Council of Governors' Meeting



Verbal

A meeting of the Council of Governors will be held at 11:00am on Wednesday 20th September 2023, in Rooms 9&10 Education Centre & Microsoft Teams

Membership Strategy Group Update

14

AGENDA

1	Apologies for Absence and Attendance Register	
2	Chair's Business	
3	Declarations of Interest	
4	Minutes of the Previous Meeting: To approve the minutes of the previous meeting of the Council of Governors held on 17 May 2023	Enclosure
5	Matters Arising/Action Log	Enclosure
Trust	Updates:	
6	Showcase presentations / Patient / Staff story: • Kirsty Sprudd, Associate Director of Place for Gateshead	
7	NENC Joint Forward Plan – Our Response	Presentation
8	Mask Making Project Update	Enclosure
Board	d and Committee Updates:	
9	Deputy Chief Executive's Update including i) Performance Report including ICS / ICB update ii) Questions from Governors	Enclosure Verbal
10	Board Committee Assurance Updates i) Digital Committee ii) Charitable Funds	Presentation Presentation
Gove	rnance:	
11	Appointment to Committee Roles	Enclosure
Electi	ons and Members:	
12	Elections Update	Enclosure
Upda	tes from Governor Committees and Groups:	
13	Governance and Development Committee Update	Enclosure

Items for Information:

15 Cycle of Business 2023/24

Enclosure

- 16 Any Other Business:
- 17 Review of the Meeting

Verbal

18 Date & Time of the next Meeting

The next meeting of the Council of Governors will be held at Wednesday 22nd November 2023 at 10.00am in Rooms 9&10, Education Centre.

COUNCIL OF GOVERNORS' Gateshead Health



Minutes of the Council of Governors' Meeting held at 9.30am on Wednesday 17th May 2023, in Rooms 9&10 and Microsoft Teams

Present:	
Mrs A Marshall	Chair
Mr J Bedlington	Public Governor – Central
Mr L Brown	Public Governor - Western
Mr S Connolly	Public Governor – Central
Mrs L Curry	Staff Governor
Mr R Dennis	Public Governor – Western
Mrs H Jones	Public Governor – Central
Mr M Learmouth	Public Governor – Central
Dr A Lowes	Staff Governor
Mr G Main	Public Governor – Western
Mr G Riddell	Public Governor – Western
Mr A Sandler	Appointed Governor
Dr K Singisetti	Staff Governor
Mrs K Tanriverdi	Public Governor – Central
In Attendance:	
Mrs J Baxter	Chief Operating Officer
Mr A Beeby	Medical Director
Dr R Bonnington	Non-Executive Director
Mrs J Boyle	Company Secretary
Mrs L Crichton-Jones	Director of People & OD
Mrs T Davies	Chief Executive
Dr G Findley	Chief Nurse
Cllr M Gannon	Non-Executive Director
Mr N Halford	Medical Director of Operations
Mrs K Mackenzie	Group Director of Finance & Digital
Mr A Moffat	Non-Executive Director
Mrs H Parker	Non-Executive Director
Mrs M Pavlou	Non-Executive Director
Mr M Robson	Non-Executive Director
Mrs A Stabler	Non-Executive Director
Mrs A Venner	Deputy Director of People & Organisational Development
Ms D Waites	Corporate Services Assistant
Apologies:	
Ms H Adams	Staff Governor
Mr S Harrison	Interim Managing Director for QE Facilities
Prof D Porteous	Appointed Governor
Mr A Rabin	Public Governor – Central
Mr C Toon	Appointed Governor

Agenda Item	Discussion and Action Points	Action By
G/23/26	CHAIR'S BUSINESS:	
	Mrs Marshall opened the meeting and welcomed the Governors and Mrs Trudie Davies to her first meeting as Chief	

Agenda Item	Discussion and Action Points	Action By
no	Executive. She highlighted that this will also be the last meeting for Dr Ruth Bonnington and Cllr Martin Gannon as their terms of office as Non-Executive Directors come to an end and thanked them for their commitment, experience and advice during their time at the Trust on behalf of all the Governors.	<u>J,</u>
0/00/07	DEGLADATIONS OF INTEREST	
G/23/27	DECLARATIONS OF INTEREST:	
	Mrs Marshall requested that Governors report any revisions to their declared interests or any declaration of interest in any of the items on the agenda.	
G/23/28	MINUTES OF THE PREVIOUS MEETING:	
	The minutes of the previous meeting held on Wednesday 15 th February 2023, were approved as a correct record.	
G/23/29	MATTERS ARISING/ACTION LOG:	
	The Council of Governors' Action Log was updated accordingly to reflect matters arising from the minutes and discussions took place below:	
	 Action G/22/42 re. plans to replace vending machines. It was confirmed that all vending machines in the Emergency Care Centre have been replaced and are card payment enabled however the machines in Theatres still needs to be replaced therefore action will remain open until confirmed. Action G/22/42 re. TIMS service. It was reported that the meeting with TIMS has taken place therefore this action will be closed. Action G/22/57 re. PNA programme to be considered within other professions. All professions can now access coaching however capacity is being managed. It was agreed that this action can now be closed. Action G/22/58 re. Non-Invasive Ventilation (NIV) services and alternative models being considered. Dr G Findley, Chief Nurse, reported that the provision of a NIV service has been included within the newly developed clinical strategy as a priority and teams are working up options for consideration. Update to be provided at next meeting. Action G/23/15 re. Lead Governor and Deputy Lead Governor appointments. A report is on the agenda therefore this action can now be closed. 	

Agenda Item	Discussion and Action Points	Action By
G/23/30	SHOWCASE PRESENTATIONS	•
	Caroline Tweedie, Specialist Breast Care Nurse: Caroline Tweedie provided a presentation on the cancer services virtual clinics which were set up during the pandemic. She highlighted that this is a programme of lifestyle education and psychological support to help individuals understand their diagnosis/treatments and side effects and understand the importance of good nutrition, physical activity and looking after their emotional wellbeing. The virtual clinics are still being accessed and they have received over a thousand referrals.	
	Caroline received a Bight Ideas Award for her contribution to supporting cancer patients via a series of podcasts and the Digital Team has also been shortlisted for a Health Service Journal Digital Award which will be announced in June 2023.	
	Following a query from Mr S Connolly in relation to male breast cancer, Ms Tweedie explained that male referrals have been received and a podcast has been shared. Mrs H Jones queried whether there were any future plans and Ms Tweedie explained that there has been national interest in the programme and there is strong evidence of the benefits however sustainable funding may be required. Following a query from Mrs K Tanriverdi on how patients receive the information, Ms Tweedie explained that patients are provided with information at breast cancer clinics however is also available via other pathways.	
	Mrs Marshall thanked Ms Tweedie for attending the meeting and congratulated her on the amazing achievement for her and the team.	
G/23/31	CHIEF EXECUTIVE'S UPDATE:	
G/23/31	Mrs T Davies, Chief Executive, provided an update on current issues relating to the Trust within the organisational strategic aims. She drew attention to the following key points:	
	 Strategic Aim 1: We will continuously improve the quality and safety of our services for our patients: Mrs Davies explained that there continues to be a significant focus on length of stay and the Trust is proactively engaging with system partners to ensure shared responsibility. Some key improvements have already taken place including the closure of escalation beds, reduction in non-elective length of stay, as well as improvements in A&E-related metrics. Some exceptions have been highlighted within the report including an increase in medication errors 	

Agenda Item	Discussion and Action Points	Action By
	however a detailed response has been undertaken and will be circulated. Mrs L Curry confirmed that a lot of work has been taking place including observing medicine rounds and support to nursing staff.	
	Strategic Aim 2: We will be a great organisation with a highly engaged workforce:	
	 An assurance report from the People and Organisational Development Committee will be provided later in the meeting however Mrs Davies highlighted that significant focus continues on ensuring that patients and colleagues remain safe during both the junior doctor and nursing strikes. Engagement work has been taking place with clinical leaders through the Clinical Strategy Group and working collaboratively to enhance visibility and transparency on decision-making. Mrs Davies highlighted that during these visits, it has been clear that staff are committed to the delivery of high quality patient care and focus will continue to ensure that staff are engaged by investing in the workforce and celebrating the work of colleagues around the Trust. 	
	 Strategic Aim 3: We will enhance our productivity and efficiency to make the best use of resources: Mrs Davies reported that there have been good performance improvements in respect of diagnostics, a reduction in proportion of patients waiting more than 18 weeks and improvements in urgent and emergency care metrics. She reported that the Executive Team is committed in ensuring the delivery of excellent care and further support will be explored via innovation and research 	
	projects. Strategic Aim 4: We will be an effective partner and be ambitious in our commitment to improving health outcomes:	
	 Mrs Davies attended the first Gateshead Committee at Place, a sub-committee of the Integrated Care Board, and Place leads have been invited to attend an interactive session with the senior managers to develop a collaborative approach to place-based working. Mrs Davies and Mr A Beeby, Medical Director are also engaging with partners to further understand support services at home and an engagement meeting with Community Based Care (CBC) Health Federation has taken place to develop a shared understanding of roles and responsibilities within the Community. Mrs Davies linked this with a question received from Mrs H Jones 	

Agenda Item	Discussion and Action Points	Action By
	around ensuring the quality of services at the Urgent Treatment Centre and explained that this service is provided by CBC which has been commissioned by the Integrated Care Board therefore there is a collective responsibility. She also highlighted that the Care Quality Commission has also recently undertaken an inspection.	
	Strategic Aim 5: We will develop and expand our services within and beyond Gateshead: • Mrs Davies explained that this relates to the sustainability agenda and highlighted that a shared strategy event was held with colleagues from QE Facilities to discuss opportunities to continue to work together to improve patient care and experience throughout Gateshead and beyond.	
	Questions from Governors: Mrs Davies highlighted that the questions received from Governors in advance of the meeting have been identified via the report however a query received from Mrs K Tanriverdi in relation to the Staff Survey Results will be covered within the report later in the meeting (Agenda Item 12).	
	Further discussion took place around the Urgent Treatment Centre and Mrs Jones felt that further clarification may be required for patients and Mrs Davies highlighted that this will be considered collectively with CBC. Mr Beeby reported that collective work continues however it is important for patients to receive the best service.	
	Dr A Lowes felt that further investment may be required around estates provision however highlighted that Trusts are still required to make efficiencies. Mrs Davies highlighted the pressures and challenges across the NHS as a whole however explained that the Trust will continue to work with partners to ensure the best services are delivered. Mrs K Mackenzie, Group Director of Finance and Digital, highlighted that the Trust is in a good position in relation to income and expenditure however further understanding around the impact of spending decisions is required. She welcomed discussions around any further ideas from the Council.	
	Thematic Review: Mrs Davies provided an update on the Trust's Thematic Review and reported that key themes have been identified from recent reviews, surveys and other sources of information in order to inform and influence the Trust's cultural and leadership development. She reported that mapping the themes to existing work is already underway and is included within the presentation. Information around this is currently	

Agenda Item	Discussion and Action Points	Action By
	being shared and has recently been presented to the Clinical Strategy Group. She drew attention to the following key points: • Strategy, planning and performance – further work is being undertaken around the delivery of enabling strategies and strategic direction across the organisation. • Clinical leadership and engagement – there is an appetite for greater clinical engagement and work is ongoing around the opportunities to improve communication with Board and operational managers • Opportunities to increase Board and wider senior team visibility – a number of solutions are being reviewed including Facebook Live and Tea and Chat sessions. • Freedom to Speak Up (FTSU) / organisational culture – a proposal for a full time FTSU Guardian is being developed to increase visibility and understanding. • Communications and stakeholder engagement – effective developments are being considered as well as developing relationships. • Equality, Diversity and Inclusion – to ensure the Trust is representative of our community and the diversity of our population and staff. • Understanding sustainable and vulnerable services – sustainable services review being undertaken • QE Facilities –a strategy day with QE Facilities colleagues is being arranged to develop a collective vision and strategy. Mrs Davies highlighted that a governance review has been commissioned to provide full assurance around decision making processes.	
	Mrs Davies concluded that a full delivery plan is being finalised which will include timescales and expected deliverables. Some queries were raised in relation to QE Facilities however it was acknowledged that a review would provide further assurances and Mrs Marshall highlighted that a session will take place at the next Governor workshop to provide further understanding and assurances. Dr A Lowes raised an issue in relation to parking permit applications for junior doctors and Mrs Davies will follow this up with Mr S Harrison, Interim QE Facilities Managing Director. Dr Lowes also welcomed that the results from the consultant survey had been included within the review and agreed with the themes therefore felt that it was important to share with consultant colleagues. Mrs Davies highlighted that the themes had been presented at the Clinical Strategy Group and it will also be presented to the Medical Staff Committee.	TD
	Mr J Bedlington felt that it was important to include public engagement within the Trust's plans and Mrs Marshall	

Agenda Item	Discussion and Action Points	Action By
	explained that this will be developed within the Membership Strategy Group.	
	Mr L Brown felt that the plans within the report were positive and queried whether a response from community stakeholders had been received. Mrs Davies explained that this will take place via the leadership team however has also met with Alice Wiseman and Cllr Caffery and they are supportive of building engagement with the wider public.	
	After discussion, it was:	
	RESOLVED: to receive the updates for assurance and information.	
G/23/32	ANNUAL PLANNING UPDATE:	
	Mrs K Mackenzie, Group Director of Finance and Digital, provided an update on the Financial Plan for 2023/24 and reminded the Council of the presentation at the last meeting in relation to the annual planning process.	
	The Trust's Financial Plan for one year covering the period 1 April 2023 to 31 March 2024, was submitted on 4 th May 2023 and provides a projection of how the Trust is expected to use its resources during this period. There is still work to do around the organisation's 3-5 year financial sustainability plan.	
	Mrs Mackenzie explained that the plan was completed ensuring value for money and highlighted that there is a focus on adjusted financial performance. She drew attention to the presentation slides and explained that the Trust reported a breakeven position for 2022/23 however due to changes in income levels the Trust is forecasting a £13m deficit for 2023/24 resulting in a reliance on non-recurrent support via efficiencies. There are strong robust processes in place to ensure these plans are delivered including a weekly working group which is currently reviewing all projects.	
	Following discussions in relation to the delivery of efficiencies, Mr K Singisetti felt that clinical engagement was important and Mrs T Davies, Chief Executive, confirmed that this is required to ensure changes are achieved and quality impact assessments will take place to ensure patient safety is maintained. She highlighted that discussions took place at the Clinical Strategy Group last week and there was a collective commitment around this.	
	Following consideration, it was:	

Agenda Item	Discussion and Action Points	Action By
	RESOLVED: to receive the update for assurance and information.	
0/00/00	DOADD COMMITTEE ACCUIDANCE LIDDATES	
G/23/33	BOARD COMMITTEE ASSURANCE UPDATES:	
	People and Organisational Development (POD) Committee: Dr R Bonnington, Non-Executive Director and Committee Chair, provided an update on key issues and assurances, key	
	risks and priorities from the Committee. She thanked Mr L Brown and Mrs H Jones for attending the Committee as Governor observers. Mr Brown felt that the structure of the Committee worked well, and the improvements achieved in relation to metrics and focus around supply and retention following the pandemic were commendable to the team.	
	She highlighted some of the issues considered and assurances received by the Committee since the last update to the Council in September 2022. This included the improvement work around the POD metrics and the launch of the People Strategy. Targeted work has taken place around the renewed approach to managing absence which has resulted in the reduction in absence rates.	
	Dr Bonnington highlighted some of the key risks including the impact of industrial action and workforce capacity and pressures. She also drew attention to the future key priorities for assurance including the thematic review outcomes and continued industrial action planning.	
	Following a query from Dr A Lowes in relation to escalation processes following the review of metrics, Mrs L Crichton-Jones, Executive Director of People & OD, explained that the metrics data is triangulated to ensure that oversight by the Committee and Executive Team via the Business Unit Quarterly Oversight meetings. Mrs J Baxter, Chief Operating Officer, highlighted that themes from the Staff Survey have been shared with Business Units and will ensure that clinical leaders are involved in developing plans. Dr Lowes felt that some staff find it difficult to communicate concerns and Dr Bonnington explained that the role of the new full-time Freedom to Speak Up Guardian would support this. Mrs T Davies, Chief Executive, also highlighted that this work is included in the thematic review areas around having an open culture and leaders being visible and engaging with staff. Plans are also in place to arrange further Board to Ward visits.	
	Mrs Marshall reminded the Council that Dr Bonnington will be leaving the Trust therefore Mrs Maggie Pavlou, Non-Executive Director, will take over as Committee Chair. Mrs L Crichton-	

Agenda Item	Discussion and Action Points	Action By
	Jones is also leaving the Trust and Mrs Amanda Venner has been appointed as Interim Director of People & OD.	
	Audit Committee: Mr A Moffat, Non-Executive Director and Committee Chair, provided an update on key issues and assurances, key risks and priorities for the Committee.	
	He drew attention to some of the key issues considered and assurances received by the Committee including receiving the QE Facilities and Charitable Funds Annual Accounts. The Committee also receives regular updates from the Executive Risk Management Group and has reviewed the draft Risk Management Strategy.	
	Mr Moffat highlighted some of the key risks identified by the Committee including the implementation of recommended audit and counter fraud actions and this is being monitored by the Compliance Group. He reported that two additional audit reviews have taken place in relation to QE Facilities Capital and Payroll and Procurement and a QE Facilities governance review has recently commenced.	
	Following a query from Mrs H Jones in relation to the need for an extraordinary meeting to approve the QE Facilities and Charitable Funds Accounts, Mr Moffat explained that this was due to a process issue however this is being looked at going forward.	
	After further discussion, it was:	
	RESOLVED: to receive the reports for assurance.	
G/23/34	LEAD GOVERNOR AND DEPUTY LEAD GOVERNOR APPOINTMENTS:	
	Mrs J Boyle, Company Secretary, presented the report which requests the Council to formally ratify the appointments of the Lead Governor and Deputy Lead Governor for one year.	
	Mrs Boyle reported that one nomination was received for each role and Governors were invited to respond to indicate whether the nominations were supported. All Governors who voted unanimously supported the appointment of Abe Rabin to the position of Lead Governor for one year and Steve Connolly to the position of Deputy Lead Governor for one year, both effective from 19 May 2023.	
	Mrs Marshall and the rest of the Council congratulated Mr Rabin and Mr Connolly and after consideration, it was:	

Agenda Item		Discussion and Action Points	Action By
	RESOLVED:	to formally ratify the appointment of Abe Rabin as Lead Governor and Steve Connolly as Deputy Lead Governor for a period of one year, commencing on 19 May 2023.	
G/23/35	OHALITY ACC	COLINTS COVERNOR STATEMENT 2022/23:	
G/23/35	Mrs Wendy Morprovided a copto the Trust's Council of in two dedicated Account and all Governors awere requested prepared and part. She explicated that other community be address. Mrs H Jones for from previous the development of the statement of the development of the statement of the statement of the development of	cradden, Strategic Lead Clinical Effectiveness, by of the Council of Governor's formal response Quality Account for 2022/23. Governors have had the opportunity to partake ed workshops on the development of the Quality quality priorities on 30 th January 2023 and 19 th a draft of the Quality Account was shared with as part of the consultation process. Comments d to be forwarded to enable the response to be Mrs McFadden thanked Governors for taking ained that specific points have been included in to reflect views of the Governors and highlighted ments received in relation to operational issues sed via the most appropriate route. Telt that the process had significantly improved years and welcomed the opportunity to discuss ent of the Quality Accounts via the workshops. Secussion, it was: to approve the statement to be included in the Trust's Quality Account 2022/23.	
		·	
G/23/36	NHS STAFF S	SURVEY RESULTS 2022:	
	Organisational Organisational	on-Jones, Executive Director for People and Development, and Ms Sophia Grainger, Development Practitioner, provided a n the Trust's results for the NHS Staff Survey	
	trusts using Pi highest respo previous year. scores which accessibility to	eported that the Trust ranked 15 out of the 65 cker (the survey provider) and had received its use rate of 51% compared to 47% on the She highlighted the top and most improved included an increase in scores relating to learning and development opportunities.	
	identified fror	rew attention to the areas of focus which were n the 2021 survey relating to personal	

Agenda Item	Discussion and Action Points	Action By
	development, discrimination from service users and work-related stress, and highlighted the progress made around these. This included appraisal training for managers and a new appraisal system has been introduced. There has been a positive increase in the question relating to work related stress however there has been a significant decline in staff coming to work when not feeling well enough therefore there is continued focus around managing absence and staffing pressures.	
	New areas of focus include raising concerns and pay rates and Ms Grainger highlighted that work is ongoing around Freedom to Speak Up (FTSU) champions. Mrs Crichton-Jones explained that this involves increasing resources and the team is in the early stages of refreshing the strategy which will include appointing an additional seven FTSU champions. Following a query from Mr S Connolly in relation to ensuring staff are aware of the new champions, Mrs Crichton-Jones reported that this is being taken forward with the Communications team. Mrs H Jones queried whether additional champions were being considered and Mrs Crichton-Jones explained that further posts will be considered as visibility increases.	
	Ms Grainger concluded by highlighting that an interactive dashboard is now available for managers to access and will ensure accurate feedback is available. People action plans are also now available to Business Units and will be reviewed via the Quarterly Oversight meetings.	
	Following a query from Mrs K Tanriverdi in relation to how quickly complaints regarding discrimination and physical violence from other employees are investigated, Mrs Crichton-Jones reported that these are highlighted via the People and OD Committee and on average takes between 50-60 days to complete however it is hoped that this can be reduced further although this is dependent on manager capacity. Should a complaint be upheld, learning is an important part of the work and feeds into policy update and training programmes. Dr G Findley, Chief Nurse, confirmed that there is focussed work currently taking place around violence and aggression.	
	Mrs Crichton-Jones reported that there were a number of positive messages within the results and it was important to celebrate these achievements whilst working towards continuous improvement. Mrs T Davies, Chief Executive, highlighted the links to the thematic review and survey results and work will continue with the People and OD teams to ensure that areas of focus are progressed.	
	Following further discussion, it was:	

Agenda Item	Discussion and Action Points	Action By					
	RESOLVED: to receive the update for assurance.						
G/23/37	GOVERNANCE AND DEVELOPMENT COMMITTEE UPDATE:						
	Mrs Marshall provided the Council with an overview of the assurance, decisions and key issues discussed as part of recent Governance and Development Committee meetings.						
	The Committee has met once since the last Council of Governors' meeting in February 2023 and Mrs Marshall chaired the meeting due to absence.						
	The key issues discussed at the meeting included a review of the action plan from the NHS Providers' training and discussions took place around Governor training and development including ideas for workshop sessions. Mrs Marshall reported that it has been agreed to provide a session around QE Facilities and she requested Governors to highlight any other subjects that they may find useful for future sessions.						
	Following discussion, it was:						
	RESOLVED: to receive the update for assurance.						
G/23/38	MEMBERSHIP STRATEGY GROUP UPDATE:						
	Mr S Connolly provided the Council with a verbal update on the key messages from the recent Membership Strategy Group on 10 th May 2023.						
	He reported that discussion took place in relation to the recommencement of membership engagement and encouraged Governors to arrange to meet with local groups. Discussion also took place around setting up a stand in the Surgery Centre and Governors have been invited to participate in this. The membership newsletter is currently under development and a printed version will be distributed on this occasion with plans in place for an annual printed version and quarterly electronic versions going forward.						
	PLACE visits have recently recommenced and Governors have also been invited to take part in these. A session at the next workshop has been arranged to highlight the role of the team as well as the process within the organisation. There are also plans to recommence the 15 steps challenge and further information will be provided around the relaunch.						

Agenda Item	Discussion and Action Points					
	The Group felt that it would be beneficial to reconsider the buddying system for new Governors and a request for volunteers was re-issued.					
	Following consideration, it was:					
	RESOLVED: to receive the verbal update for assurance.					
0.100.100						
G/23/39	CYCLE OF BUSINESS:					
	Mrs J Boyle, Company Secretary, presented the new cycle of business for the Council of Governors over 2023/24 and highlighted that this will provide a long-term view of key agenda items up until February 2024.					
	Following consideration, it was:					
	RESOLVED: to receive the cycle of business for information.					
0/00/40						
G/23/40	ANY OTHER BUSINESS:					
	Constitutional Amendment: Mrs J Boyle, Company Secretary, presented the proposed constitutional amendment to remove the clause which prevents Board members from serving on more than one NHS Board.					
	She explained that this legacy clause has been identified as a potential barrier to the recruitment of candidates to Board positions during the current Non-Executive Director recruitment. Any amendment to the constitution requires approval by both the Council of Governors and Board of Directors and requires more than half of the Governors voting to approve the amendment and more than half of the Board of Directors voting to approve the amendment.					
	Mrs Marshall drew attention to Section 2.8 within the report which provides the proposed amendment to clause 7.6.1 (d). The Council were supportive of the amendment and therefore will also be presented at the Board of Directors meeting next week.					
	After consideration, it was:					
	RESOLVED: to approve the proposed change to remove the clause from the constitution which prevents Board members from serving on more than one NHS trust board.					

Agenda Item	Discussion and Action Points	Action By					
G/23/41	REVIEW OF THE MEETING:						
	The Council were invited to provide any areas of improvement or learning which can also be sent directly to Mrs Marshall and Mr Rabin.						
	Mrs Marshall felt that this had been a good meeting with good discussions and engagement. Dr Lowes wished to thank the Executive and Non-Executive Directors for their attendance and engagement.						
G/23/42	PATE AND TIME OF NEXT MEETING: RESOLVED: that the next meeting of the Council of Governors will be held at 11.00am on Wednesday 20th September 2023.						



Council of Governors' Action Log

Not yet started
Started and on track no risks
to delivery
Plan in place with some risks
to delivery
Off track, risks to delivery and
or no plan/timescales and or
objective not achievable
Complete

Agenda Item Number	Mosting	Agenda Item Name	Action	Deadline	Lead	Progress	RAG- rating
G/22/42	28.09.2022	Governor Questions	To confirm the plan to replace vending machines and pick up concerns in relation to the TIMS service	16.11.2022	JMB	Nov 22 – meeting with TIMS confirmed as being held however will confirm whether this can be closed with Mr Lamport May 23 – all vending machines in ECC have been replaced and are card payment enabled. Action to remain open until machines in theatres have been replaced Sept 23 – vending machines in theatres are now operational. Action recommended for closure.	
G/22/58	16.11.2022	Governor Questions	NIV services – alternative models being considered and discussions to take place with team. To provide feedback	15.02.2023	GF	The provision of a non-invasive ventilation service has been included within the newly developed clinical strategy as a priority. The teams will be working up options for consideration and an update will be provided at the September meeting	
G/23/31	17.05.2023	Chief Executive's Update	To follow up with the Interim Managing Director of QE Facilities on issues in relation to the provision of parking permit applications for junior doctors	20.09.2023	TD / SH	Sept 23 – parking information is presented at Junior Doctors Induction, Junior Doctor role requirements confirmed, all Junior Doctors are now issued with on-site parking upon receipt of a permit application. Parking dispensation can be arranged with Facilities Admin if necessary.	

Actions closed from last meeting

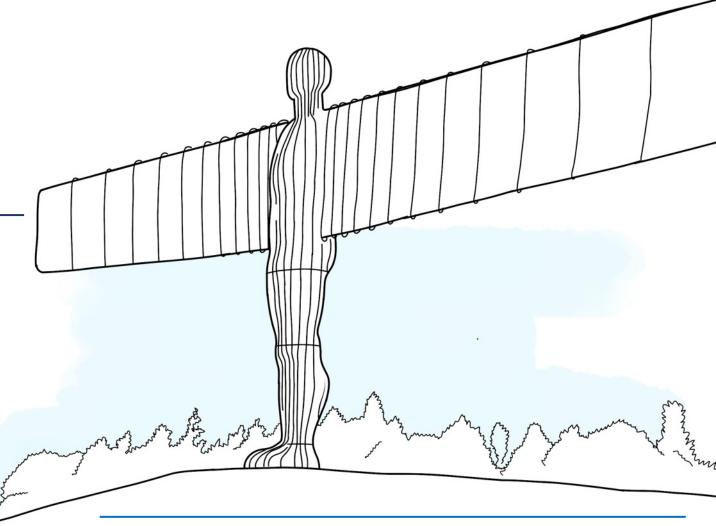
Agenda Item Number	Date of Meeting	Agenda Item Name	Action	Deadline	Lead	Progress	RAG- rating
G/22/57	16.11.2022	Showcase Presentation	PNA programme to be considered within other professions. Plans in place for POD team to review	15.02.2023	LCJ/GF	May 23 - All professions can now access coaching however capacity is being managed. Action agreed to be closed	
G/23/15	15.02.2023	Lead and Deputy Lead Governor process	Expressions of interest to be invited for Lead Governor then Deputy Lead with results to be formally presented at next Council meeting	17.05.2023	JB	On next agenda (17 May 2023) Action agreed to be closed	



North East and North Cumbria ICB Joint Forward Plan – our response

Nicola Bruce – Director of Strategy, Planning and Partnerships

20th September 2023



Background and context



National guidance

- NHS England requires all Integrated Care Boards and their partner NHS Trusts to publish a fiveyear Joint Forward Plan describing how they:
 - intend to arrange and/or provide NHS services to meet their population's physical and mental health needs
 - will deliver of the NHS Mandate and NHS Long Term Plan in the area
 - will meet the legal requirements for ICBs
- The Joint Forward Plan is an NHS document aligned to the integrated care partnership strategy and should reflect partnership working.

Background and context cont'd



NENC Integrated Care Strategy published December 2022

final-nenc-integrated-care-strategy-16-december-2022.pdf (northeastnorthcumbria.nhs.uk)

- Draft Forward Plan complementary to the strategy.
- A delivery plan for parts of the strategy related particularly to NHS delivered or commissioned services, but within the broader partnership context

draft-nenc-joint-forward-plan.pdf (northeastnorthcumbria.nhs.uk)

- The Forward Plan is a national requirement for all Integrated Care Boards (ICBs) and partner Foundation Trusts covering the period 2023/24 2028/29
- The ICB state that the "Joint Forward Plan provides:
 - A strategic overview of our key priorities and objectives for the medium term.
 - A high-level summary of our priorities and objectives.
 - A summary of the work programmes we will deliver to achieve our medium-term objectives".

Stakeholder engagement



- ICB Forward Plan was shared with stakeholders in July 2023
- Sought the views of partner organisations and stakeholders during July and August. All feedback was welcomed and ICB particularly wanted to understand:
 - key issues missing from the draft, or which needed to be described differently
 - if the draft was consistent with key priorities at Place, particularly Health and Wellbeing Boards and Place Committees
 - if the draft was consistent with key priorities for NHS, local authority and voluntary, community and social enterprise partner organisations
- The Forward Plan was shared widely across Gateshead Health inc. via Clinical Strategy Group, Senior Management Team (SMT), Trust Board, Team Brief, Gateshead Health Weekly
- Health and Wellbeing sessions
- Time allocated on Trust Board Development session held on 23rd August with attendance from Lynn Wilson, Director of Place (Gateshead) and Cllr Lynne Caffrey, Chair of Gateshead Health and Wellbeing Board and ICP North Area Chair
- Submission by the deadline of 31st August 2023

North East and North Cumbria Plan



NHS Plan aligned to the ICP Better health and wellbeing for all strategy.











Overview of action plans for each ICP Strategy Goal, Enabler and Service.

Overview of action plans for Local Authority Place or groups of Places.

Graphic summary of the Plan



FOUR key goals...







Giving children and young people the best start in life

North East North Cumbria Health & Care Partnership

⊥+∪ ♥

Healthier & Fairer Lives

Prevention & Public Health

Healthcare Inequalities (CORE20+5)

Social & Economic Disparities Better Health & Care Services

Safeguarding

Carers

Best Start in Life

Maternity & (
Neonatal

Child Health & Wellbeing

SEND

Primary & Community Care

Pharmacy, Optometry & Dental

Personalised

Care

Continuing

Healthcare

Access to General Practice

Ageing Well

End of Life Care **Urgent & Emergency Care**

Discharge & Transfers of Care

Urgent Primary

Care

Urgent

Community

Response

Ambulance Transformation

Urgent Mental Health

> Patient Transport

Planned Care

Elective Recovery

very

Waiting Well Diagnostics

Outpatient Long Term Transformation Conditions

Mental Health, people with a Learning Disability & Autistic People

Suicide Prevention Community MH Transformation

Drug & Alcohol

Children & Young People

Services

People with SMI

Homes not Hospitals

FIVE key enablers...



A skilled, compassionate and sufficient workforce



Innovating with improved technology, data, equipment, and research



Making the best use of our resources and protecting the environment



Cancer

Working together to strengthen our neighbourhoods and places

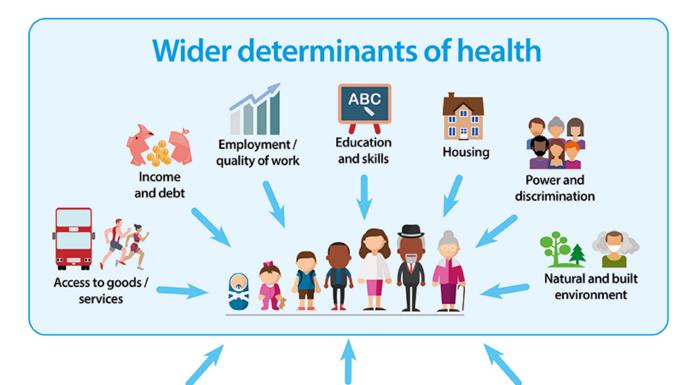


Involving people to coproduce the best solutions

Gateshead Health and Wellbeing Strategy







Health behaviours

- Smoking
- Diet
- Alcohol



Psycho-social factors

- · Isolation
- Social support
- Sovial networks
- · Self-esteem and self-worth
- · Perceived level of control
- · Meaning/purpose of life

Physiological impacts





 Anxiety/ depression



Our Policy Objectives

Give every child the best start in life

Enable all children, young people and adults to maximise their capabilities and have control over their lives

Create fair employment and good work for all

Ensure a healthy standard of living for all

Create and develop healthy and sustainable places and communities

Strengthen the role and impact of ill health prevention.



Gateshead Place Action Plan

- Priority 1: Giving children and young people the best start in life
- **Priority 2**: Better health and care services developing integrated neighbourhood teams in line with the next steps for integrating primary care, community services and primary care, mental health, learning disability and people with autism, and urgent care
- **Priority 3**: Fairer outcomes for all the need to pursue a strategic system wide approach to tackle continuing inequalities
- Priority 4: Longer and healthier lives mental health, learning disabilities, autism and ageing well

Gateshead Health strategy



Our patients Our people Our partners

Our vision captures what matters to us – delivering outstanding compassionate care.

Our five values can easily be remembered by the simple acronym ICORE



Innovation

We look for new ways to improve what we do and recognise that we all have a role to play in our continuous improvement.



Care

We care for our patients, communities, each other and ourselves with kindness and compassion.



Openness

We always act with integrity and transparency and are open and honest with ourselves and each other.



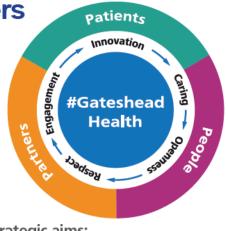
Respect

We treat everyone with respect and dignity, creating a sense of belonging and inclusion.



Engagement

We are inclusive and collaborative in our approach, working as a team and with our partners to deliver the best care possible.



Our Strategic aims:

- We will continuously improve the quality and safety of our services for our patients.
- We will be a great organisation with a highly engaged workforce.
- We will enhance our productivity and efficiency to make the best use of our resources.
- We will be an effective partner and be ambitious in our commitment to improving health outcomes.
- We will develop and expand our services within and beyond Gateshead.

Our strategic intent:

- Centre of Excellence for Women's Health
- Outstanding District General Hospital
- Diagnostics



Gateshead Health NHS Foundation Trust #GatesheadHealth



Report Cover Sheet

Agenda Item: 8

_	1						
Report Title:	Mask Making Project Update						
Name of Meeting:	Council of Governors						
Date of Meeting:	20 Septembe	er 2023					
Author:	Steven Harris	son, Interim Mai	naging Director	, QE Facilities			
Executive Sponsor:	Steven Harris	son, Interim Mai	naging Director	, QE Facilities			
Report presented by:	Steven Harris	son, Interim Mai	naging Director	, QE Facilities			
Purpose of Report Briefly describe why this report is being presented at this meeting	Decision:	Discussion:	Assurance:	Information: ⊠			
being presented at this meeting	To provide a s	ummary of the st	atus of the Masl	(Production			
Proposed level of assurance – to be completed by paper sponsor:	Fully assured assured assured app No gaps in assurance identified assurance Significant assurance gaps						
Paper previously considered by: State where this paper (or a version of it) has been considered prior to this point if applicable Key issues: Briefly outline what the top 3-5 key points are from the paper in bullet point format Consider key implications e.g. Finance Patient outcomes /	 Mask Making Project considered at Trust and QEF Boards The project has now been halted due to unfavourable market conditions. The investments made by QEF have been subsequently written off. Remaining assets (manufacturing plant / materials) are in the process of being disposed of. 						
experience Quality and safety People and organisational development Governance and legal Equality, diversity and inclusion	No remaining employees retained in connection with the project. The Council of Covernors are solved to:						
Recommended actions for this meeting: Outline what the meeting is expected to do with this paper	The Council of Governors are asked to: Note the contents of the attached update report.						

Trust Strategic Aims that the report relates to:		We will continuously improve the quality and safety of our services for our patients					
report relates to.		and the second second					
		We will be a great organisation with a highly					
	2 6	engaged workforce					
				e our produc	•	efficiency to	
	3 r	make the best use of resources					
				ffective partr			
	4 c	our commitment to improving health outcomes					
		' ' '					
	5 a	and beyond Gateshead					
Trust corporate objectives	SA5.1 –	using ou	r skills	and experti	se to ensure	Э	
that the report relates to:	organisa	tional su	staina	bility			
Links to CQC KLOE	Caring	Respor	sive	Well-led	Effective	Safe	
				\boxtimes			
Risks / implications from this							
Links to risks (identify	FIN 3127 - There is a considerable risk that the Trust is						
significant risks and DATIX	unable to meet the financial projections included in its						
reference)	plan. (16)						
Has a Quality and Equality	Ye	es	No		Not a	pplicable	
Impact Assessment (QEIA) been completed?							

Mask Production Project - Status Update

1. Background

- 1.1. During the Covid-19 pandemic, the availability of suitable PPE, including FFP2 and FFP3 masks, became an ongoing issue. The global PPE supply chain came under significant pressure as the effects of the pandemic took hold, resulting in prices for these products increasing significantly against pre-Covid levels.
- 1.2. During the early stages of the pandemic in particular, supplies to Gateshead Health were sporadic, with consistency of product quality a constant concern.
- 1.3. In seeking to ensure a consistent supply of masks and with a view to exploiting potential commercial opportunities for the benefit of the Trust, QE Facilities (QEF) put forward a business case to the QEF and Trust boards in July 2020. This case outlined a proposal to create a manufacturing vehicle for the production and supply of personal FFP2 & FFP3 Face masks to both the Trust and other healthcare providers throughout the region and beyond.
- 1.4. At that time, the case set out a plan for an initial, year one investment, of c. £1.5m. This included capital expenditure relating to equipment acquisition and operational costs (wages, utilities, materials etc.).
- 1.5. In addition to resolving supply issues within the NHS, and Gateshead Health in particular, it was also anticipated that profits generated from this project would then flow back to the Trust.
- 1.6. Extensive work was subsequently undertaken by QEF to attempt to secure the necessary resources, accreditations and rights over the ensuing months. This work involved the acquisition of manufacturing equipment and materials together with the establishment of a team of five staff. In particular a significant amount of effort was expended in seeking to gain accreditation for the masks.
- 1.7. During that time however a number of factors arose which subsequently proved to have a detrimental impact on the viability of the project, in particular significant changes in market conditions arising through government intervention.
- 1.8. NHS England (NHSE) took control of the PPE supply chain, eventually providing free supplies to Trusts. These 'push stocks' that were established were constantly extended and indeed still remain in place with a currently projected end date of March 2024.
- 1.9. Allied to this stock intervention, the UK's intensive vaccination programme led to an eventual fall in Covid -19 cases with a corresponding reduction in the requirement for masks. These factors meant that as demand fell, forecasted revenue streams contracted and eventually the commercial justification for the project ceased to exist.

2. Current Status

- 2.1. Given the position outlined above, both the QEF and Trust boards took the decision in in February 2023 to exit from the mask production project, and to do so wherever possible by the financial year end. At that point, both boards took the view that no further investment should be made into this venture.
- 2.2. A project decommissioning plan which included governance reviews, asset disposals, staff release and redeployment, communications etc. was subsequently established.
- 2.3. The actions associated with exiting from the project are now virtually complete.
- 2.4. All of those individuals employed on the project have since left the organisation with the exception of one employee who has secured a new role in the Logistics department.
- 2.5. All stock and equipment has now been written off and either disposed of, or is in the process of being sold on. A small fee is currently payable to Northumbria Healthcare for the lease of the building where the manufacturing equipment currently sits. This lease is due to be terminated in the next month.
- 2.6. The total estimated financial loss associated with this project was c. £1.8m. This sum has now been fully written down.
- 2.7. Other than the remaining actions outlined above, no further work is being undertaken on this project which is considered to be closed.

3. Recommendation

3.1. The Council of Governors are asked to:

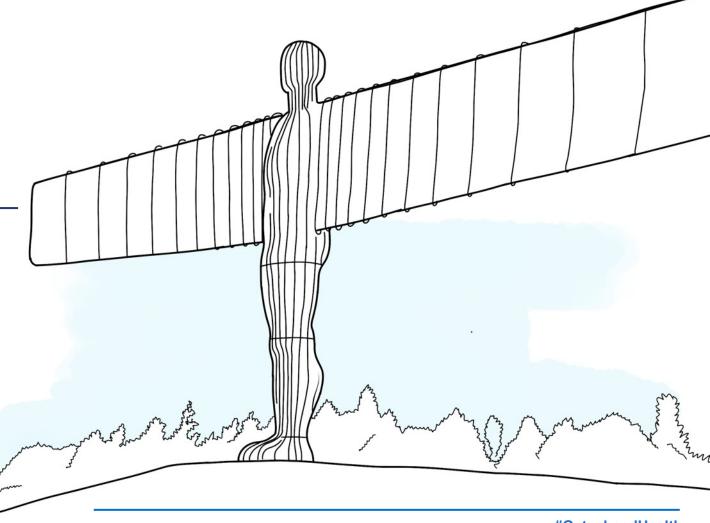
Note the contents of this update report



Deputy Chief Executive's Update to the Council of Governors

Dr Gillian Findley, Deputy Chief Executive and Chief Nurse

20 September 2023



Gateshead Health NHS Foundation Trust

Strategic Aim 1: We will continuously improve the quality and safety of our services for our patients

- Continue to develop our framework of clinically-led and management supported approach.
- Celebrated the first anniversary of the use of our **robot** in theatres. 136 patients have been treated so far and four surgeons are fully trained to operate it.
- Pioneered a new **dietetics service** for those living with cancer in partnership with Macmillan. There is already evidence of better outcomes through improved nutrition extending both the length and quality of life for patients.
- The North East and Cumbria Learning Disability Network have been shortlisted for the Strengthening the
 Foundation award in the Patient Experience Network National Awards (PENNA) for the Learning
 Disability Diamond Acute Care Standards. The supporting evidence submitted by the network was
 provided by Amy Cole, our Lead Nurse for Learning Disabilities, who provided a case study about the use
 of the diamond standards at Gateshead.
- Opened our new **ward 28** in the Peter Smith Surgery Centre to accommodate elective orthopaedic patients at the end of August. This provides a high-quality ring-fenced service to support reducing the number of long waiting patients for elective orthopaedic surgery.
- Leading indicator updates (July 23 data):
 - Good progress in closing actions on our CQC action and monitoring plans.
 - Our C-Difficile reduction is progressing well and we remain below the threshold of 23 actual incidents for 2023/24
 - Both of our **mortality indicators** are showing as being within the expected ranges





<u>Engagement, involvement and visits:</u>

- Theatres
- Robot event
- Safety Triangulation meeting





Strategic Aim 2: We will be a great organisation with a highly engaged workforce





- It is with deep sadness that we share that our colleague, Rodica Raican, a healthcare support worker from ward 8, unexpectedly passed away. Rodica was a cherished friend and colleague who demonstrated dedication, compassion and care to her patients and her colleagues. Our thoughts are with her beloved husband Mario, who is also a colleague on ward 9, her family, friends and colleagues.
- We are shocked and saddened by the actions of Lucy Letby at the Countess of Chester and our thoughts are
 with the victims and families. As a Board we produced an immediate response for our colleagues, providing
 assurance and encouragement that we will always listen to concerns, anxieties and worries. Our full time
 Freedom to Speak Up Guardian commences in post in October, and alongside our Champions, this will
 strengthen our Freedom to Speak Up structures and capacity.
- **Industrial action** continued in respect of junior doctors and consultants including the first joint strike day on 20 September.
- Welcomed our **new doctors in training** at the beginning of August.
- The **NHS staff survey** is about to be launched on 2 October. Feedback from this survey is very important for helping us to understand where we need to improve and make changes.
- Our **Allied Health Professional Conference** was held on the 12 September, including excellent presentations and sessions on health inequalities, health and wellbeing and clinical services.
- Celebrated the first year of international recruitment with our valued colleagues.
- Leading indicator progress (July 2023 data):
 - Our **staff engagement indicator** score fell below the target of 6.9 as measured through the quarterly Pulse survey. Plans are in place to encourage engagement.
 - Staff **vacancy levels** are 3.7% which is below the threshold of 5% set for the year.
 - Sickness absence remains slightly above threshold at 5.3% against a threshold of 5%

Engagement, involvement and visits:

- Cragside
- ❖ St Bede's
- Maternity
- ❖ IVF
- Staff Governor meeting





Strategic Aim 3: We will enhance our productivity and efficiency to make the best use of resources



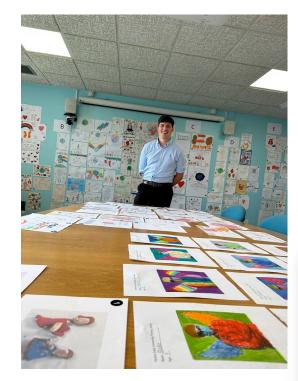
- Under the NHS **System Oversight Framework**, NHS England has confirmed a change in the Trust's classification from segment two to **segment three**, with an identified need for mandated support. This relates to our planned deficit position. We are looking carefully at our costs and productivity, and remain committed to our core strategic ambitions, which will be key to financial sustainability.
- Launched a **new innovative digital patient engagement service** designed to reduce our reliance on paper and provide patients with a quick and easy way to accept, cancel or amend an appointment and view correspondence. It will also offer reminders and help to reduce non-attendance. It is being piloted in breast services before being rolled out to all clinical areas.
- Launched our 'back to basics' programme across the Trust which aims to improve our services for patients and staff by ensuring that we are getting the things right that make a difference.
- Leading indicators (July 2023 data):
 - Timely access to a bed after decision to admit (target = 60% within 1 hour) is below trajectory with performance of 11.61%. Key actions estates work, review of site resilience function, focus on discharge.
 - **Length of stay** is 4.5 days against a target of less than 4. Impacted by internal and external factors. Work being undertaken by system-wide resilience group and our Clinical Strategy Group.
 - 11 **12-hour trolley waits** in July. Year-to-date position has improved compared to 2022/23 but above zero tolerance policy reviewing internal escalation process and digital triggers.
 - Risk identified re: achieving zero 52 week waits by March 2024.
 Key risks around trauma and orthopaedics and paediatrics.
 Improvement plans developed and waiting list validation ongoing.

Finance KPIs – July 2023	YTD Plan £000s	YTD Actual £000s	Difference £000s
Performance against NHSE plan after donated asset adjustment (deficit position)	5,352	5,247	(105)
Performance against cost reduction target	3,584	2,268	1,316
Capital spend	5,258	3,002	(2,256)
Cash position	49,596	45,307	4,279

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Strategic Aim 4: We will be an effective partner and be ambitious in our commitment to improving health outcomes

- Dr Andy Lowes, Staff Governor and Consultant in Anaesthetics and Critical Care, chairs our Organ Donation Committee. He has worked closely with **local schools** to encourage pupils to develop artwork to **raise awareness of organ donation**. Andy dedicated a significant amount of his own time to make this happen, delivering an amazing display of artwork. Governors and colleagues were invited to vote and the winning artwork will be displayed in the Trust. Thank you to Andy and all the pupils who took part!
- Our **Governor elections** are underway, with the nomination period closing on 27 September.
- Gateshead College students have developed a mural to help alleviate distress among patients with dementia at our Cragside unit. The artwork evokes a sense of home and familiarity for dementia patients, encouraging discussions and fostering a relaxed environment.
- Established a new service in partnership with Gateshead Council's Public Health team. The 14 week Strength and Balance classes are provided for over 65 year olds living with mild to moderate frailty and a history of falls, reduced confidence, independence or social isolation. Excellent feedback has been received from participants.



<u>Engagement, involvement</u> and visits:

Gateshead Health

- Executive Team meeting with counterparts at Northumbria Healthcare
- North Provider Collaborative CEO meetings
- Winter planning event at Gateshead Council



Strategic Aim 5: We will develop and expand our services within and beyond Gateshead





- Hosted our Open Day on 8 July all 350 free tickets were reserved by members of the public. The Open Day was a great opportunity to share information on health screening programmes, community services, recruitment opportunities, engagement and involvement and our charity.
- Steve Connolly, Deputy Lead Governor, and Michael Loome, one of our volunteers and a former public Governor, hosted the Membership and Volunteer Recruitment stall.

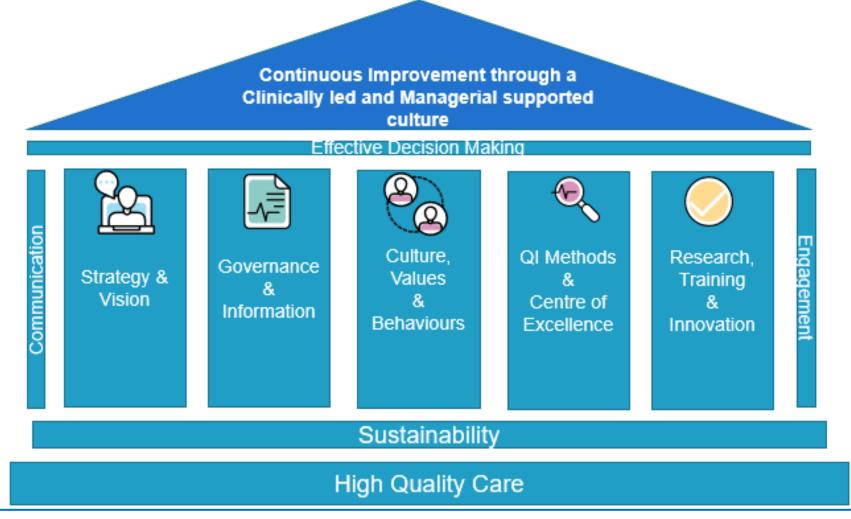




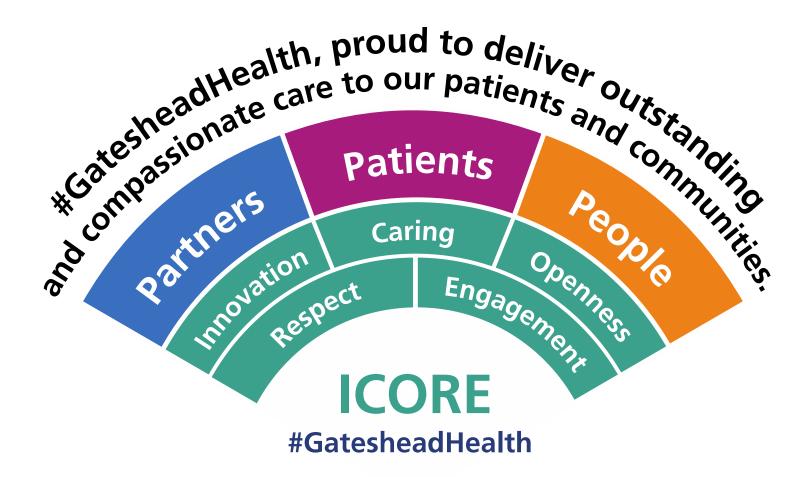
Our framework for delivery



Aim: a coordinated collection of strategic processes and decisions that together enable the most effective remainded to balance of organisational change and business as usual







Gateshead Health NHS Foundation Trust

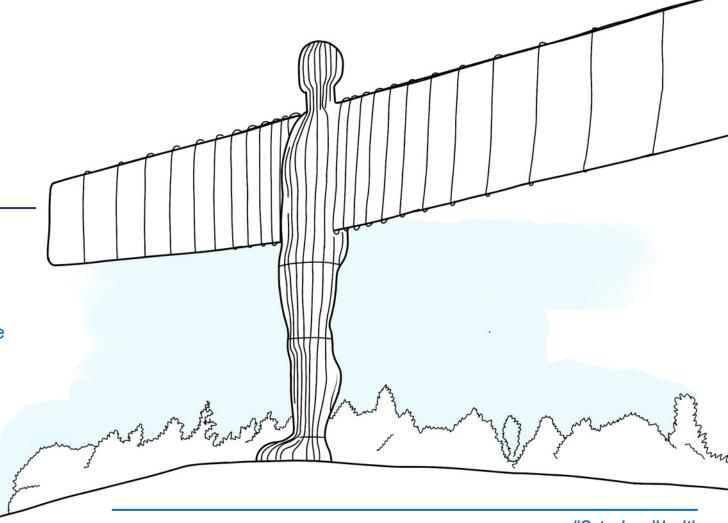


Work of the Digital Committee (DC)

Andrew Moffat, Chair of the Committee

19 September 2023

(last update presented to CoG Feb 23, three Digital Committee meetings since then: Apr 23, Jun 23, Aug 23)



Gateshead Health NHS Foundation Trust

#GatesheadHealth

Regular reports received, issues considered and assurances received



Strategy and Planning

Organisational strategic objectives
Digital Strategy
Digital Delivery Plan
EPR Strategy

Operational Service Delivery

Service effectiveness
Clinical coding
Cyber security
Information Risk Management
Information Governance
Records management

Regulatory and Governance
Internal audits and external reviews
Internal Audit plan

Risk

Board Assurance Framework Organisational Risk Register

Organisational Awareness

DC sub committees:
Digital Transformation Group (DTG)
Digital Assurance Group (DAG)

Strategy and Planning



Reports received	 Digital strategy – Approved at Jan 23 Trust Board EPR strategic outline business case approved to progress to full business case by Exec Mgt Team (Feb 23). Re-evaluation of options requested with wider clinical engagement (May 23) Digital delivery plan – tracking projects supporting the delivery of the Organisation's strategic objectives allocated to DC (every meeting)
Issues considered	 Prioritisation of projects within digital delivery plan Delivery and monitoring of 2023/24 strategic objectives and projects EPR outline/full business case – re-evaluation of options and updated timeline
Assurances received	 Prioritised delivery plan reviewed monthly by Digital Transformation Group (DTG) and Digital Clinical Optimisation Board EPR outline business case reviewed / endorsed by DTG, Clinical Strategy Group, and Exec Mgt Team.

Operational Service Delivery (KPIs) – every meeting



Reports received	 KPI dashboard (every meeting) - service effectiveness, clinical coding, cyber security, information risk management, information governance, records management Remedial action on underperforming KPIs
Issues considered	 Areas of underperformance Trust-Wide (e.g. Information Risk Management, Local Records Management, Systems Data Quality) Areas of underperformance Digital (e.g. Service Desk Call Resolution) KPI target setting, ownership, RAG rating and escalation process
Assurances received	 Detailed review by Digital Assurance Group (DAG) Approval of digital KPIs by SMT (Mar 23) Review and strengthening of KPIs utilised and supporting process to increase assurance currently underway

Gateshead Health NHS Foundation Trust

Regulatory and Governance – Internal / External Audits (every meeting)



Reports received	 Internal audit reports - Digital Open audit actions - Digital Annual digital audit plan, input and progress External audits and reviews, including Data Security and Protection Toolkit (DSPT), penetration testing, cyber security and phishing report NHS England Digital Maturity Assessment (Aug 23)
Issues considered	 Overdue and revised audit action delivery dates 'Limited assurance' on IT Asset Management Audit (Jun 23) and Data Security and Protection Toolkit (Jun 23) Internal and external audits assurance levels
Assurances received	 Implementation of audit action recommendations AuditOne audits undertaken as planned, 'Good assurance' on Allocate System General Controls and Robotic Process Automation (Apr 23) DSPT Standards Met (Jun 23)

Organisational Risk Register as at Sept 23



Risk ID:1490

Risk of inappropriate access; use; disclosure of data due to failure to manage information assets

(Initial Risk Rating 25, Current Risk Rating 15, Target Risk Rating 3)

Risk ID: 1797

Risk of failure to review appropriate information across multiple sources of clinical records stored in systems and on paper.

(Initial Risk Rating 25, Current Risk Rating 12, Target Risk Rating 8)

Risk ID: 1636

Cyber risk relating to patching

(Initial Risk Rating 25, Current Risk Rating 10,

Target Risk Rating 5)

Key priorities for assurance over the next 6 month - performance improvement...



Development and Approval of Clinical Systems Full Business Case

Operational Performance (KPIs)

Trust wide ownership of Information Risk Management

Delivery of the Digital Delivery Plan

Delivery of Corporate Objectives (allocated to Digital Comm), Organisational Risks and Board Assurance Framework



Any questions?



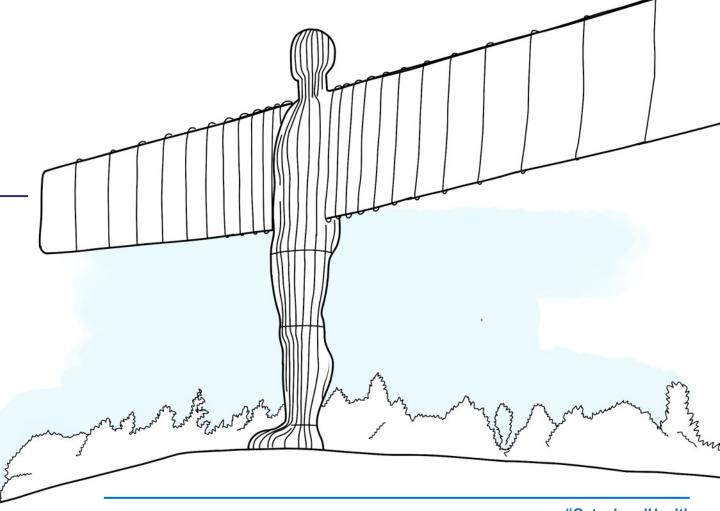




Work of the Charitable Funds Committee

Mike Robson, Chair of the Committee

20 September 2023



Examples of issues considered and assurances received



Secured £30,000 for NHS
Charities Development Grant and
this is in progress

Charity policy approved by Trustee Board – now aligned to strategic direction of the charity

Corporate partnership scheme running and have secured one partner with 3-4 currently in the pipeline

Each fund from department/wards has a spending plan that is reviewed on a 6-monthly basis

The operational group (sub-group of this committee) meets on a monthly basis with the governance around the charity strengthened

Supported a number of projects via charitable funds eg festive meal vouchers, HWB advisor role

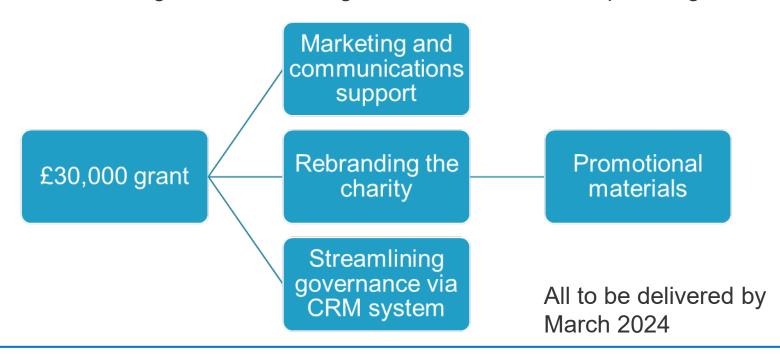




NHS Charities Together Development Grant

NHS Charities Together development grant was awarded to help strengthen and focused on three areas:

- Providing marketing support
- Rebranding the charity
- Streamlining processes and governance through a customer relationship management system





Key priorities for assurance over the next 6 months



Continue developing the charity in line with the strategic vision (agreed in Feb 22)

Review expenditure proposals est value of £900,000 over next 6 months

Review the brand and name for the charity

Corporate Partnership Scheme to continue

Continue to implement the Development Grant from NHS Charities Together





Any questions?







Report Cover Sheet

Agenda Item: 11

Report Title:	Appointment to Committee Roles				
Name of Meeting:	Council of Governors				
Date of Meeting:	20 September 2023				
Author:	Jennifer Boyl	e, Company Se	cretary		
Executive Sponsor:	Alison Marsh	all, Chair			
Report presented by:	Jennifer Boyl	e, Company Se	cretary		
Purpose of Report	Decision:	Discussion:	Assurance:	Information:	
Briefly describe why this report is					
being presented at this meeting	To approve the	ne recommenda	tions regarding	memhershin	
	of Governor	committees and ittee observer ro	note the plans	•	
	200.000				
Proposed level of assurance	Fully	Partially	Not	Not	
- to be completed by paper	assured	assured	assured	applicable	
sponsor:					
	No gaps in assurance	Some gaps identified	Significant assurance gaps		
Paper previously considered by: State where this paper (or a version of it) has been considered prior to this point if applicable Key issues: Briefly outline what the top 3-5 key	Board committee observers were appointed for				
points are from the paper in bullet point format Consider key implications e.g. Finance Patient outcomes / experience Quality and safety People and organisational development Governance and legal Equality, diversity and inclusion	 two year period which will end on 30 November 2023. The paper outlines plans to seek expressions of interest for these observer roles. Governor committee membership was reviewed in 2021/22, with a pragmatic revision to membership of the Membership Strategy Group and Governance and Development Committee made in September 2022. The paper recommends retaining the current membership for the Governor committees to aid continuity and maintain a pragmatic approach to achieving quorate meetings. 				
Recommended actions for this meeting: Outline what the meeting is expected to do with this paper	 Governors are recommended to: Approve the process to maintain current membership and chair arrangements for the three Governor committees; and 				

	 Express an interest to fulfil the vacancy on the Governor Remuneration Committee (Staff Governors only). 					
	Governors are requested to note the plans to seek expressions of interest for the Board committee observer roles, with newly appointed observers effective from 1 December 2023.				e observer	
Trust Strategic Aims that the report relates to:	Aim We will continuously improve the quality and safety of our services for our patients ⊠				and safety	
	Aim We will be a great organisation with a hi 2 engaged workforce ⊠			h a highly		
	1			e our produc use of resour	•	efficiency to
				ffective partn t to improvin		
	AimWe will develop and expand our services within and beyond Gateshead☒					
Trust corporate objectives that the report relates to:	Through the representation and holding to account roles of Governors there is indirect linkage to assurance over the delivery of all strategic objectives.					
Links to CQC KLOE	Caring	Respor	sive	Well-led ⊠	Effective	Safe □
Risks / implications from this	report (po	ositive o	r nega	ative):		
Links to risks (identify significant risks and DATIX reference)	-		J	•		
Has a Quality and Equality Impact Assessment (QEIA) been completed?	Yes No Not applica ⊠					

Appointment to Committee Roles

1. Introduction

- 1.1. In September 2021 a process was initiated to seek expressions of interest for Governor observers for Board committees.
- 1.2. Governors were appointed to the observer roles for a period of 2 years commencing on 1 December 2021, with the November 2021 Council meeting receiving a paper detailing the outcome of the allocation process.
- 1.3. As the two year observer terms will come to an end on 30 November 2023, this paper outlines a proposed approach to seeking expressions of interest from Governors in respect of the Board committee observer roles.
- 1.4. The paper also outlines a proposed approach to Governor committee membership.

2. Board committee observers

- 2.1. One of the key roles of Governors is to hold the Non-Executive Directors (NEDs) to account individually and collectively for the performance of the Board.
- 2.2. Observing a Board committee enables Governors to gain a deeper understanding of the work of the Non-Executive Directors and therefore supports the Governors in discharging this role.
- 2.3. Nominated Governor observers should assess the quality of the debate, discussion and challenge as representatives of the Council of Governors. Feedback should then be shared with the wider Council as part of the informal Council of Governors' pre-meetings so that all Governors benefit from the committee observations.
- 2.4. Committee observations are just one of the ways in which Governors can gain information to assist in holding NEDs to account. Feedback from the observations should be considered in conjunction with:
 - Feedback from Board meeting observations;
 - Contributions from NEDs at the Council of Governors, including the regular updates from Committee Chairs; and
 - Other opportunities to see the NEDs at work, such as at Governor development sessions.
- 2.5. Governor observers are invited to meet with the NED chair of each committee after the meeting to discuss any feedback or queries which they may have as a result of observing the debate and discussion.
- 2.6. A guide to committee observation and a feedback template have been developed to support Governors to undertake this role and to structure their feedback to Governor colleagues as part of the pre-meetings for the Council.
- 2.7. The following observers are in place for the Board committees to 30 November 2023:

Committee	Observers
Quality Governance Committee	Abe Rabin
	Aron Sandler
People and Organisational	Les Brown
Development Committee	Geoff Riddell (newly appointed
	following a vacancy arising)
Digital Committee	John Bedlington
	Geoff Riddell
Charitable Funds Committee	John Bedlington
	Helen Adams (newly appointed
	following a vacancy arising)

- 2.8. Expressions of interest are sought for a two year period commencing on 1 December 2023 (noting that should a Governor leave the Council prior to 30 November 2025 then an alternative observer will be sought to fill the remainder of the term).
- 2.9. All Governors will be contacted by email prior to the end of September 2023 and invited to express an interest in a Board committee observer role.
- 2.10. Should there be more than 2 Governors expressing an interest in the observer roles for each committee, then the Chair, Lead and Deputy Lead Governors will make the final decision and provide a full explanation for this to the Governors.

3. Governor committee members

- 3.1. Governor committees are established and run by Governors, with delegated authority from the Council of Governors.
- 3.2. There are three Governor committees which report into the Council of Governors and support the Council by leading on key workstreams and making recommendations for approval / ratification:
 - Governor Remuneration Committee
 - Membership Strategy Group; and
 - Governance and Development Committee.
- 3.3. In Autumn 2021 expressions of interest were sought for formal members of the Governor Remuneration Committee, with the new membership being enacted in January 2022.
- 3.4. A Governor Committee Working Group was established to review the function and form of the other Governor committees, and this led to the establishment of the Governance and Development Committee. The Working Group reported its recommendations to the Council in November 2021.
- 3.5. Following this, expressions of interest were sought for Membership Strategy Group and Governance and Development Committee members. There was a low uptake at the time (resulting in meetings not being quorate) and in September 2022 the Council of Governors approved the recommendation to adjust the membership to effectively automatically encompass all Governors, with at least 5 Governors needing to be present in order to be quorate.

- 3.6. The terms of reference stipulate that the Lead Governor or Deputy Lead Governor should chair the Governance and Development Committee.
- 3.7. Steve Connolly, Deputy Lead Governor, has only recently been appointed as chair of the Membership Strategy Group (and was the only Governor to express an interest).
- 3.8. It is good practice to review the membership arrangements for the Governor committees every two years. It is recommended to retain the current arrangements for the Governance and Development Committee and Membership Strategy Group. This is deemed to be a pragmatic approach which has enabled meetings to be quorate and therefore more effective.
- 3.9. With regards to the Governor Remuneration Committee, the current membership is as follows:
 - Chris Toon, Chair of the Committee (which must be an appointed Governor in line with the terms of reference)
 - Abe Rabin
 - Les Brown
 - Lynsey Curry
 - Agatha Kanyangu
 - 1 Staff Governor vacancy
- 3.10. The Committee meets infrequently based on need (i.e. when there are NED appointments, re-appointments or remuneration considerations to make). As such the Committee has not met many times with its current membership (especially given that 2 members joined relatively recently to fill vacancies left by Governors whose terms had ended).
- 3.11. As a number of the current members are nearing the end of their terms as Governors there is a risk of further change should these Governors choose not to re-stand or are unsuccessful at election time.
- 3.12. It is therefore not proposed to commence a new process to seek expressions of interest for membership of this Committee, although expression of interest to fill the current vacancy would be welcomed.
- 3.13. It is recommended that this is reviewed following the election to determine whether there is a need to seek new members for this Committee to fill any vacancies which may arise.

4. Recommendations

- 4.1. Governors are recommended to:
 - Approve the process to maintain current membership and chair arrangements for the three Governor committees; and
 - Express an interest to fulfil the vacancy on the Governor Remuneration Committee (Staff Governors only).
 - 4.2. Governors are requested to note the plans to seek expressions of interest for the Board committee observer roles, with newly appointed observers effective from 1 January 2024.



Report Cover Sheet

Agenda Item: 12

Report Title:	Council of G	overnors Elec	tions 2023			
Name of Meeting:	Council of Governors					
Date of Meeting:	Wednesday 1	13 th September	2023			
Author:	Diane Waites	s, Corporate Ser	vices Assistan	t		
Sponsor:	Alison Marsh Governors	all, Chair of the	Board and Co	uncil of		
Report presented by:	Diane Waites	s, Corporate Ser	vices Assistan	t		
Purpose of Report	Decision:	Discussion:	Assurance:	Information:		
Briefly describe why this report is			\square	\boxtimes		
being presented at this meeting	To receive th	e elections time				
	TO TECEIVE III	e elections time	table for inform	iation		
Dropood lovel of accurance	Eully	Dorticily	Not	Not		
Proposed level of assurance to be completed by paper	Fully Partially Not Not assured assured applicate					
sponsor:						
<u> </u>	No gaps in	Some gaps	Significant			
	assurance	identified	assurance gaps			
Paper previously considered	Membership	Strategy Group				
by:						
State where this paper (or a version of it) has been considered prior to						
this point if applicable						
Key issues:	•	ey information a		e 2023		
Briefly outline what the top 3-5 key points are from the paper in bullet	elections to the	ne Council of G	overnors.			
point format	The notice of	alaction was nu	ibliohad an 20t	h August		
		election was pu				
Consider key implications e.g. • Finance	2023, with the deadline for nominations on Wednesday 27 th September 2023.					
Patient outcomes /	•					
experience	There are 10 Governor positions available:					
Quality and safetyPeople and organisational	_	taff Governors				
development	2 x Public Governors for Central Gateshead					
Governance and legal	 2 x Public Governors for Western Gateshead 2 x Public Governors for Eastern Gateshead 					
 Equality, diversity and inclusion 						
	• IXP	ublic Governor	ioi Fallelli/Out	OI AIG		
Recommended actions for	To note the k	ey dates and re	ceive the repo	rt for		
this meeting:	information.					
Outline what the meeting is expected to do with this paper						
to ac man and paper						

Trust Strategic Aims that the report relates to:	Aim 1 We will continuously improve the quality and safety of our services for our patients				quality and	
	Aim 2 We will be a great organisation with a highly engaged workforce					
	Aim 3 We will enhance our productivity and efficiency to make the best use of resources					
	Aim 4 We will be an effective partner and be ambitious in our commitment to improving health outcomes					
	Aim 5 We will develop and expand our services within and beyond Gateshead					
Trust corporate objectives that the report relates to:	SA2.1, S	SA2.2				
Links to CQC KLOE	Caring	Respor	nsive	Well-led	Effective	Safe
				\boxtimes		
Risks / implications from this	report (po	sitive o	r nega	ative):		
Links to risks (identify significant risks and DATIX reference)	-					
Has a Quality and Equality Impact Assessment (QEIA) been completed?	Ye	es]		No	Not a	pplicable ⊠

Election Timetable 2023

1. Elections 2023

The process for the annual elections to the Council of Governors commenced on Wednesday 30th August 2023. The nominations stage and voting for this year's elections will again be available in electronic format through a dedicated website. Potential governors can either complete a paper nomination form or an online form, and members will receive paper ballot packs with the option of casting their votes online.

2. Positions

There will be 10 governor positions to vote for:

- 3 x Staff Governors
- 2 x Public Governors for Central Gateshead
- 2 x Public Governors for Western Gateshead
- 2 x Public Governors for Eastern Gateshead
- 1 x Public Governor for Patient/Out of Area

Those members who are interested in standing in this year's elections are invited to attend Governor Information Sessions to learn more about this fantastic opportunity. There will be two sessions which will outline the Governor role and some background information about the Trust.

Current governors whose tenure ends on 4th January 2024 will automatically be sent a nomination pack, unless they have advised the Corporate Services Office of their intention not to stand for re-election.

The opportunity to stand is being promoted in a number of ways:

- For staff governor positions this is being promoted via: the Gateshead Health Weekly bulletin; screensavers; and posts on the Trust's closed Facebook group.
- For public governor positions this is being promoted via: a postcard to all members; a news article on our website; a dedicated page on the website; and regular promotion on social media.

Any support that Governors can provide in promoting the opportunity to local communities / staff colleagues would be kindly appreciated.

3. Schedule of Key Dates

Proceeding	Date		
Notice of election / nomination open	Wednesday 30 August 2023		
Nominations Deadline	Wednesday 27 September 2023		
Summary of valid nominated candidates	Thursday 28 September 2023		
published			
Notice of Poll	Wednesday 18 October 2023		
Voting packs despatched	Thursday 19 October 2023		
Close of Election	Monday 13 November 2023		
Declaration of Results	Tuesday 14 November 2023		

4. Recommendation

The Council of Governors is asked to note the key dates and receive the report for information.

Diane Waites Corporate Services Assistant



Report Cover Sheet

Agenda Item: 13

Report Title:	Governance and Development Committee Update						
Name of Meeting:	Council of Governors						
Date of Meeting:	20 Septembe	er 2023					
Author:	Jennifer Boyl	e, Company Se	cretary				
Sponsor:	Steve Conno the Committee	lly, Deputy Lead e	l Governor and	Vice Chair of			
Report presented by:	Steve Conno the Committe	lly, Deputy Lead e	I Governor and	Vice Chair of			
Purpose of Report	Decision:	Discussion:	Assurance:	Information:			
Briefly describe why this report is							
being presented at this meeting			\boxtimes				
somy presented at this meeting	To provide th	e Council with a	n overview of t	he			
		ecisions and ke					
		nance and Deve	,	•			
	meetings.	nance and beve	Siopinioni Comi	inttoo			
	meetings.						
Proposed level of assurance	Eully	Partially	Not	Not			
•	Fully	_					
 to be completed by paper 	assured	assured	assured	applicable			
sponsor:	\boxtimes						
	No gaps in	Some gaps	Significant				
	assurance	identified	assurance gaps				
Paper previously considered	-						
by:							
State where this paper (or a version							
of it) has been considered prior to							
this point if applicable	The Committee has met once since the last						
Key issues:							
Briefly outline what the top 3-5 key points are from the paper in bullet	Council of Governors' meeting in May 2023.						
point format		ommittee's role					
point ronnat	review	of governance-	related items o	n behalf of			
Consider key implications e.g.	the Council.						
 Finance 	At the last meeting in May 2023 the Committee						
 Patient outcomes / 	Reviewed progress made against the NHS						
experience	Providers' action plan; and						
Quality and safety	Commenced discussions on reviewing the						
People and organisational	_	composition of the appointed Governor					
developmentGovernance and legal	component of the Council.						
 Equality, diversity and 		component or t	ic Courien.				
inclusion							
Recommended actions for	The Council i	s requested to r	ote the update	from the			
this meeting:		and Developme	•				
Outline what the meeting is expected		•					
to do with this paper	assured that the Committee is supporting the Council through a detailed review of governance-related items						
	that fall within		30 v Ci i i ai i i i i - i Ci	atou itorrio			
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Trust Strategic Aims that the report relates to:				nuously imp ervices for o		quality and
		We will engaged		great orgai	nisation wit	h a highly
				ce our produ use of resou	•	efficiency to
				effective par nent to impro		
				op and expa ateshead	nd our ser\	rices within
Trust corporate objectives that the report relates to:	Not linked to a specific objective but ensuring effective governance is in place will in turn ensure appropriate controls and assurance processes are in place to support objective delivery.					
Links to CQC KLOE	Caring	Respor	sive	Well-led	Effective	Safe
				\boxtimes		
Risks / implications from this report (positive or negative):						
Links to risks (identify significant risks and DATIX reference)	No direct	ilink				
Has a Quality and Equality Impact Assessment (QEIA) been completed?	Ye	_		No	Not a	pplicable ⊠

Governor Governance and Development Committee Report

1. Introduction

1.1. This paper aims to provide assurance to the wider Council over the work of the Governance and Development Committee by outlining the key discussions last the last meeting held on 2 August 2023.

2. Key issues discussed

- 2.1. The following key issues were discussed at meeting in August 2023:
- 2.2. Constitutional amendments regarding appointed Governor positions it was noted that the Council has been carrying a number of appointed Governor vacancies for some time. A number of seats are allocated to organisations which no longer exist, such as the Clinical Commissioning Group and Gateshead Diversity Forum.
- 2.3. The Committee commenced initial discussions around the composition of the appointed Governor aspects of the Council (in respect of longstanding vacant seats only).
- 2.4. Members felt it would be important to retain the Gateshead Council seat and seek representation (particularly given the Council was no longer directly represented on the Board by Cllr Martin Gannon).
- 2.5. Members also felt it would be beneficial to retain a seat for the Gateshead Youth Assembly as a way of seeking the input of young people into the Council.
- 2.6. Suggestions were made regarding the potential for considering representation from Healthwatch, a local diversity forum and local commerce / industry. In principle Members felt that the number of appointed positions should not be increased in order to maintain the balance of Council, but some vacant positions may be replaced with more relevant stakeholders.
- 2.7. The Chair and Company Secretary would utilise the feedback to progress with a draft plan which would require approval by both the Council and Board to proceed.
- 2.8. Review of the action plan from the NHS Providers' training an updated action plan was presented to the Committee. It was agreed that all actions on the training plan were now closed.
- 2.9. The second aspect of this agenda item was to review the effectiveness / impact of the actions taken. With respect to initiatives such as the revised pre-meetings, Members felt that they were not yet fully effective, with low attendance rates. It was agreed that from November 2023 the pre-meetings would move back to their original time of immediately before the start of the Council meeting in order to maximise attendance.
- 2.10. **Governor Training and Development** the training plan for 2023/24 was shared with the Committee for review and comment, seeking further suggestions and ideas for workshop sessions. It was agreed that prior to the October 2023 engagement event with Non-Executive Directors, Governors would be asked to

definitively confirm their attendance or provide apologies to ensure that the event would be viable.

3. Solutions / recommendations

3.1. The Council is requested to note the update from the Committee and be assured that the Committee is supporting the Council through detailed review of governance-related items that fall within its remit.

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Committee:	Council of Governors
Chair:	Alison Marshall
Financial year:	2022/24

Denotes an item for Part 2 of the meeting

		-					
	Lead	Purpose of item	Feb-23	May-23	Sep-23	Nov-23	Feb-24
Standing Items							
Apologies	Chair	For Information	٧	٧	٧	٧	٧
Declaration of interests	Chair	For Information	٧	٧	٧	٧	٧
Chair's business	Chair	For Information	٧	٧	٧	٧	٧
Minutes	Chair	For Decision	٧	٧	٧	٧	٧
Action log & matters arising	Chair	For Assurance	٧	٧	٧	٧	٧
Cycle of business	Chair	For Information	٧	٧	٧	٧	٧
Meeting review / reflections	Chair	For Discussion	٧	٧	٧	٧	٧
Board and Committee Updates							
Chief Executive's Update* including performance	Chief Executive	For Assurance	٧	٧	٧	٧	٧
update							ĺ
ICS / ICB update	Chief Executive	For Assurance	٧	٧	٧	٧	٧
People and OD Committee Report	Committee Chair	For Assurance	-	V			V
Quality Governance Committee Report	Committee Chair	For Assurance				V	•
Finance & Performance	Committee Chair	For Assurance	V			v	
Audit Co (including Audit Committee Annual	Committee Chair	For Assurance	•	V		*	v
Report and Terms of Reference)	Committee Chair	TOT Assurance		v			ľ
	Citt Ch-i-	F A	-1		.,		-
Digital Committee	Committee Chair	For Assurance	V		v	 	
Charitable Funds	Committee Chair	For Assurance			V		
Trust Updates Including Strategy							
Patient / staff story (2023/24)	Various	For Assurance		٧	٧	٧	٧
QE Facilities	QEF Board Chair / QEF	For Assurance				٧	
1	Managing Director						
NHS Staff Survey results	Director of People & OD / Chair	For Assurance		٧			
	of the HR Committee						ĺ
Developing the Quality Priorities	Chief Nurse	For Decision		V			
Annual planning update	Director of Finance plus input	For Assurance	V				
Annual planning update	from other Directors on	TOT Assurance	•				İ
							İ
	operational and people						İ
	planning	_					
Showcase presentation	Will vary each meeting	For Information		٧	٧	٧	٧
Equality, diversity and inclusion update	Deputy Director of Corporate	For Assurance				٧	ĺ
	Services and Transformation						
Governance							
Review of Constitution & CoG Standing Orders	Company Secretary	For Decision		Deferred	Deferred		
Non-Executive Director appointments	Chair	For Decision		٧			
Performance appraisal and assessment outcomes	Chair (for NEDs)	For Assurance				٧	
- Chair and Non-Executive Directors	Senior Independent Director						
	(For Chair)						
Council of Governors' Register of Interests	Company Secretary	For Decision	٧				٧
							ĺ
Council of Governors' Annual Effectiveness	Company Forroton	For Discussion	<i>1</i>				.,
	Company Secretary	FOR DISCUSSION	V				v
Survey - Results					16 . 5124		,
Ratification of the terms of reference for	Company Secretary	For Decision			defer to Feb 24		٧
Governor groups							
Lead Governor & Deputy Lead Governor	Company Secretary	For Decision	٧	٧			٧
Appointments (19 May 2022)						ļ	
Appointments to Governor committees (every	Company Secretary	For Information			٧	٧	
two years)						ļ	
Consideration of Governor elements of the	Company Secretary	For Discussion	٧				٧
Trust's self-certifications	<u> </u>	<u> </u>			<u> </u>	<u> </u>	<u> </u>
Annual report, accounts and auditor's report.	Executive Directors (co-	For Information			٧		
NOTE this is addressed via the AGM	ordinated by Company						
	Secretary)						
Appointment of external auditors (note not due	,,,	For Decision				٧	
to consider until Nov 23 in advance of initial 3	1						1
year term ending on 31 March 2024)	1						
,	1						1
Elections and Members							
Election update	Company Secretary	For Information			٧	٧	
Election results / new Governor welcome	Chair	For Information	٧				٧
1	1						
ļ	C	Facilities !!			.,	-	.,
NA	Company Secretary	For Information			ν	 	٧
Membership Update	†				1	1	1
Updates from Governor Committees and							
Updates from Governor Committees and Groups							
Updates from Governor Committees and Groups Membership Strategy Group	Chair of the Group	For Assurance	٧	٧	٧	٧	٧
Updates from Governor Committees and Groups		For Assurance For Assurance	√ √	V V	V V	v v	V V
Updates from Governor Committees and Groups Membership Strategy Group	Chair of the Group		√ √	v v	V V	-	√ √