



# **Public Council of Governors Meeting**

**Wednesday 20<sup>th</sup> October 2021, 6pm to 7:30pm  
Held virtually on MS Teams**

## COUNCIL OF GOVERNORS

Wednesday 20<sup>th</sup> October 2021 from 6pm to 7.30pm  
Held virtually on MS Teams

### A G E N D A

1. Welcome, apologies and opening remarks  
*Sir Hugh Taylor* *Verbal*
2. Declarations of interest *Verbal*
3. Minutes of the previous meeting held on 28<sup>th</sup> July 2021 *Paper*
4. Matters arising *Verbal*
5. Reflection session on Board of Directors meeting *Verbal*
6. Adults and children safeguarding  
*Janet Powell and Ciara Mackay* *Presentation*
7. Governors' reports for information: *Papers*
  - 7.1 Lead Governor's Report  
*Heather Byron*
  - 7.2 Quality and Engagement Working Group: Meeting Notes 21<sup>st</sup>  
September 2021  
*John Powell*
8. Any other business *Verbal*

*The next meetings are due to be held on 26<sup>th</sup> January 2022 and will be confirmed in due course:*

<i>Board of Directors meeting</i>	<i>3.45pm – 5.30pm</i>
<i>Council of Governors meeting</i>	<i>6.00pm – 7.30pm</i>

## **COUNCIL OF GOVERNORS**

**Wednesday 28<sup>th</sup> July, 6pm – 7.30pm**  
**Held virtually via MS Teams**

**Governors present:**

S Addenbrooke	L James	L Mansfield
M Bailey	E Chevretton	M Stirling
J Balazs	J Knight	M Masters
V Borwick	J Bradbury	T Nickels
H Bridgman	M Mates	T Windle
H Byron	M McEvoy	R Pabary
J Abdi	B Nelson	C Yorke
M Da Costa	M Bryan	R Tupprasoot
A Fiddian-Green	J Owen	S Vincent
J Hensley	J Powell	S Winifred
S Aboim	A Shah	

**In attendance:**

H Taylor (Chair)	R Drummond	N Stepan
I Abbs	J Findlay	J Screaton
A Bhatia	S Friend	M Shaw
E Bradshaw (Secretary)	A Gourlay	S Shribman
R Burnett	R Grocott-Mason	P Singh
S Clarke	F Harvey	E Spiteri
P Cleal	A Knowles	S Steddon
S Cross	S Morgan	L Tallon
S Davies	J Parrott	S Weiner
N Dickinson	J Pelly	

### **1. Welcome and Apologies**

- 1.1. The Chair welcomed attendees to the meeting of the Council of Governors, in particular the new governors that had joined the Council following the recent elections.
- 1.2. Apologies had been received from, Evelyn Akoto, Mark Boothroyd, Robert Davidson, Patrick Davies, Ryan Fletcher, Elizabeth Henderson, Paula Lewis-Franklin, Lucilla Poston, Pravinchandra Shah, Warren Turner, Jadwiga Wedzicha, Rachel Williams and Reza Razavi.

### **2. Declarations of Interest**

- 2.1. There were no declarations of interest.

### **3. Minutes of the meeting held on 28<sup>th</sup> April 2021**

- 3.1. The minutes of the previous meeting were agreed as an accurate record.

### **4. Matters arising**

- 4.1. The action from the last meeting to provide written responses to the outstanding questions raised by governors has been completed. There were no further matters arising.

## **5. Reflection on public Board of Directors meeting**

- 5.1. The Chair led the process of responding to questions from governors, some of which had been submitted in advance of the meeting. Many of the questions were regarding the COVID-19 response and recovery, including the impact on Trust staff. It was reported that staff absence levels had been comparable with trusts across London, had stabilised in recent weeks and were now gradually reducing. The asymptomatic staff testing programme was highlighted as an important means to help staff to return to work. There had been widespread redeployment of staff in the first two waves of the pandemic; over time the Trust had become better at providing the necessary support and training to redeployed staff and also when they transitioned back into their substantive roles. It was noted that there was some staff anxiety about possible redeployment in a third wave.
- 5.2. The number of Trust staff who had been vaccinated had increased to around 88% of the workforce, and work was ongoing to increase this still further. Governors expressed concern for patients treated by unvaccinated staff; this led to discussion about how staff should respond to patients who queried their vaccination status. The Chief Nurse explained that patients were being protected through the restrictions that continued to be in place, including the use of face coverings and handgel, social distancing on Trust sites, the use of appropriate personal protective equipment (PPE) by Trust staff and the use of different patient pathways. It was confirmed that no unilateral decision would be taken by the Trust about whether vaccines would be mandatory for its staff, and that national direction on this matter would be followed. The Trust's records showed that approximately 15% of admitted patients had received both doses of the COVID-19 vaccine.
- 5.3. Other questions were raised about the delivery of the Trust's strategic agenda, including the Pathology Programme, the Royal Brompton and Harefield Imaging Centre and the Apollo Programme. It was confirmed that, through the Apollo Programme, the new electronic health record system would provide patients with easier access to their health records and associated documentation, and that patients having the latest technology was not a prerequisite for accessing this; patients would also continue to have the option of having their letters printed and sent through the post. Some governors had noted from Board Committee minutes that there had been internal requests for capital for in excess of the 2021/22 capital allocation. This led to a discussion about how capital schemes were prioritised and the input of Trust executives including the Medical Director, Chief Nurse and Chief Operating Officer, to help determine clinical priorities.
- 5.4. Some governors expressed concern about the length of time it was taking to deliver the theatre maintenance programme and upgrades to the Surgical Admissions Lounge (SAL), and referred to the disruption this was causing patients and staff. The capacity issues resulting from the maintenance programme had been mitigated as far as possible, including by procuring capacity at London Bridge Hospital, and the Board would continue to explore ways in which this work could be expedited. Other questions regarding the Trust's estate included the provision of social facilities for staff at Harefield Hospital. The Chair confirmed that all questions, either submitted in advance or asked in the meeting, that did not receive a response would be answered in writing following the meeting.

**ACTION: EB**

## **6. King's Health Partners (KHP) 'Mind and Body' Programme**

- 6.1. The Council of Governors welcomed Dr Sean Cross and Natalia Stepan, who explained that evidence shows that the mind and body are inseparable and that mental and physical health conditions are often connected. Whilst healthcare organisations typically diagnose, treat and care for patients and service users in a disconnected way, integrating mental and physical healthcare services has the potential to vastly improve the care that patients receive. It can

also help people to manage their different conditions, improve their health outcomes and even prevent unnecessary health problems for some people by identifying risk early.

- 6.2. The Mind and Body Programme had been established to join up and deliver excellent mental and physical healthcare, research and education to enable treatment of the 'whole person'. The Programme was being co-designed and co-delivered across partners, patients and communities, and aimed to make the advancement of integrated mind and body care a reality. The Trust co-funded the Programme with King's College London and King's College Hospital and South London and Maudsley NHS foundation trusts, as well as a range of voluntary sector organisations including Guy's and St Thomas' Foundation. An overview of the Programme was presented to the Council of Governors, including its intended benefits, the key achievements to date, and the priority areas going forward.
- 6.3. Governors commented that the presentation was informative and fascinating, and it was agreed that it was an important reminder to both the Council of Governors and the Board of Directors about the need to focus on programmes at the heart of the Trust's ambition as an Academic Health Sciences Centre. A number of governors, including those in clinical roles, reflected on the link between physical health and mental health and the need to ensure true partnership between primary and secondary care providers. There was discussion about how the Programme was linked to the reduction of health inequalities, including the possible adoption of the Patient and Carer Race Equality Framework, as well as consideration of the 'digital divide' and also how individuals were asked to provide information about their mental health.
- 6.4. Some governors asked how they could become involved in the Programme and about the possible roles that might be available. It was explained that they could become mind and body 'champions', of which there were already over 900 across King's Health Partners organisations. A key role would be to keep asking questions of the Trust and encouraging progress to help drive gradual change in this area. The presenters' details would be shared with governors.

**ACTION: EB**

## **7. Trust Board Committee and Clinical Group Board Governor Seat Rotations**

- 7.1. Governors have two seats on seven Trust Board Committees and Clinical Group Boards. It had been agreed that the governor representatives on these groups would be rotated, as in all cases the incumbent governor had moved on and/ or been in the seat for at least 18 months. This would help to ensure that governors continue to bring a variety of voices, experience and perspectives to these groups.
- 7.2. A process for the seat rotations had been established and communicated to governors over recent weeks, and a number of governors had subsequently nominated themselves for certain seats. As more than two nominations had been received for five of these groups, a vote was needed to determine who would take the seats. The voting process was set out for the governors' information; the deadline to submit a vote was Tuesday 3 August and the results would be communicated later that week.

## **8. Governors' Reports**

- 8.1. The governors' reports were noted.

**9. Any Other Business**

- 9.1. An agreement had recently been reached with Transport for London (TfL) to allow the Trust's patient transport vehicles to use bus lanes, which would significantly improve the quality of the patient transport service. The agreement had been reached following considerable engagement with TfL and particular thanks were due to the former Lead Governor, Devon Allison, whose work had been crucial to achieving this outcome.
- 9.2. A request was made that a future Council of Governors meeting had a focus on the role of the two charities associated with the Trust – Guy's and St Thomas' Foundation and the Royal Brompton & Harefield Hospitals Charity. There was a query about the dates of future governor working group meetings; a schedule would be circulated to all governors in due course.

**ACTION: EB**

- 9.3. Amanda Pritchard, the former Chief Executive of Guy's and St Thomas' NHS Foundation Trust, had been appointed as the new Chief Executive of NHS England, replacing Lord Stevens. The Chair congratulated Amanda on behalf of the Council of Governors for this great achievement.

*The next meetings are due to be held on 20<sup>th</sup> October 2021 and arrangements will be confirmed in due course:*

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

**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
COUNCIL OF GOVERNORS  
WEDNESDAY 20 OCTOBER 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 20 OCTOBER 2021**

**LEAD GOVERNOR'S REPORT**

**PRESENTED BY HEATHER BYRON**

### **1. Thanks and congratulations**

I want to open this Lead Governor's report by reiterating my thanks to everyone involved in making Guy's and St Thomas' the incredibly Trust that it is and continuing to offer the patient care that it is renowned for, even in these ongoing difficult times. We continue to hear about the passion, conviction, selflessness, and strength of humanity that our incredible staff bring day in, day out. I'm grateful to our staff governor colleagues, in particular, for ensuring that as a Council of Governors we maintain a keen eye on the importance of supporting their mental and physical health and wellbeing during these toughest of times.

I watched a video recently of Kieron Boyle, Chief Executive of the Guy's & St Thomas' Foundation showcasing many of the initiatives the Foundation has funded during the pandemic. It is thanks to them, our Trust leadership and other partners that we have seen true commitment to not only ensure the basics are in place to allow people breaks to drink and eat, and that and space is provided to change, shower and rest, but also commitment in offerings to staff beyond that including mindfulness support, people to talk to and choirs to sing in. There is such a breadth of initiatives available to our staff, to really make sure we look after those who are looking after us and our loved ones – I know we are all thankful for that attention.

On behalf of the Council of Governors, I also wanted to pass on our congratulations to Professor Abbs on his substantive appointment as our Chief Executive and Steven Davies on his appointment as our new Chief Financial Officer (CFO). We are grateful for all that Martin Shaw has given the trust in his role as CFO and wish him well on his retirement.

### **2. Achievements this year**



I reflected in my recent update to the Annual Public Meeting on how much we have achieved and wanted to share that again here. I am certain that I speak for all colleagues that our collective pride in Guy's and St Thomas' continues when we consider everything the Trust has achieved in the last year: a successful merger with Royal Brompton and Harefield; significant capital projects mobilised for the Evelina London Children's Hospital; a major pathology programme, and development plans for the Cardiovascular Institute to name a few. Those initiatives in a 'normal' year of clinical activity would be impressive. When you consider them in the context that everyone has been operating within the last year, it is a testament to the tenacity of the Trust executive and the commitment and conviction of the staff around them to be able to both care for our patients in the most difficult of circumstances and also maintain a focus on our future plans. That said, we discussed in this month's Strategy, Transformation & Partnerships Working Group the vast major programmes agenda and its deliverability in the current climate and I know colleagues will maintain a watching brief over that.

I am also really delighted to share a brief update on something that has been in-flight much longer than this last year: our campaign to Transport for London (TfL) and Mayor of London to allow GSTT patient transport services to use the bus lanes out of 'peak' time. I mentioned in the summer that there were indications that we might see progress and I am delighted to say that, following a meeting at the end of September, an agreement has been made that GSTT patient transport will pilot using bus lanes across South London. TfL shares our hypothesis that this will bring major benefits to patients and patient transport efficiency without causing major bus disruption. The 12-month pilot will start as soon as we can baseline data and we hope that will be sooner than the proposed February 2022 start date. We have to give massive thanks to Devon Allison, my predecessor as Lead Governor, as she started to champion this with colleagues from University College London Hospital when she was a governor with us and continues to champion and push the agenda long after her term has finished.

### **3. What's next?**

There is no doubt that it has been a tough year and how the Trust has responded is to be applauded. But this is not the time to rest on our laurels. As we come through the pandemic and services normalise I know we all want to make that we do not lose sight of the lessons learned, the improvements made and the consideration of what is important.

There will be much the Trust needs to do to meet our aspirations to provide even better outcomes to our patients and population for both their physical and mental health. Over the last year, we have seen the devastating impact health inequalities and health inequity can have, and across the Council of Governors we will continue to maintain focus on the Trust's response to that and continue to ask colleagues to work collaboratively with system partners, with the patient in mind, to reduce the gaps we know exist. I truly believe that the Trust shares our ambitions to make a real step change in this space.

#### 4. Our new Council of Governors

It's been a few months now since our new CoG has been together and I wanted to thank each of you for the insight, experience and contribution you bring. We are looking at piloting a buddy scheme to really support our new colleagues as best as possible and I encourage any of our more experienced colleague to offer up a little time to be a buddy.

Colleagues who joined us from the Royal Brompton and Harefield and those who were elected to other GSTT seats in the summer elections have brought energy, passion and healthy challenge to our discussions. As many of you will have noticed in our informal meetings, they are already encouraging us to ask whether things are good enough, and whether the things that we do, could be done better or more efficiently. I am very grateful for the different lens, pace and diversity in thinking they are providing. It's also great to hear through the Royal Brompton and Harefield governors, feedback on how happy many of the Royal Brompton and Harefield clinicians are post-merger. Specifically hearing them reference the value they and our patients are getting from the collaborative working and research sharing between themselves, and their Guy's and St Thomas' colleagues is wonderful.

We have also refreshed which governors attend the various clinical group and Board committees, so that we are able to offer as many people the opportunity to experience and contribute and bring as diverse a voice into those meetings from across the Council of Governors as possible. I hope that the colleagues who were successfully voted into those seats are enjoying the experience and insight it brings. With that in mind, I would also like to remind those colleagues to provide their governor summaries of those meetings to the Corporate Affairs team (via email) as soon as possible after the meeting (ideally within two weeks), so that they can be socialised with the full Council of Governors as part of the new monthly communications that we are trialling.

#### 5. Getting back to site...

It has been a long time since many of us were on sight, and I appreciate the pragmatism and perseverance colleagues have demonstrated in our decision to continue with remote meetings. However, like many of you, I am very much looking forwards to the opportunity to visit the Trust. I am very much looking forwards to the programme of governor visits to clinical and non-clinical areas that will be rolled-out in the coming weeks, and as soon as the details for those are finalised, we will communicate them to all.

That leads nicely into a closing reminder that as volunteers of the Trust, governors are eligible to get their COVID-19 booster and flu vaccines from the Trust and I encourage you to do that. If you would like to arrange these, please follow the instructions that were sent out by Voluntary Services and if you didn't receive that email, please reach out to [VoluntaryServices@gstt.nhs.uk](mailto:VoluntaryServices@gstt.nhs.uk) for assistance.

**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
QUALITY AND ENGAGEMENT WORKING GROUP  
TUESDAY 21 SEPTEMBER 2021**

<b>Title:</b>	<b>Council of Governors Quality and Engagement Working Group Meeting Notes, 21 September 2021</b>
<b>Governor Lead:</b>	<b>John Powell, Working Group Lead</b>
<b>Contact:</b>	<b>Andrea Carney &amp; Sarah Allen, Working Group Secretariat</b>
<b>Purpose:</b>	For information
<b>Strategic priority reference:</b>	TO TREAT AS MANY PATIENTS AS WE CAN, SAFELY
<b>Key Issues Summary:</b>	<p>A report on the Working Group's discussion on the following:</p> <ul style="list-style-type: none"> <li>• Nursing and Midwifery Strategy: Involving patients, families and carers in its development</li> <li>• Quarterly reports for Patient Experience and Patient and Public Engagement</li> </ul>
<b>Recommendations:</b>	<p>The GROUP is asked to:</p> <ol style="list-style-type: none"> <li>1. Note the key discussion points at the Quality and Engagement Working Group meeting</li> </ol>

**GUY'S AND ST THOMAS' NHS FOUNDATION TRUST  
QUALITY AND ENGAGEMENT WORKING GROUP**

**TUESDAY 21 SEPTEMBER 2021**

**QUALITY AND ENGAGEMENT WORKING GROUP MEETING NOTES**

**PRESENTED FOR INFORMATION**

**1. Introduction**

- 1.1. This paper provides notes from the Council of Governors Quality and Engagement Working Group meeting held via Microsoft Teams on Tuesday 21 September 2021.
- 1.2. This meeting was attended by: Jordan Abdi (Public Governor), Serena Aboim (Staff Governor), Sarah Addenbrooke (Stakeholder Governor), Sarah Allen (Head of Patient Experience), Tazeeb Bhagat (Staff Governor), Victoria Borwick (Associate Governor), Helena Bridgman (Associate Governor), Heather Byron (Patient Governor), Andrea Carney (Head of Patient and Public Engagement), Elfy Chevretton (Staff Governor), Marcia Da Costa (Public Governor), Annabel Fiddian-Green (Public Governor), Roisin Fitzsimmons (Head of Nursing & Midwifery Inclusion, Diversity, Wellbeing and Leadership development), Sian Vincent Flynn (Staff Governor), Paula Franklin–Lewis (Public Governor), Susan Gibbard (Head Of Quality, Improvement and Patient Safety), Anna Grinbergs-Saull (Patient and Public Engagement Specialist), Dawn Harper (Director of Nursing), John Hensley (Stakeholder Governor), Laura James (Staff Governor), John Knight (Patient Governor), Leah Mansfield (Patient Governor), Marianna Masters (Public Governor), Michael Mates (Associate Governor), Margaret McEvoy (Public Governor), John Paul Murray (Associate Governor), Betula Nelson (Patient Governor), Placida Ojinnaka (Patient Governor), Rishi Pabary (Staff Governor), Georgina Parker (Patient Feedback Facilitator), John Powell (QEWG Chair), Mary Stirling (Patient Governor), Priya Singh (Non-Executive Director),

Mark Tsagli (Patient Experience Specialist), Rachel Williams (Public Governor), Christine Yorke (Patient Governor).

1.3. Apologies were received from: Robert Davidson (Stakeholder Governor), Ciara Mackay (Director of Nursing), Raksa Tupprasoot (Public Governor).

## **2. Agenda Item 2: Notes from the last meeting**

2.1. The notes were approved as an accurate record of the last meeting.

## **3. Agenda Item 3: Nursing and Midwifery Strategy: Involving patients, families and carers in its development**

3.1. Head of Nursing & Midwifery Inclusion, Diversity, Wellbeing and Leadership development gave a presentation on the progress of the Nursing and Midwifery strategy currently being developed. Governors noted:

- A new strategy was needed following the end of both the Guy's and St Thomas' Nursing and Midwifery Strategy and the Royal Brompton and Harefield's strategy, both of which ended in 2020 and 2021 respectively.
- The new Nursing and Midwifery strategy is expected to focus on setting a new direction for nursing and midwifery in view of internal and external challenges facing the nursing and midwifery profession.
- The strategy provides an opportunity to recognise and reflect on changes in the Trust and the NHS as a whole.
- The need to empower and support nurses and midwives to ensure the Trust continues to deliver outstanding patient care.
- A key aspect of the strategy is engagement. Broad levels of engagement are a key aspect in the development of the strategy; involving and working together with all groups of nursing and midwifery staff to ensure outputs are driven by them.
- Leveraging opportunities that come with the merger with Royal Brompton and Harefield (RBH) for nursing and midwifery staff to work together as one professional group.

- Ongoing work to engage all other groups of staff, patients and families to help in broadening the range of stakeholders.
- A wide-reaching survey program has been undertaken as part of the engagement process to gather opinions of Trust staff including a significant number of nursing and midwifery staff about their views of nursing and midwifery.
  - Emerging themes from the early phase of engagement relate to opportunities for development, inclusion, listening to staff and acting on their feedback.
  - Findings show similar themes from patient experience data on issues such as staff attitude, training, skills etc.
- Engagement sessions are underway in the Trust with stalls in public areas getting feedback from patients' families and carers.
- Plans for launching the strategy in Spring 2022.

### 3.2. Governor discussion:

Governors welcomed the presentation and raised a number of questions:

- The challenges facing nursing and midwifery in general, particularly retaining staff and how the Trust is managing with staff shortages; responding, the Director of Nursing on the Strategy team agreed with governors' concern about the challenges with staffing which has also been significantly impacted by the pandemic on staff morale, staff recovering from the Covid virus, and exhaustion. The Director of Nursing recognised the concerns raised and further advised on the importance of the new strategy addressing these challenges.
- Plans within the strategy for support for staff recruited from abroad, strategy on retaining staff, and strategy to ensure the Trust does not lose valuable staff who benefit from significant training and study programmes leaving for opportunities elsewhere. Responding, the Director of Nursing drew governors' attention to work already undertaken and some ongoing work.

- Support from the GSTT Charity under the “Showing We Care” initiative has provided areas for staff to rest and have breaks during shifts. Ongoing work to identify facilities and places across the organisation that staff can use to rest and unwind.
- Drive for international recruitment to work in theatres to support capacity. Programme of support in place to make sure new recruits feel supported and able to adapt during their time here.
- Recruitment plans focussing on making sure the Trust is an attractive place to work. Including providing opportunities for self-development, study leave, and advanced educational courses.
- Plans for managing stress, burnout and comfort break facilities for already stretched staff as part of the staff wellbeing programme currently in place.
- Provisions for Community staff in relation to the provision of similar access to opportunities available for staff in the hospital whilst making sure community staff are fully engaged and consulted as part of the strategy.
- **ACTION:** Questions in the presentation inviting comments and suggestions for engaging particular groups on the nursing and midwifery strategy to be sent to governors to provide more detailed feedback.
- **ACTION:** Nursing and Midwifery strategy presentation slides will be circulated to governors.

#### 4. Agenda Item 4: Quality Priorities update

4.1. The group were introduced to the new Quality Lead as it was announced that the previous Head of Quality, Improvement and Patient Safety has now left the Trust. No updates were shared at this meeting. The team are in the process of reviewing the Quality Priorities and will provide an update at the December meeting.

#### 5. Agenda Item 5: Patient Experience and Patient and Public Engagement update

5.1. Patient Experience Report Q1 was shared in advance of the meeting.

- The Head of Patient Experience responded to governor questions shared in advance of the meeting covering:
  - Response rates for the Friends and Family Test (FFT) for Outpatients, Patient Transport and Maternity.

- Action plan from Maternity team to improve response rates in respect of FFT in place.
- Changes to the local outpatient survey to capture experience of virtual appointments.
- Good night sleep programme in RBH and plans to continue the with Dying Matters Week initiative next year.

5.2. Patient and Public Engagement (PPE) Update was shared in advance of the meeting. The Head of Patient and Public Engagement summarised some of the key activities on the following:

- King's Health Partners Cardiovascular and Respiratory Partnership programme and planned workshops.
- Evelina is Growing (Evelina Expansion Programme); focussing on involving patients and families in the next phase of the design process.
- Recruitment and participation of Patient Influencers in Apollo - the Trust's Electronic Health Record programme.

5.3. Bi – annual Progress report shared in advance of the meeting: Joint Programme for Patient, Carer and Public Involvement in Covid Recovery. The Head of Patient and Public Engagement provided the following updates:

- Update to the tender process for patient and public involvement activities on the three projects for virtual access to care, waiting for treatment and self-management, and Long Covid.
- Acknowledgement of support provided by governor representatives on steering group meeting to date.

Following on from the update, a question was asked about whether children's departments that are located in other parts of the St Thomas' Hospital site would be accommodated in the new Evelina London building.

- **ACTION:** The Head of Patient and Public Engagement will put the respective Staff Governor in touch with colleagues in the Evelina Expansion Programme team.

## 6. **Agenda Item 6: Reports and updates from committees (those recently attended by Governors)**

6.1. Quality and Performance Committee (QPC): Reports for information shared in advance of the meeting



- Outgoing governor representative from the QPC drew attention to good work done in the Trust in relation to promoting diversity and inclusion in the workplace and suggested the group revisit progress on this in the near future.
- **ACTION:** Diversity to be added to the QPC agenda in the future for follow up on progress made by the Trust
- Cancer Services Committee: No notes tabled.
  - **ACTION:** The Chair to find out new governor representative following the governor rotation.

## 7. Agenda Item 8: Matters arising from the last meeting and any other business

- 7.1. In a detailed discussion, governors raised a number of additional issues relating to staff welfare and staff wellbeing. It was agreed to reconsider this topic in future meetings. It was also decided that the particular issues raised about adequacy of facilities for nursing and midwifery staff on some sites to be followed up immediately with Executive colleagues.
- **ACTION:** The QEWG secretariat to follow this up with Executive colleagues about the concerns raised.

## 8. Actions

3.2.1	Questions in the presentation inviting comments and suggestions for engaging particular groups to be sent to governors separately
3.3.1	Nursing and Midwifery strategy presentation slides to be circulated to governors.
5.3.1	Head of Patient and Public Engagement to put respective Governor in touch with the team involved in the Evelina expansion programme
6.1.2	The Chair to find out new governor representative following rotation
6.1.3	Diversity and inclusion to be added to the QPC agenda to revisit in the near future
7.1.2	The Working Group Secretariat to follow up with Executive colleagues about concerns raised.