrastructure should help with this.

In reference to the question about improving email contact, she mentioned that further work was required to understand the appetite for this as recent research undertaken by the Patient & Public Engagement and Patient Experience teams for the Digital Patient Journey (DPJ) team based on about 240 patient interviews, found 25% of patients responding did not want to interact with the Trust using digital platforms.

The Head of Patient experience also shared the Chair's concerns about calls received from the Trust with no caller identification, a situation which can be frustrating for patients. Although a longer term project, she suggested raising this with the telephony team to further understand what could be done.

3.2 Indicators for External Audit

The Deputy Director of Quality and Assurance followed on the discussion with a summary of key points from the tabled paper 'Indicators for external audit'. Explaining the rationale for the audit process, Governors were informed that this process is to select an additional indicator to check the accuracy of data we report on nationally. Two of the indicators are mandatory and from the previous year's Quality Account. Governors have the opportunity to select an additional indicator for external audit.

In reference to the Governors choice, she summarised the various choices available to Governors, highlighting the advantages and disadvantages of each.

The group recognised that the 62 - day cancer wait target was an indicator to consider as the Trust continues to struggle to meet this target. This Director of Quality and Assurance in response supported this suggestion and reminded the group about the Trust's performance nationally on this measure.

The Chair thanked the group for their suggestions. It was resolved that further comments should be sought from other Governors who were unable to attend the meeting for the group to arrive at decisions on both the Quality Priorities and the choice indicator for external audit.

Action:

3.3	The Membership Coordinator to email the Quality Priorities and Indicators the wider group of
	Governors' for suggestions / feedback by the 13th March for Quality Accounts.

4. Outcome of QEWG 2019 work planning session

The Head of Patient Experience, Patient Public and Engagement Specialist and Patient Feedback Facilitator facilitated the work planning session for Governors to identify topics for the coming year. The session was structured around the Trust's three strategic priorities - Patients, People, and Partnerships. An overview of areas of work supported by the Quality and Assurance, Patient Experience and Patient and Public Engagement Teams were also discussed and Governors highlighted the following as areas of interest to consider for the forthcoming year 2020/21.

Topic	Patients	People	Partnerships
Risk Appetite			
 Board Assurance Framework 			
 Security and emergency planning 		•	
Organisational resilience			
 Nursing vacancies and impact of Brexit 			

Council of Governors Meeting, 22nd April 2020 Quality and Engagement Working Group Report, 25th February 2020 Tab 5.3 Quality and Engagement 25th February 2020

 South London Genomics Hub Update on the new clinical service Discuss structure, partnership working across region Discuss role of "champions" 	*		•
 Women's Services Services moving to Evelina Strategic Business Unit 	•	•	
 Mind and Body Programme Take-up of services available for staff (People) Public Health/Prevention (patients) 	*	•	
Outpatients Transformation • Update on progress of service transformation	•		
Royal Brompton & Harefield and King's Health Partnership Update on merger at appropriate point	•	•	•
 Integrated Care SBU Partnerships with healthcare providers in South East London 	•	•	•

The Head of Patient Experience advised that two of the topics suggested fit more within the remit of the Service Strategy Working Group (SSWG). The Head of Patient Experience and the Trust Patient and Public Engagement Manager will raise this with representatives of the SSWG.

The feedback and suggestions provided from this planning session will be circulated and both leads will work with the QEWG Lead to draft the work plan for members to review. Council of Governors Meeting, 22nd April 2020, 4.45pm – 5.30pm, Virtual Meeting-22/04/20

Tab 5.3 Quality and Engagement 25th February 2020

5. Patient Experience (PE) and Patient and Public Engagement (PPE) updates

The Head of Patient Experience gave an update on a number of areas: The following points raised in the discussion were noted:

- The Quarterly Patient Experience report presented at QEWG will now move to a 6-monthly cycle. The next report is currently being worked on and will be ready for the next QEWG meeting in May 2020. The Head of Patient Experience will explore how updates on any developments can be shared with the group in between meetings.
- Friends and Family Test (FFT): The FFT question is changing from the 1st April 2020. NHS England after extensive consultation have changed the question asking how likely patients are to recommend the Trust based on the care received to one asking them to rate their overall experience of treatment and care.
- It was also reported to the group that the 48-hour rule on when patients can be asked the FFT question will being removed. It is expected that with the 48 hours rule being removed, the Trust's response rates in Inpatient and Emergency Department's settings of care will improve as the Trust will no longer have a specified time for patients to be asked the FFT question.
- The Head of Patient Experience further cautioned that response rates may drop during the transition phase after which this is expected to return to normal levels.

The Public and Patient Experience Specialist summarised key points from the Patient and Public Engagement Update report.

- The PPE team are working with the Quality Improvement team to make sure PPE skills are included in the Trust's Quality Improvement Programme including the range of training being developed and delivered.
- An overview of PLACE 2019 results is now available and have been published on the Trusts webpages. The team are working with Essentia to identify how Essentia responds to actions from this assessment.
- Royal Brompton and Harefield and King's Health Partners programme is continuing to deliver patient and public engagement activities to support the partnership's work. The intention to bring together Royal Brompton and Harefield and Guy's and St Thomas' NHS Foundation Trusts through a merger was

announced in January. However the future configuration of services through the proposed partnership will be subject to public consultation, led by NHS England.

In discussion of the Call Quality Assessment (CQA) Summary Report Q3 2019/20, the following issues were raised:

- Slight decline in scores in comparison to quarter 2 mainly in relation to the starting of calls, staff offering assistance, and listening carefully. Reports have been sent to the Call Centre Manager with a meeting arranged to discuss how the team can work on improving on the results.
- Patient Transport assessments are now being delivered by the Patient Transport team rather than the call centre. The team will be reviewing whether and how they would like continue with the CQA programme.

6. Reports and updates from committees (those recently attended by Governors)

Quality and Performance Committee:

Notes tabled and had also been circulated to members shortly before the meeting.

Cancer Services Committee,

The Governor Representative attending the meeting for the first time shared his observation of how difficult it can be to follow discussions during the meeting, particularly as a first time attendee with non-clinical background. The Head of Patient Experience suggested having relevant information on documents and topics to be discussed to be shared in advance to the Governor Representatives attending.

End of Life Care Committee (EOC):

No notes tabled

7. Matters arising from the last meeting and any other business

The lead informed the group attending committees to ensure reports are sent to the Membership Coordinator in reasonable time to enable this to be reviewed and discussed at the QEWG meeting.

8. Date of next meeting:

Wednesday, 23rd September 2020, Education Centre, 75 – 79 York Road, SE1 7NJ.

This paper is for:		Sponsor:	Chairman	
Decision		Author:	Director of Corporate Affairs	
Discussion			Reviewed by:	
Noting		K	CEO*	
Information			ED*	
	•		Board	
			Committee*	
			TME*	
			Other*	

1. Context

- 1.1 This paper seeks Governors' support for covering a Staff Governor vacancy on the Council of Governors during the COVID-19 pandemic until the time is right to hold an election.
- 1.2 One term of office for the Community Staff Governor expires on 31st August 2020. This is the only election due in 2020.
- 1.3 Under ordinary circumstances the organisation of a 2020 staff governor election would be underway. Preparatory work on selecting an election services provider was carried out in February 2020. However, holding a staff election across Trust staff in spring early summer 2020 is not the right thing to do while Trust staff are prioritising service delivery in a situation challenged by the COVID-19 outbreak.
- 1.4 National guidance recognises the need to prioritise capacity in the pandemic. Foundation Trusts are free to stop or delay governor elections.
- 1.5 The Community Staff Governor position is currently held by Anita Macro. Should Governors wish to extend the invitation, Anita has kindly offered to stay on beyond the normal expiry of her term on 31st August 2020.
- 1.6 This proposal is not to create a precedent, but to avoid a vacancy in these exceptional circumstances until the situation is more settled.
- 1.7 An election would be held when conditions are more favourable.

2. Proposal for Governor endorsement

2.1 The Council of Governors is requested to endorse the proposal to invite Anita Macro to continue as Community Staff Governor beyond the normal expiry of her term on 31st August 2020 because of the exceptional situation. This continuation is only until an election can be held in more settled conditions. Anita is to be thanked for making this offer.

Council of Governors		Guy's and St Thomas' NHS Foundation Trust	
Questions and Answers	22 nd April 2020	CG/20/13	

This paper is for:		Sponsor: Corporate Affairs	
Decision		Author:	
Discussion		Reviewed by:	
Noting		CEO*	
Information	X	ED*	
		Board Committee*	
		TME*	
		Other*	

^{*} Specify

1. Summary

This report provides a list of queries which have been raised by governors. Answers are included or are ongoing and will be provided to governors once available. We would like to encourage governors to continue to raise questions.

Note: Governors are asked to send any queries to the CEO Planning Officer or the Director of Corporate Affairs and not directly to directorates. We will log questions and ensure they are properly handled.

2. Request to the Council of Governors

The Council of Governors is invited to note the report.

3. Detail/Commentary

Matters of interest/question	Issue number & date raised	Responses	Progress/further information	Completed date
I have been worried about the removal of hand sanitisers from the reception at Guy's. I raised this at a different meeting in September and was told that they were removed because unfortunately some people took them for their alcohol content. They are available in all the different departments but not in reception. Would you agree with me that in the current climate we should have hand sanitisers in Guy's reception, and near the door, perhaps with volunteers encouraging everyone to use them? They are installed in the Cancer Centre near the check in desks.	20/00001 2020-02-19 Christine Yorke	Proposal shared with relevant leads. Action has been taken, with a current high level of focus on hand sanitisers. 2020-04-16		
A question about the daily supply lorry coming from a new hub in Dartford. I come from Kent, and it takes a long time to drive from Dartford to London Bridge, with the engine running in constant traffic jams, which seems to negate the idea of a greener footfall. I wondered whether a closer hub could not have been found?	18/20043 2019-11-28 Christine Yorke	The Trust intends to adopt electric trucks to ship consolidated deliveries from the new Supply Chain Hub with pilots scheduled for early this year. The main volume deliveries are overnight to avoid day time traffic and align with the Trust's just-in-time overnight put-away service model. The Dartford location was selected due to close proximity to the M25 and availability of a new build multi-purpose facility. Alternative site options were explored but locations near into Central London did not offer the same space or standard of facility required. 2020-01-24 The Trust Supply Chain Hub is designed to consolidate 90% of the 40,000 truck deliveries into the two hospital sites at London Bridge and Westminster Bridge and so improve local air quality. Later this year our logistics partner CEVA Logistics will deploy hybrid electric vehicles to transport the consolidated deliveries from Dartford into the two Trusts. The Supply Chain Hub is also currently operating as the central distribution hub for supply of PPE across South East London and the Kent Region. 2020-04-17		

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Please can DPJ share the list of as well as	18/20024	Refer to the Patient & Public Engagement report to the Board on 23-10-		
demographics within, of the groups /	2018-07-25	2019. 2020-01-23		
audiences that it has consulted to	Heather			
understand what patients want from their	Byron			
'digital' journeys at GSTT in the future? A				
recent paper presented to the digital				
committee made a number of patient				
statements and it would be useful to				
understand how representative of our				
overall patient group those views are, or if				
they are specific to certain groups.				