



# **Public Council of Governors Meeting**

**Wednesday 28<sup>th</sup> April 2021, 6pm to 7:30pm  
Held Virtually**

## COUNCIL OF GOVERNORS

Wednesday 28<sup>th</sup> April 2021 from 6pm to 7.30pm  
Held on MS Teams

### A G E N D A

1. Welcome, apologies and opening remarks
2. Declarations of interest
3. Minutes of meeting held on 27<sup>th</sup> January 2021 attached (CG/21/06)
4. Matters Arising
5. Reflection session on Board of Directors meeting
6. Nominations Committee Report attached (CG/21/07)  
*Nominations Committee*
7. Council of Governors 2021 Elections Update attached (CG/21/08)  
*Jessica Dahlstrom*
8. Southwark and Lambeth Together presentation  
*Sarah Austin*
9. Governors' reports – to note and for information
  - Lead Governor's Report attached (CG/20/09)  
*Heather Byron*
  - MeDIC, 2<sup>nd</sup> March 2021 attached (CG/20/10)  
*Samantha Quaye*
10. Any other business

*The next meetings are due to be held on 28<sup>th</sup> July 2021 and will be confirmed in due course:*

*Board of Directors meeting 3.45pm – 5.30pm*  
*Council of Governors meeting 6.00pm – 7.30pm*

*Council of Governors meeting, 28<sup>th</sup> April 2021*  
*Agenda*



**PUBLIC COUNCIL OF GOVERNORS**

**Minutes of the meeting held virtually on Wednesday 27<sup>th</sup> January 2021 at 5.30pm**

**Present:** Evelyn Akoto  
 Martin Bailey  
 John Balazs  
 Tahzeeb Bhagat  
 Elaine Burns  
 Heather Byron  
 John Chambers  
 Marcia Da Costa  
 Robert Davidson  
 Annabel Fiddian-Green  
 Tony Hulse  
 Laura James  
 John Knight  
 Paula Lewis - Franklin  
 Margaret McEvoy  
 Betula Nelson  
 Placida Ojinnaka  
 Jennifer Owen  
 Lucilla Poston  
 John Powell  
 Samantha Quayle  
 Mary Stirling  
 Warren Turner  
 Rachel Williams  
 Tim Windle  
 Peter Yeh  
 Christine Yorke

**In attendance:** Sir Hugh Taylor (Chairman)  
 Dr I Abbs  
 Ms S Austin  
 Ms A Bhatia  
 Ms B Bryant  
 Mr E Bradshaw (Secretary)  
 Ms R Burnett  
 Mr P Cleal  
 Ms J Dahlstrom  
 Mr S Davies  
 Mr J Findlay  
 Mr A Gourlay  
 Dr F Harvey  
 Ms A Knowles  
 Ms A Ogunlaja  
 Ms J Parrott  
 Mr J Pelly  
 Prof R Razavi  
 Mr M Shaw  
 Dr S Shribman  
 Dr P Singh  
 Dr S Steddon  
 Mr L Tallon  
 Mr S Weiner  
 Mr D Waldron  
 Mr N Wright

**1. Welcome, apologies and opening remarks**

- 1.1. The Chairman welcomed participants to the Council of Governors meeting. Apologies had been received from Jane Fryer, Anita Macro, Sue Slipman, Julie Screaton and Simon Yu Tan.
- 1.2. In the opening remarks the Chairman formally thanked Trust staff for their efforts in responding to the second wave of the Covid-19 pandemic. It was also confirmed that all regulatory processes had been completed in respect of the merger with Royal Brompton and Harefield NHS Foundation Trust and that this would go ahead on 1 February 2021. The Chairman thanked the Council of Governors for their robust scrutiny of the merger process.

**2. Minutes of the meeting held on 9<sup>th</sup> December 2020**

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

### 3. Matters arising from the previous meeting

- 3.1. There were no matters arising from the previous meeting.

### 4. Reflection on Board of Directors meeting

- 4.1. The Chairman led the process of responding to Governors' questions following the public meeting of the Board of Directors.
- 4.2. Governors received an update on the impact of the second wave of the Covid-19 pandemic on the Trust's staff, including rates of infection and sickness absence rates. The support being provided to staff, including those that had been redeployed into other areas, was outlined. The Trust had adequate and secure supplies of Personal Protective Equipment (PPE) to maintain staff safety and deployment of PPE in different areas of the Trust was fully compliant with the national guidance on Infection, Prevention and Control (IPC) which had recently been updated. On a related workforce topic, Governors noted the ways in which the Black Lives Matter movement had helped inform the Trust's workplan for Equality, Diversity and Inclusion (EDI).
- 4.3. Governors commended the Trust for the successful delivery of the vaccination programme. In administering the vaccine, the Trust was closely following national guidance from the Joint Committee on Vaccination and Immunisation (JCVI) and was awaiting instruction about when to move to the next priority groups. All those undertaking Trust activities on Trust sites were being offered the vaccine. It was confirmed that the Trust was currently only using the Pfizer vaccine and that there had been no supply issues experienced to date. The Trust's Medical Director provided information about the newer strain of the virus, including its origin and why it appeared to be more transmissible than the original strain.
- 4.4. The Trust was working hard to balance its response to the pandemic with the continued provision of urgent treatment for patients without Covid, particularly those requiring urgent cancer and cardiac surgery. Work was ongoing to expand capacity for these patients wherever possible, including on both Trust sites and in the independent sector.
- 4.5. Through discussions Governors were informed about the work the Trust was doing to reduce the risk of nosocomial infections, the plans to resume the rotation of Junior Doctors to mitigate the impact of the delayed rotations on their training, and the use of the Nightingale Hospital, including confirmation that the Trust had not sent any patients to the Nightingale at the present time. It was confirmed that the legionella issue at Guy's in summer 2020 had been fully resolved, and Governors noted the actions being taken to closely monitor water quality across the Trust. The Chairman requested that responses to the remaining questions would be provided to the Governors in writing.

**ACTION: EB**

### 5. Nominations Committee report

- 5.1. Signed approval had been received from NHS England and NHS Improvement (NHSE/I) for the merger of the Trust with Royal Brompton and Harefield NHS Foundation Trust with effect from 1 February 2021. As part of the merger case, a commitment had been made that three of the current Non-Executive Directors (NEDs) of the Royal Brompton

and Harefield Board should be appointed to the Board of Guy's and St Thomas'. A proposal to implement this commitment had now been developed.

- 5.2. The Chair outlined the proposal and gave an overview of the skills and experience of the three individuals concerned and the practicalities of the appointments. Although NEDs are not Trust employees, the appointments would be made in a similar way as under the Transfer of Undertakings (Protection of Employment) regulations (TUPE). It was noted that, whilst NED terms differed between the trusts, the three individuals would serve the remainder of their current term and then be eligible for reappointment for a single term.
- 5.3. The Chairman explained that the current Royal Brompton and Harefield NEDs who would not be appointed to the Trust Board would be asked to stay on in an advisory capacity to provide continuity through their involvement in the Royal Brompton and Harefield Board. Dr Priya Singh and Baroness Sally Morgan had been approached and had agreed to take on the roles of Deputy Chairs of the Trust. Shelia Shribman would remain the Senior Independent Director, but no longer serve as Vice Chair.

#### **RESOLVED:**

- 5.4. The Council of Governors resolved to approve the recommendation from the Nominations Committee to appoint as NEDs on the Guy's and St Thomas' Board three members of the Board of Royal Brompton and Harefield on the terms proposed in the paper.

## **6. Children's Safeguarding**

- 6.1. The Director of Nursing from Evelina London – Women's and Children's Healthcare provided an update on the numbers of children being admitted with both Covid-19 and a linked condition called Paediatric Multisystem Inflammatory Syndrome (PIMS-TS), together with the key actions being taken by the Trust in response.
- 6.2. The Council of Governors then received a presentation about children's safeguarding during the pandemic. Governors noted that periods of lockdown were thought to have contributed to a decline in emotional wellbeing and mental health both in children and in their parents which had been seen to manifest in increased instances of domestic abuse, ggknife crime and attempted suicide. The Trust was involved in multiagency partnership meetings across Lambeth and Southwark to review and discuss vulnerable children caseloads. The impact on some Trust staff, including health visitors and school nurses, were noted.
- 6.3. Governors debated whether the low numbers of children in hospital meant there was a greater focus on adults during the pandemic, and the implications of this for safeguarding children. Some Governors asked how they could become more involved in related areas, such as knife crime. News that the Trust was working with local authorities to support victims of domestic abuse was welcomed.

## **7. Governors' Reports**

- 7.1. The Governors' reports were noted. The Membership Development, Involvement and Communications (MeDIC) Working Group Lead highlighted the section in the paper regarding the upcoming Governor elections.

## **8. Any Other Business Governors' Reports**

8.1. There was no other business.

## **9. Date and Time of Next Meeting**

9.1. The next formal meetings had been scheduled to be held on 28 April 2021. These would be the Board of Directors meeting from 3.45pm to 5.30pm; and Council of Governors meeting from 6.00pm to 7.30pm. The times and place would be kept under review and arrangements would be confirmed in due course.

**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS  
WEDNESDAY 28 APRIL 2021**

<b>Title:</b>	<b>Dr Sheila Shribman: Re-appointment of Dr Sheila Shribman as a Non-Executive Director</b>
<b>Responsible Director:</b>	<b>Sir Hugh Taylor, Chair</b>
<b>Contact:</b>	<b>Jessica Dahlstrom, Chief of Staff and Head of Corporate Affairs</b>

<b>Purpose:</b>	To recommend to the Council of Governors the re-appointment of Dr Sheila Shribman, Non-Executive Director on the Trust Board, for a period of 12 months ending 13 June 2022.
<b>Strategic priority reference:</b>	TO BUILD RESILIENT HEALTH AND CARE SYSTEMS WITH OUR PARTNERS
<b>Key Issues Summary:</b>	<ul style="list-style-type: none"> <li>• Dr Shribman's second term as a Non-Executive Director at the Trust ends on 12 June 2021.</li> <li>• The Nominations Committee unanimously recommends Dr Shribman's re-appointment for a 12 month period.</li> </ul>
<b>Recommendations:</b>	<p>The COUNCIL OF GOVERNORS is asked to:</p> <ol style="list-style-type: none"> <li>1. Approve the re-appointment of Dr Sheila Shribman, Non-Executive Director on the Trust Board for a period of 12 month ending 13 June 2022.</li> </ol>

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**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS**

**WEDNESDAY 28 APRIL 2021**

**DR SHEILA SHRIBMAN: EXTENSION OF APPOINTMENT**

**AS A NON-EXECUTIVE DIRECTOR**

**PRESENTED BY SIR HUGH TAYLOR**

**1. Summary**

- 1.1 Dr Sheila Shribman's second term of appointment as a Non-Executive Director (NED) ends on 12 June 2021.
- 1.2 Dr Shribman has made an outstanding contribution to the Board over her two terms of office, notably in support of the development of Evelina London into a thriving comprehensive children's service of excellence, but also across the full spectrum of the Board's activities. Dr Shribman's experience and continued support over the next period, given the recent merger with RBH and the critical phase the Trust is about to enter on the plans for the expansion of the Evelina London Hospital, will be invaluable.

The Chair explored with Dr Shribman whether, subject to the approval of the Council of Governors, she would be willing to accept a 12 month extension to her current appointment – for which the Trust Constitution



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provides discretion. Dr Shribman indicated that she would be willing to serve for this further period if invited to do so by the Council of Governors.

The Nominations Committee met on 30 March 2021 to discuss this proposal, and received an overview of Dr Shribman's recent appraisal which set out in detail the contributions made by Dr Shribman over her two terms of office. The Nominations Committee unanimously supported the re-appointment.

## 2. Recommendation

- 2.1 The Nominations Committee recommends that the Council of Governors to approve an extension to Dr Shribman's appointment for a further 12 months to 13 June 2022.
- 2.2 The Nominations Committee will use this period to give further careful consideration to the issue of succession, weighing the undoubted need for continued expert, non-executive advisory support for the Women and Children's Clinical Group alongside the overall balance of the NED representation on the Trust Board.

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**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS  
WEDNESDAY 28 APRIL 2021**

<b>Title:</b>	<b>Council of Governors Elections</b>
<b>Responsible Director:</b>	<b>Jessica Dahlstrom, Chief of Staff and Director of Corporate Affairs</b>
<b>Contact:</b>	<b>Edward Bradshaw, Deputy Director of Corporate Affairs</b>
<b>Purpose:</b>	To update the Council of Governors on the election process taking place in spring 2021
<b>Strategic priority reference:</b>	TO BUILD RESILIENT HEALTH AND CARE SYSTEMS WITH OUR PARTNERS
<b>Key Issues Summary:</b>	<ul style="list-style-type: none"> <li>• We are currently holding elections to 19 seats on the Council of Governors of the newly-merged Trust. The elections are being run by Civica Election Services.</li> <li>• The window for nominations closed 29 March. Voting opened on Thursday 22 April and will close on Tuesday 18 May, with the declaration of results the following day.</li> <li>• The new, or re-elected, governors will start their new three-year terms from 1 July, and the next Council of Governors meeting will be held on 28 July.</li> </ul>
<b>Recommendations:</b>	<p>The COUNCIL OF GOVERNORS is asked to:</p> <ol style="list-style-type: none"> <li>1. Note and comment on the paper.</li> </ol>

**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS  
WEDNESDAY 28 APRIL 2021**

**COUNCIL OF GOVERNORS ELECTIONS  
PRESENTED BY EDWARD BRADSHAW**

**1. Background**

1.1. Guy's and St Thomas' NHS Foundation Trust merged with Royal Brompton and Harefield NHS Foundation Trust on 1 February 2021. The Council of Governors of the newly-merged Trust is made up of 43 governors as follows:

- Ten public governors who live around Guy's and St Thomas' hospitals, around Royal Brompton and Harefield hospitals or in the rest of England and Wales;
- Twelve governors who have been patients in the last five years;
- Eight staff governors (six at Guy's and St Thomas' and two at Royal Brompton and Harefield hospitals); and
- Thirteen nominated partnership governors.

1.2. We are currently holding elections to the following 19 governor seats. The elections are being run by Civica Election Services.

- Three seats in the Guy's and St Thomas' patient class;
- Three seats in the Royal Brompton and Harefield patient class;
- One seat in the patient carer class;
- Six seats in public constituency area one (people who live around Guy's and St Thomas' hospitals);
- Three seats in Guy's and St Thomas' clinical staff class;
- One seat in the Guy's and St Thomas' community staff class;
- One seat in the Royal Brompton and Harefield clinical staff class; and
- One seat in the Royal Brompton and Harefield other staff class (non-clinical).

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### 2. Election process

- 2.1. The window for nominations opened on 1 March and closed at 5pm on 29 March. There has been considerable interest in the elections, partly due to an extensive election communications campaign, a key theme of which was to encourage people from all backgrounds to put themselves forward to help ensure that the voices on our Council of Governors are representative of the diverse communities we serve. A total of 106 nominations were received for the 19 available seats, and all seats will be contested.
- 2.2. Voting opened on Thursday 22 April and all eligible members should have received voting packs. The voting window will close on Tuesday 18 May, with the declaration of results the following day (Wednesday 19 May).
- 2.3. The new, or re-elected, governors will start their new terms from 1 July. There is a Council of Governors meeting (preceded by a public Board of Directors meeting) on 28 July at which the Trust Chair will formally welcome the new governors. In September, two governor events will be scheduled:
  - A 'getting to know you' session for new governors to meet the Trust Non-Executive Directors; and
  - The bi-annual 'accountability meeting' for governors to hold the Trust Non-Executive Directors to account for the Trust's performance.

### 3. Royal Brompton and Harefield Associate Governors

- 3.1. Following the merger on 1 February, the governors at Royal Brompton and Harefield hospitals became 'associate governors' of the newly-merged organisation. Associate governors, whilst not technically voting members, will sit on the Council of Governors and provide valuable continuity and expertise as we integrate the two trusts.
- 3.2. Associate governors that are not elected as 'full' governors during the current round of elections will remain in this capacity until the end of their current terms.

### 4. Recommendation

- 4.1. The Council of Governors is asked to note and comment on this paper.

**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS  
WEDNESDAY 28 APRIL 2021**

<b>Title:</b>	<b>Lead Governor's Report</b>
<b>Governor Lead:</b>	<b>Heather Byron, Lead Governor</b>
<b>Contact:</b>	<b>Heather Byron</b>
<b>Purpose:</b>	For information
<b>Strategic priority reference:</b>	TO BUILD RESILIENT HEALTH AND CARE SYSTEMS WITH OUR PARTNERS
<b>Key Issues Summary:</b>	A report from the Lead Governor to acknowledge what the Governors have achieved over the last three months and to outline plans for the next three months.
<b>Recommendations:</b>	The COUNCIL OF GOVERNORS is asked to: 1. Note the Lead Governor's Report

**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS**

**WEDNESDAY 28 APRIL 2021**

**LEAD GOVERNOR'S REPORT**

**PRESENTED BY HEATHER BYRON**

**1. Overview**

- 1.1** To open, I want to share the warmest welcome on behalf of the whole Council of Governors (CoG) to our Royal Brompton and Harefield governor colleagues who joined us officially on the 1<sup>st</sup> February. We are very fortunate to have such a wonderful group join us with such openness and desire to become part of the wider GSTT family. I am grateful also for the positive discussions that we have had around ways of working and how as a group we should continue to raise the bar to improve our connection to our constituencies and think through areas where our attention is best given.
- 1.2** Since we last met virtually in January, it has been a busy few weeks across the Trust. From governors informal, accountability meetings and Board and clinical group committees to MeDIC discussions around maximising community awareness to upcoming elections. Across these meetings, governors, Trust colleagues and Non-Executive Directors (NEDs) have really demonstrated the value we bring when we pull together and have collaborative discussions (and healthy debates) and what we can achieve when we all lean-in.
- 1.3** The progress that the National Vaccine Programme has made is also to note and be thankful for, especially those working and volunteering at our hubs and clinics across GSTT. I have had my first vaccine and also recently been certified as a Covid vaccinator, working at my local Vaccination Hub. I have found it very interesting talking to people in my professional circles and community to understand the perspectives of people

who remain unsure about taking a vaccine and continue to share my personal perspective on the value it brings us individually and as a population. I hope that you have all (where eligible) had your vaccine and use your informed position as a governor to encourage and help those people around you who are reluctant, to also have their vaccination.

- 1.4 If any of you feel you need more information to support discussions around vaccine hesitancy, please let myself or the Trust's Corporate Affairs team know. There is a lot of collateral we can share from general facts about the vaccine, myth busting guides around common misconceptions as well as a video that has been produced to help directly address concerns of some people from Black, Asian and Minority Ethnic communities and religious groups.

## 2. Meeting recap and progress

- 2.1. I've been really encouraged reading updates from colleagues attending our Board and clinical group committee meetings where discussions beyond Covid-19 are returning to the fore of agendas and discussions. It is also wonderful to see the great progress all directorates are making in considerably and confidently returning much needed services, and even more encouragingly, an indication that reticence to attend at the hospital is decreasing.
- 2.2. I want to thank all those who attended our Accountability Meeting in March. It was really valuable to have quick fire updates on the Health White Paper and the Covid-19 Recovery Programme as well as get insight from a number of our NEDs on their view to the priorities, risks and concerns for the coming year. Having plenty of time built into the agenda for governor questions made for a really informative session, and I hope everyone found it a valuable use of time.
- 2.3. Our Accountability Meetings are a great place for us to have more interactive discussions and an opportunity for more scrutiny. Equally our CoG meetings provide a forum for a more detailed presentation into topics. If there are topics colleagues would like to table at future meetings, please let me know.

**2.4.** Some colleagues will recall that back in 2019, we started a discussion with Transport for London and Mayor of London around the challenges NHS trusts in London face when providing patient transport to vulnerable patients, including the challenges it brings both in term of efficiency as well as patient welfare, alongside a proposal to allow for a pilot of liveried vehicles to use bus lanes during off-peak times (which is when 80% of vulnerable patient journeys happen). For reference, NHS vehicles not under emergency blue light, are not permitted to use bus lanes. Discussions have been slow, however, Covid has also provided further evidence and validation for the need of a pilot. While requests for pilots for GSTT and UCLH have not yet been accepted, there is a warming to having a further discussion around potential pilot options and boundaries, but these will not happen until after the next mayoral elections in May. None the less, we are very thankful for Devon Allison (our previous Lead Governor) and Claire Williams (Lead Governor, UCLH) for continuing to push this agenda for all our patients.

### **3. Elections**

- 3.1.** We will receive an update on the upcoming Governor Elections in our CoG meeting so I won't say too much about the details of that. However, I do want to say how immensely proud I am of the work governors in and outside of MeDIC have done in the weeks leading up to the nomination phase. Specific discussions and actions taken in those discussions have allowed us to leverage access to community links and social media networks positively and proactively as a way to reach a much greater population of potential future governors (and members); we even had a number of communications translated to directly reach some of our communities in their mother tongue.
- 3.2.** During the nomination window, I co-hosted a virtual information meeting for people to join who were thinking about standing for election and was very impressed with the calibre of questions and reasons that people gave for their interest. I believe this reflects the positive impact the steps taken by us and MeDIC have already had in the variety and diversity of candidates.



- 3.3.** We will be updating the governor Induction / Onboarding Handbook over the coming weeks in anticipation of the new cohort – if any colleagues would like to support this activity please let me know.

## **4. Working Groups**

- 4.1.** Finally, I would like to take this opportunity to ask for help. Over the last years, a number of governor colleagues have stepped up to chair our three Governor Working Groups QEWG (Quality and Engagement); MeDIC (Membership, Development, Involvement and Communications) and ST&P (Strategy, Transformation & Partnerships). Each of those chair roles has now come to term and we are looking for new colleagues to take on the shaping and running of these invaluable forums.
- 4.2.** If anyone would like to understand more about what is required, please let myself or any of the current Chairs know.

**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST**  
**COUNCIL OF GOVERNORS**  
**WEDNESDAY 28 APRIL 2021**

<b>Title:</b>	<b>Membership Development, Involvement and Communications (MeDIC) Working Group Notes, 2<sup>nd</sup> March 2021</b>
<b>Governor Lead</b>	<b>Samantha Quaye, Working Group Lead</b>
<b>Contact:</b>	<b>Adeola Ogunlaja &amp; Elena Spiteri, Working Group Secretariat</b>
<b>Purpose:</b>	For information
<b>Strategic priority reference:</b>	TO BUILD RESILIENT HEALTH AND CARE SYSTEMS WITH OUR PARTNERS
<b>Key Issues Summary:</b>	Notes from the Working Group's discussion on the following: <ul style="list-style-type: none"> <li>• Overview of governor election process</li> <li>• Governor nominations – how best to publicise this across diverse groups on social media</li> <li>• Ideas for future members' health seminars</li> </ul>
<b>Recommendations:</b>	The COUNCIL OF GOVERNORS is asked to: <ol style="list-style-type: none"> <li>1. Note the key discussion points at the last MeDIC Working Group meeting</li> </ol>

**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS**

**WEDNESDAY 28 APRIL 2021**

**MEMBERSHIP DEVELOPMENT, INVOLVEMENT AND COMMUNICATIONS (MEDIC) WORKING GROUP  
NOTES, 2 MARCH**

**PRESENTED FOR INFORMATION**

**1. Introduction**

- 1.1. This paper provides notes from the Council of Governors' MeDIC Working Group meeting held virtually on Tuesday 2<sup>nd</sup> March 2021.
- 1.2. The meeting was attended by Sarah Austin (Director of Integrated Care); Martin Bailey (Public Governor); John Balazs (Stakeholder Governor); Paul Cleal (Non-Executive Director); Heather Byron (Lead Governor); Michael Carden (Head of Media and Corporate Communications); Jessica Dahlstrom (Chief of Staff and Director of Corporate Affairs); Edward Bradshaw (Deputy Director of Corporate Affairs); Tony Hulse (Staff Governor); Laura James (Staff Governor); Margaret McEvoy (Public Governor); Placida Ojinnaka (Patient Governor); Adeola Ogunlaja (CEO Planning Officer); Samantha Quaye (Working Group Lead and Public Governor); Elena Spiteri (Membership and Governance Co-ordinator); Nancy Dickinson (RBH Corporate Governance & Membership Manager); Philippa Yeeles (Patient and Public Engagement Specialist); Christine Yorke (Patient Governor); Annabel Fiddian-Green (Public Governor); John Knight (Patient Governor); Rachel Williams (Staff Governor); Sarah Addenbrooke (Partnership Governor); John Hensley (Partnership Governor); Victoria Borwick (Associate

Governor); Helena Bridgman (Associate Governor); Elizabeth Henderson (Associate Governor); Maxine Ovens (Associate Governor); Jeremy Stern (Associate Governor) and Simon Clarke (Commercial and Relationship Manager CIVICA).

1.3. Apologies were received from Mary Stirling (Patient Governor) and Peter Yeh (Public Governor).

## **2. Notes of the meeting held on 15<sup>th</sup> December 2020**

2.1. The notes of the meeting held on 15<sup>th</sup> December 2020 were agreed as a true record.

## **3. Overview of governor election process**

3.1. The working group received an overview of the governor election process from the Trust's election services provider, who were administering both the nominations and ballot process. They had also acted in this capacity in the past for both Guy's and St Thomas' (GSTT) and Royal Brompton and Harefield (RBH).

3.2. The nomination deadline was 5pm on Monday 29 March, and the next stage of the process would be for the summary of the nominated candidates to be published. There would be an opportunity for candidates to withdraw should they wish to, prior to publishing the notice of poll and to the dispatch of ballots. The ballots would be dispatched when voting opens on 22 April with the closing date of 5pm on 18 May for members to vote. The Trust would be provided with the voting results around midday the following day.

3.3. The vacant seats in the elections were discussed, and the working group noted the nomination requirements. An easy online nomination form had been developed, and members with email addresses would have received the

notice of nomination opening on 1 March. Those without email addresses would receive a postcard by post later in the week. A printed nomination form could also be provided to members upon request.

- 3.4. The election statement was limited to 250 words and should describe why members wanted to stand as governors. Only the first 250 words would be published, should candidates go over the word limit. The election statement and photograph were what most members made their decisions to vote on, therefore advice would be given on how to structure these at the Governors' Awareness event scheduled for members later in the month. At the event, members would be advised to consider the skill and experience that they could bring to the Trust and why they wished to stand, and to avoid overpromising and using this as a vehicle to complain about Trust services. Once the date was confirmed, the event would be publicised on the nominations website and would be sent via email to members with the scheduled reminders.
- 3.5. All members within the constituencies where there were vacancies would be entitled to nominate themselves for election and to vote, and candidates in the patient and public constituencies would be asked to declare their identity. Members would only receive ballot papers for the constituency that they were a member of, as recorded on the membership database. The ballot information would be clear about which constituency members were voting as part of. They would be given the opportunity to vote online or by post, and any duplicate votes would be detected and discarded. The working group noted the email address to contact for any further information about the election process.
- 3.6. Civica's history and vast experience in running elections for NHS Foundation Trusts was noted. The possibility of collecting diversity questions in the nomination form was discussed and the working group noted the possible GDPR issues which could be involved. However diversity information would have been captured at the point of members' completing the membership application form, therefore this information would be available on the membership database.

- 3.7. There was a discussion on the checks that would be done to confirm the eligibility of nomination candidates. The eligible age of 18 years and over for Trust membership was noted along with the other eligibility criteria. The candidates would need to agree to be DBS checked and to confirm that they met all the eligibility criteria, including not being a governor, director or secretary of another Health Service Body.
- 3.8. There was discussion about how the Trust could build greater understanding of the role of Governor and motivate people to stand for elections in the future. One suggestion was that 'Associate governors' could be created for this purpose. Members agreed this was a good suggestion and that it should be picked up at the next MeDIC meeting.

**ACTION: AO, ES**

#### **4. Governor nominations – how to best publicise this across diverse groups on social media**

- 4.1. The working group discussed how best to engage and communicate the election process with the communities served by the Trust, in the attempt to diversify the Council of Governors to better represent those communities. The need to remind staff that they needed to sign-up to membership was discussed, as well as the need to communicate to members more widely about the benefits that were available such as the discount schemes and the need to review those benefits. This could help to diversify the Trust's membership and in turn the Council of Governors, as members could feel that they were getting something in return for giving up their time.
- 4.2. The survey which was undertaken to better understand the governors' skills, experiences and aspirations was discussed. The survey was undertaken as a result of the gap that was identified in the skills and value that the governors could add when attending Board Committee meetings, particularly around business, finance and audit. With new governors joining from RBH, the survey would be run again to understand the skills that they brought and how this helped to fill the gap. The election process could be used as an opportunity to also bring in some of the skills and experiences needed to support the Trust more effectively in these areas. The Trust would need to be clear in communicating the role requirements to potential governors.

4.3. The governors were connected to a range of networks, local community groups and organisations. Some of these were discussed, including suggestions about how these links could be harnessed during the election process. This included youth forums at the Evelina London Hospital, local Healthwatch organisations, local authorities, social workers, health ambassadors and other community organisations and diverse groups. The Trust's Corporate Affairs and Communications teams would develop some messages about the elections which the governors could use to communicate and engage with the networks that they were connected to.

**ACTION: EB, AO, ED & MC**

4.4. There would be a communications plan for the elections, which would include the use of social media to raise awareness of the elections, and community engagement working closely with the Trust's Patient and Public Engagement team. Consideration would also be given to how to communicate with members and community groups who did not speak English as their first language. The working group reflected on how accessible the governors were and whether meetings could be taken out into the community, to enable governors to also engage with members of the local communities about their interests. Current governor meetings were quite formal so some thought could be given to what changes could be made to make them more accessible and interesting to other people, especially in this digital era with more agile ways of doing so.

## 5. Ideas for future members' health seminars

- 5.1. The working group noted the health seminar topics that were previously agreed at the last meeting, these were: ophthalmology, genomics, respiratory and movement and exercise.
- 5.2. The working group agreed that more contemporary topics could be chosen, given the current health issues due to the Covid-19 pandemic. The new topics suggested included vaccine hesitancy and the side effects of Covid-19. It was also agreed that respiratory and movement and exercise were still relevant and could remain.

5.3. The health seminar topics planned by RBH for the year were also provided, and the working group noted that these seminars were also available for GSTT members to attend.

## **6. Any other business**

6.1. There was no other business.

## **7. Date of next meeting**

7.1. The next meeting would be held on Tuesday 25<sup>th</sup> May at 5:30-7pm by virtual meeting.