

## Council of Governors (Part 1 – Public)

A meeting of the Council of Governors (Part 1 – Public) will be held at 10:00am on Wednesday 20 November 2024, in Rooms 9&10, Education Centre, Queen Elizabeth Hospital / via Microsoft Teams

### AGENDA

No	Start time	Item	Purpose	Lead	Paper / Verbal
1.	10:00	Welcome and Chair's Business	Information	Chair	Verbal
2.	10:03	Declarations of interest	Information	Chair	Verbal
3.	10:04	Apologies for absence	Information	Chair	Verbal
4.	10:05	Minutes of the last meeting held on 25 September 2024	Decision	Chair	Paper
5.	10:06	Action log and matters arising	Assurance / decision	Chair	Paper
<b>TRUST UPDATES INCLUDING STRATEGY</b>					
6.	10:10	Showcase presentations / patient / staff story:			
		Freedom to Speak Up	Assurance	FTSU Guardian	Presentation
<b>BOARD AND COMMITTEE UPDATES</b>					
7.	10:25	Chief Executive's update			
		i) Performance Report	Assurance	Chief Executive	Paper
		ii) Questions from Governors	Assurance	Chair	Verbal
8.	10:45	Board Committee Assurance update:			
		i) People and Organisational Development Committee	Assurance	Chair of the Committee	Presentation
		ii) Finance and Performance Committee	Assurance	Chair of the Committee	Presentation
<b>GOVERNANCE</b>					
9.	11:05	Proposed constitutional amendment re. constituencies	Decision	Company Secretary	Paper
<b>UPDATES FROM GOVERNOR COMMITTEES AND GROUPS</b>					
10.	11:15	Membership, Governance and Development Committee update	Assurance	Chair of the Committee	Paper
11.	11:25	Governor Remuneration Committee update	Assurance	Chair of the Committee	Paper
12.	11:35	Governor Election Results	Assurance	Corporate Services Assistant	Paper
<b>ITEMS FOR INFORMATION / MEETING GOVERNANCE</b>					
13.	11:40	Council of Governors' Dates 2025/26	Information	Corporate Services Assistant	Paper
14.	11:45	Cycle of Business 2024/25	Information	Company Secretary	Paper
15.	11:50	Top 3 Messages	Discussion	Chair	Verbal

No	Start time	Item	Purpose	Lead	Paper / Verbal
16.	11:55	Any Other Business	Discussion	Chair	Verbal
17.	12:00	Review of Meeting	Discussion	Chair	Verbal
18.	12:05	Date and Time of Next Meeting – 10:00am on Wednesday 19 February 2025	Information	Chair	Verbal

# Council of Governors Part 1

Minutes of a meeting of the Council of Governors held at 12.15pm on Wednesday 25<sup>th</sup> September 2024 in Rooms 9&10, Education Centre and MS Teams.

<b>Name</b>	<b>Position</b>
<b>Members present</b>	
Mrs A Marshall	Chair
Ms H Adams	Staff Governor
Dr J Atkinson	Appointed Governor
Mr J Bedlington	Public Governor – Central
Mr L Brown	Public Governor – Western
Cllr D Burnett	Appointed Governor
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 Loome	Public Governor – Central
Dr A Lowes	Staff Governor
Mr G Main	Public Governor – Western
Dr L Murthy	Public Governor – Western
Mrs A Obiayo	Staff Governor
Mrs K Tanriverdi	Public Governor – Central
Mr C Toon	Appointed Governor
Mrs B Webb	Public Governor – Central
<b>In Attendance</b>	
Mrs J Boyle	Company Secretary
Mr A Crampsie	Non-Executive Director
Mrs T Davies	Group Chief Executive
Dr G Findley	Chief Nurse and Deputy Chief Executive
Mr N Halford	Medical Director of Strategic Relations
Mrs J Halliwell	Group Chief Operating Officer
Mr M Hedley	Non-Executive Director
Dr C Howey	Group Medical Director
Mrs K Mackenzie	Group Director of Finance and Digital
Mr A Moffat	Non-Executive Director
Mrs H Parker	Non-Executive Director
Mr M Robson	Non-Executive Director
Ms D Waites	Corporate Services Assistant
<b>Observers</b>	
None	
<b>Apologies</b>	
Mr G Evans	Managing Director for QE Facilities
Mrs M Pavlou	Non-Executive Director
Mrs J Perry	Appointed Governor
Mr G Quinn	Public Governor - Western
Mr A Rabin	Public Governor – Central
Dr K Singisetti	Staff Governor

Dr G F Spiers	Appointed Governor
Mrs A Stabler	Non-Executive Director
Mrs A Venner	Group Director of People & Organisational Development

Agenda Item No		Action Owner
24/09/01	<p><b>Welcome and Chair's Business</b></p> <p>Mrs Marshall opened the meeting and welcomed the Governors and Board members. Mrs A Stabler was not present at the meeting however Mrs Marshall explained that she will be leaving her role as Non-Executive Director and she thanked Mrs Stabler on behalf of the Council for her hard work and contributions and wished her well in her new role.</p>	
24/09/02	<p><b>Declarations of interest</b></p> <p>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.</p>	
24/09/03	<p><b>Apologies for absence:</b></p> <p>Apologies were received as per the attendance register.</p>	
24/09/04	<p><b>Minutes of the last meeting held on 15<sup>th</sup> May 2024:</b></p> <p>The minutes of the previous meeting held on 15<sup>th</sup> May 2024 were approved as a correct record.</p>	
24/09/05	<p><b>Action log and matters arising:</b></p> <p>The Council of Governors' Action Log was updated accordingly to reflect matters arising from the minutes and discussions took place below:</p> <ul style="list-style-type: none"> <li>• Action G/24/15 re. Council of Governors Standing Orders. On today's agenda with required attendance of 17 Governors, including at least 7 public Governors. To close action following approval.</li> <li>• Action 24/05/06 to receive annual Integrated Care Board updates. This has been incorporated into the cycle of business therefore action agreed for closure.</li> <li>• Action 24/05/09 to share the Provider Collaborative Annual Report 2023/24 for further information. This was circulated to Governors via email therefore action agreed for closure.</li> <li>• Action 24/05/09 re. meeting with Lead Governor and Group Director of People and Organisational Development re.</li> </ul>	

Agenda Item No		Action Owner
	<p>international nursing staff. Meeting has taken place therefore action agreed for closure.</p> <ul style="list-style-type: none"> <li>• Action 24/05/09 re. details of Anna Stabler’s skydive fundraising page in aid of Gateshead Health Charity to be shared. This has been completed therefore action agreed for closure.</li> <li>• Action 24/05/13 re. private meeting hosted by Lead Governor and Deputy Lead Governor to seek feedback on appraisals from the Council. Meeting has taken place and feedback shared with the Chair and the Senior Independent Director. Action therefore agreed for closure.</li> <li>• Action 24/05/15 to promote membership via table top display board within the Hub. These are now in place therefore action agreed for closure.</li> <li>• Action 24/05/15 re. distributing further information around timings of Annual General Meeting and suggested marketplace event to focus on Community Diagnostic Centre services. Revised timetable was distributed therefore action agreed for closure.</li> </ul> <p>The Council reviewed the actions closed at the last meeting which ensures actions have been closed in line with expectations and the agreements made at the previous Council meeting. No further requirements were highlighted.</p>	
24/09/06	<p><b>Chief Executive’s Update:</b></p> <p>Mrs T Davies, Chief Executive, provided an update on current issues relating to the Trust within the organisational strategic aims.</p> <p>Mrs Davies began by highlighting some key points following the publication of the Lord Darzi report. She explained that the report provides a helpful ‘state of the nation’ summary of the NHS nationally and recognises most of the key findings as being relevant to Gateshead and the wider NHS across our region. It also reflects the importance of patient empowerment, digital technology, prevention, care closer to home and ensuring funding streams and capital investment support these principles. A work plan will therefore be developed to ensure work is aligned to the Trust’s strategic intent and divided across the organisation.</p> <p>In relation to the organisational strategic aims, Mrs Davies drew attention to the following key points:</p> <p><b>Strategic Aim 1: We will continuously improve the quality and safety of our services for our patients:</b></p> <p>Teams are monitoring the emerging situation regarding GP collective action, and this has been identified as one of our top 3 organisational risks. The Trust’s Clinical Strategy Group are working closely with GPs</p>	

Agenda Item No		Action Owner
	<p>to mitigate risks. Work is also taking place in reducing overdue complaints and significant improvements have been made.</p> <p>Some Governors attended the opening ceremony for the Jubilee courtyard garden, which has been named the Garden of Hope and was opened by the Lord Lieutenant of Tyne and Wear, Ms Lucy Winskell OBE (King Charles' representative in our region).</p> <p><b>Strategic Aim 2: We will be a great organisation with a highly engaged workforce:</b> Mrs Davies wished to thank Dr Issac Evbuomwan for his hard work and dedication in chairing both the Medical Staffing Committee (MSC) and Local Negotiating Committee (LNC). She welcomed Dr Andrew Lowes as the incoming Chair of the MSC and Ian McClintock, incoming Chair of the LNC. This will ensure that there is a continued focus on the Trust's ambition to provide clinically-led engagement and Dr Carmen Howey, Group Medical Director, is working with Clinical Leaders to review changes to the organisational structure and culture.</p> <p><b>Strategic Aim 3: We will enhance our productivity and efficiency to make the best use of resources:</b> Productivity and efficiency remains a key focus for the Trust however there are significant challenges relating to this therefore work is taking place with clinical and non-clinical teams to look at how we can ensure efficiency, effectiveness and quality in the delivery of our services. This also links to winter planning and future strategy development including the financial challenges around staffing costs.</p> <p><b>Strategic Aim 4: We will be an effective partner and be ambitious in our commitment to improving health outcomes and Strategic Aim 5: We will develop and expand our services within and beyond Gateshead:</b> The Community Diagnostics Centre (CDC) at the Metrocentre in partnership with Newcastle Hospitals is due to open soon and Governors and Trust members received a showcase presentation at the Annual General Meeting and Annual Members' Meeting earlier today.</p> <p>Mrs Davies concluded by drawing attention to the performance information at the end of the report and Mrs J Halliwell, Group Chief Operating Officer explained that improvement work is taking place with the Emergency Department and Mr Martin Hedley, Non-Executive Director, has been supporting with this. The main challenge relates to length of stay and discussions continued to take place across the system.</p> <p><b>Questions from Governors:</b> Mrs H Jones requested an update on the Mental Health Services provided by the Trust at Cragside and Sunnyside following the previous issues identified within the Care Quality Commission report. Mr A Crampsie, Non-Executive Director, explained that there have been significant quality improvements and positive assurances have been</p>	

Agenda Item No		Action Owner
	<p>given to the Quality Governance Committee throughout the year. A number of external visits have taken place including one by the Care Quality Commission in May 2024 and it was noted by the Quality Governance Committee in June 2024 that this is one of the most positive CQC reports seen by the Committee. This was also reported at the public Board meeting in July 2024. Dr G Findley, Deputy Chief Executive and Chief Nurse welcomed Governors to visit the units and this will be considered as part of future Governor visits following the Council meetings.</p> <p>Mrs H Jones also raised a query in relation to whether there were any learnings from the Lucy Letby enquiry for Governors and Mrs Marshall explained that a number of well-led related initiatives were already taking place across the organisation in relation to the review of governance structures, strengthening of Freedom to Speak Up processes and work around the Trust's strategic intent including women's health services and diagnostics. There is a commitment by the Board for transparency with Governors and this is demonstrated by reports presented to the Council and mechanisms for engagement including Non-Executive Director attendance at formal and informal Governor meetings and events.</p> <p>Mrs Jones also raised a query in relation to staffing of the new reception area at the Windy Nook entrance and Mrs Marshall provided a response from Mr G Evans, QE Facilities Managing Director, explaining that the reception may be at times unstaffed during times of resource pressure as focus on maintaining appropriate staffing levels on the main the hospital reception and switchboard is required. Some support is provided by PALS volunteers when available however the team will continue to seek efficiencies within the QE Facilities admin hub to improve flexibilities and minimise the periods when the desk is unstaffed. Mr S Connolly queried whether the role could be extended to Trust volunteers and Dr G Findley will follow this up and feed back.</p> <p>Mr J Bedlington felt that it was important to recognise the Trust's achievement of the Improving Quality in Liver Services (IQILS) accreditation and wished to thank the Consultant Gastroenterologists, Dr Dina Mansour and Dr Anand Reddy, as well as the Liver Nurses and staff on Ward 14a for this achievement.</p> <p>After discussion, it was:</p> <p><b>RESOLVED:</b> to receive the updates for assurance and information.</p>	<p>JB</p> <p>GF</p>
24/09/07	<p><b>Board Committee Assurance update:</b></p> <p><b>Quality Governance Committee:</b> Mr A Crampsie, Non-Executive Director, provided an update on key issues and assurances, key risks and priorities from the Committee. He drew attention to some of the main areas of discussion which included:</p>	

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	<ul style="list-style-type: none"> <li>• Reports received at the Committee including patient experience, serious incidents, compliance and Freedom to Speak Up to demonstrate actions and embedding the learning culture across the organisation</li> <li>• A case study was provided to show how the Committee received assurance on the work being undertaken relating to Freedom to Speak Up and as such reports have been improved to include trends and hot spot areas as well as reporting on protected characteristics and future triangulation plans.</li> <li>• The Committee is currently monitoring four risks on the Organisational Risk Register some of which include a link to health inequalities.</li> <li>• Key priorities for assurance over the next six months include embedding a learning culture linked to the Patient Safety Incident Response Framework (PSIRF).</li> </ul> <p>Following a query from Cllr D Burnett in relation to poor patient and staff experiences, Mr Crampsie explained that the Committee receives trends and hot spots gathered from a number of sources including Freedom To Speak Up and feedback from the staff survey which aligns to the Trust's strategic aims and promotion of listening and learning. Dr G Findley, Deputy Chief Executive and Chief Nurse, also reported that work is being undertaken around Martha's rule in relation to communication processes and ensuring that any concerns are raised with the relevant teams. Dr Findley offered to discuss this in more detail outside of the meeting.</p> <p><b>Group Audit Committee:</b> Mr A Moffat, Audit Committee Chair, provided an update on key issues and assurances, key risks and priorities from the Committee. He drew attention to some of the main areas of discussion which included:</p> <ul style="list-style-type: none"> <li>• The approval of the Annual Accounts and a number of assurance reports provided from the external auditors, internal audit and counter fraud. The Committee also receives an assurance report from the Executive Risk Management Group and assurance from the Freedom To Speak Up Guardian and Clinical Audit lead.</li> <li>• The effectiveness of the Committee, internal audit, counter fraud and external audit was also reviewed and Mr Moffat highlighted that the review of external audit found no material issues or concerns and a copy of the report can be shared with the Council.</li> <li>• Key escalations from the Committee include the 'good' rated Head of Internal Audit Opinion and complimentary feedback from external auditors on the quality of the financial accounts. There has also been improved management responses to draft audit reports as well as the implementation of recommended actions.</li> <li>• Key potential risks include the completion of the QE Facilities annual audit within agreed timescales and internal and external</li> </ul>	<p>JB</p>

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	<p>audit capacity required to complete the audits included in the workplan</p> <ul style="list-style-type: none"> <li>• Key priorities for assurance over the next six months include the continued overview of progress against implementation of audit and counter fraud recommendations and work plans and the preparation to review QE Facilities' year end reporting.</li> </ul> <p>Following a query from Mr J Bedlington in relation to the audit of Charitable Funds, Mrs K Mackenzie, Group Director of Finance and Digital, explained that Robson Laidler had been commissioned to undertake this piece of work due to external audit capacity issues. Mr Moffat highlighted that the process relating to the External Audit contract requires Governor approval and this will be discussed in due course.</p> <p>After further discussion, it was:</p> <p><b>RESOLVED:</b> to receive the reports for assurance</p>	
24/09/08	<p><b>Governor Standing Orders:</b></p> <p>Mrs Boyle presented the paper which proposes amendments to modernise the standing orders and ensure they support the Council to adhere to the highest standards of governance.</p> <p>She reminded the Council that the Standing Orders have previously been unable to be approved due to the requirement that two-thirds of the Council is present. She confirmed that 17 Governors were in attendance today to approve the revisions.</p> <p>Mrs Boyle highlighted that the main changes, additions and deletions are outlined within the report which have been reviewed by the Governance and Development Committee and they recommend the revised Standing Orders to the Council. A proposed new paragraph is included to provide a more pragmatic approach to reaching sufficient numbers of Governors present in a meeting to be able to approve an amendment to the Standing Orders and following discussion at the Committee, it was proposed to lower the two-thirds threshold to half of the sitting Council if the threshold was not able to be achieved for two consecutive meetings and this option is highlighted as Option B within the report.</p> <p>The Council confirmed that they were happy with the amendments and following consideration, it was:</p> <p><b>RESOLVED:</b> to approve the proposed changes to the Council of Governors' Standing Orders, including agreement on the mechanics of variation based on the options provided.</p>	

Agenda Item No		Action Owner
	Dr Murthy and Dr Lowes left the meeting.	
24/09/09	<p><b>Governor Committee Proposal:</b></p> <p>Mrs J Boyle, Company Secretary, presented the report which proposes to merge the Governance and Development Committee and Membership Strategy Group together into a single meeting.</p> <p>Mrs Boyle highlighted that this will not result in a reduction in the scope of committee business, but enables Governor time to be spent more effectively, recognising the voluntary nature of the role. It is proposed that the single Governor committee will meet quarterly and continue to be chaired by the Lead Governor. Initial discussions have taken place at the last Membership Strategy Group and it was felt that this would support attendance and combining the committees enables discussions to take place in one single meeting to provide a more joined-up approach to addressing issues or suggestions.</p> <p>Suggested names for the Committee are included within the paper however the preferred name from the Membership Strategy Group was the Membership, Governance and Development Committee and this was agreed by the Council.</p> <p>After consideration, it was:</p> <p><b>RESOLVED:</b> i) to approve the proposal to merge the current Membership Strategy Group and Governance and Development Committee together to form a single Governor committee to meet quarterly and continue to be chaired by the Lead Governor.</p> <p>ii) to approve the preferred name to Membership, Governance and Development Committee.</p>	
24/09/10	<p><b>Role of the Senior Independent Director:</b></p> <p>Mr Martin Hedley, Non-Executive Director and Senior Independent Director, provided a brief presentation on the role of the Senior Independent Director (SID).</p> <p>Mr Hedley has recently taken over the role from Mr Mike Robson and thanked Mr Robson for his support. He reminded the Council that the SID supports the Governors in providing a voice if they feel that normal channels of communication have broken down and acts as a facilitator of resolutions. The SID also agrees the process and works with Governors around the Chair performance appraisal.</p> <p>Mr Hedley also explained that the SID supports the Chair in matters related to effective governance and acts as an intermediary for other</p>	

Agenda Item No		Action Owner
	<p>Directors and the Chair should conflicts arise. The SID also chairs the Group Remuneration Committee.</p> <p>Mrs Marshall formally welcomed Mr Hedley to the role and following consideration, it was:</p> <p><b>RESOLVED:</b> to receive the report for information and assurance.</p>	
24/09/11	<p><b>Governance and Development Committee update:</b></p> <p>Mr S Connolly, Lead Governor provided the Council with an update on the key messages from the recent Governance and Development Committee held on 11<sup>th</sup> July 2024.</p> <p>He reported that there were no issues identified as requiring escalation to the Council for further action however drew attention to some of the areas subject to ongoing monitoring where some assurance has been noted and/or further assurance is required. This related to the approval of the Council of Governor Standing Orders however these have subsequently been approved at today's meeting and thanked Governors for their support and attendance.</p> <p>Positive assurance was provided in relation to the informal Governor meeting which took place in June 2024 to discuss Governor attendance and engagement following the results of the effectiveness survey. Mr Connolly reported that this had been a positive meeting however attendance could have been better. A further informal meeting took place earlier this month and will be actioned on a regular basis.</p> <p>After discussion, it was:</p> <p><b>RESOLVED:</b> to note the update from the Governance and Development Committee</p>	
24/09/12	<p><b>Membership Strategy Group update:</b></p> <p>Mr S Connolly, Lead Governor, provided the Council with an update on the key messages from the recent Membership Strategy Group on 17<sup>th</sup> September 2024.</p> <p>He reported that there was one issue identified as requiring escalation to the Council for further action which related to the discussion that took place around the proposal to merge the Governance and Development Committee and Membership Strategy Group together into one single meeting, The Group supported this approach and recommended its adoption to the Council of Governors with the preferred new name of the Membership, Governance and Development Committee. This has subsequently been approved by the Council.</p>	

Agenda Item No		Action Owner
	<p>He drew attention to some of the areas subject to ongoing monitoring where some assurance has been noted and/or further assurance is required which related to the implications of the Lord Darzi report and this has been discussed within the Chief Executive's update earlier in the meeting.</p> <p>Discussion also took place at the meeting around the Council of Governors elections and concerns were raised in relation to the low number of applications as well as the difficulties in filling the vacancies within the Eastern Gateshead constituency however it was agreed to explore merging the Central Gateshead and Eastern Gateshead constituencies in future. Mrs Boyle, Company Secretary, explained that this will require a constitutional change and further work will be undertaken to look into this further.</p> <p>Positive assurance was provided in relation to the results from the feedback survey following the last Medicine for Members event focussing on Women's Health Services and it was agreed that this had been a great success with good engagement. Discussion also took place in relation to future events and some suggested topics were considered. It was agreed that the next event will take place towards the end of November 2024 to maintain regular scheduling of the events.</p> <p>Following consideration, it was:</p> <p><b>RESOLVED:</b> to note the update from the Membership Strategy Group.</p>	JB
24/09/13	<p><b>Governor Elections Update:</b></p> <p>Ms D Waites, Corporate Services Assistant, provided key information and dates for the 2024 elections to the Council of Governors.</p> <p>She highlighted that there were 10 Governor positions available, and the notice of election was published on 28<sup>th</sup> August 2024, with the deadline for nominations on Wednesday 25<sup>th</sup> September 2024.</p> <p>Should there be any contested constituency seats, the voting period will commence on Thursday 17<sup>th</sup> October 2024 closing on Monday 11<sup>th</sup> November 2024 and the election results will be announced on Tuesday 12<sup>th</sup> November 2024.</p> <p>After consideration, it was:</p> <p><b>RESOLVED:</b> to note the key dates and receive the report for information</p>	
24/09/14	<b>Cycle of Business 2024/25</b>	

Agenda Item No		Action Owner
	<p>Mrs J Boyle, Company Secretary, presented the cycle of business for the Council of Governors for 2024/25.</p> <p>This provides the Council with a forward view of future meetings.</p> <p>Following consideration, it was:</p> <p><b>RESOLVED:</b> to receive the cycle of business for information.</p>	
24/09/15	<p><b>Top 3 Messages:</b></p> <p>This agenda item enables the Council to agree on the top three messages from the meeting which Governors can use to inform their discussions with members and the public.</p> <p>The Council agreed that this included:</p> <ul style="list-style-type: none"> <li>• To note the challenges and financial pressures within the organisation</li> <li>• To highlight that the Trust has been nominated as Trust of the Year at the Health Service Journal (HSJ) Awards, which is a huge achievement in light of the current climate</li> <li>• To provide assurance that the Trust recognises that most of the key findings within the Lord Darzi report are relevant to Gateshead and the wider NHS across our region and that a work plan is being developed to ensure this is aligned to the Trust's strategic intent. The 10 year strategy is expected in Spring 2025 and this form part of the national agenda.</li> </ul>	
24/09/16	<p><b>Any Other Business:</b></p> <p>There was no other business to discuss.</p>	
24/09/17	<p><b>Review of Meeting:</b></p> <p>The Council were invited to share any areas of improvement or learning which can also be sent directly to Mrs Marshall and Mr Connolly.</p>	
24/09/18	<p><b>Date and Time of Next Meeting:</b></p> <p>The next meeting of the Council of Governors will be held on Wednesday 20<sup>th</sup> November 2024.</p>	

# 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	Date of Meeting	Agenda Item Name	Action	Deadline	Lead	Progress	Status
24/09/06	25/09/24	Chief Executive's update	To consider future Governor visit to Cragside and Sunnyside	19/02/25	JB	Action not yet due – to be scheduled as the visit after the next Council in February 25.	
			To consider whether the Windy Nook Reception role could be extended to Trust volunteers	20/11/24	GF	Discussed with Volunteer Manager and plans to have more volunteers in the entrance therefore this should improve going forward.	
24/09/07	25/09/24	Board Committee Assurance update	To share the review of effectiveness for external audit report to Governors	20/11/24	JB	Report shared with Governors 13/11/24. <b>Action recommended for closure</b>	
24/09/12	25/09/24	Membership Strategy Group 3A report	To undertake further work around the suggestion to merge the Central Gateshead and Eastern Gateshead constituencies noting that this will require a constitutional amendment	20/11/24	JB	Report on 20/11/24 agenda for consideration. <b>Action therefore recommended for closure.</b>	

## Actions closed from last meeting

Agenda Item Number	Date of Meeting	Agenda Item Name	Action	Deadline	Lead	Progress	RAG-rating
G/24/15	14.02.24	Council of Governors Standing Orders	Two-thirds of the Council (16 Governors) need to present to approve the variations to the Standing Orders. To present again at May meeting otherwise consideration around arranging extra-ordinary meeting or Annual General Meeting in September.	30.09.24	JB	March 24 – on May Council agenda. May 24 – unable to approve due to insufficient Governors present. To be presented again in September 2024 Sept 24 – on agenda – now requires 17 Governors, including at least 7 public Governors. <b>Sufficient members present and approved. As such action agreed for closure</b>	
24/05/06	15.05.24	ICB presentation	To receive annual updates and will be added to cycle of business	25.09.24	JB/DW	June 24 – incorporated into the cycle of business. <b>Action agreed for closure.</b>	
24/05/09	15.05.24	CEO update	To share the Provider Collaborative Annual Report 2023/24 for further information	25.09.24	AM/JB	June 24 – this was circulated by email to all Governors. <b>Action agreed for closure</b>	
24/05/09	15.05.24	CEO update	Meeting to be arranged with Lead Governor and Group Director of POD re. international nursing staff	25.09.24	AV/GF	June 24 – meeting has been arranged and completed. <b>Action agreed for closure.</b>	
24/05/09	15.05.24	Board Committee Update: Charitable Funds	To circulate details of Anna Stabler's skydive fundraising page in aid of Gateshead Health Charity	25.09.24	AS/JB	June 24 – fundraising page shared with all Governors. <b>Action agreed for closure.</b>	
24/05/13	15.05.24	Chair and NED appraisal process	Private meeting to be hosted by Lead Governor and Deputy Lead Governor to seek feedback on appraisals from the Council	25.09.24	JB/DW	June 24 - meeting took place on 03.06.24 and feedback shared with the Chair and the Senior Independent Director. <b>Action agreed for closure.</b>	
24/05/15	15.05.24	Membership Strategy Group update	To look into using table top display boards in the Hub to promote membership	25.09.24	JB/DW	June 24 – promotional leaflets are now in the table top displays in the Hub. <b>Action agreed for closure.</b>	
24/05/15	15.05.24	Membership Strategy Group	To distribute further information around timings of AGM and suggested marketplace event to focus on CDC services	25.09.24	JB/DW	August 24 – revised timetable communicated and diary invites amended. <b>Action agreed for closure.</b>	

# FTSU Service:

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Tracy Healy FTSU Guardian  
Team Meeting Presentation



Freedom to  
**Speak  
Up**

# Introduction

## Aim of session

Where  
did it all  
begin?

Meet the  
team.

Speak up  
Listen Up  
Follow  
Up

What  
staff are  
telling us

What  
changes  
has this  
made

How has  
this  
helped  
our staff  
and  
patients

## How this links to Patient Safety Strategy

Freedom to  
speak  
up



Freedom to  
**Speak  
Up**



Background: Where did it all  
begin?

Freedom to  
**Speak  
Up**

# Background: Francis Report: 20 Key Principles for FTSU

## CULTURE:

1. Safety
2. Raising Concerns
3. Free from bullying
4. Visible leadership
5. Valuing staff
6. Reflective practice.

## HANDLING CASES:

7. Raising & reporting concerns.
8. Investigations
9. Mediation & dispute resolution.

## TO SUPPORT GOOD PRACTICE:

10. Training
11. Support
12. Alternative employment
13. Transparency
14. Accountability
15. External review
16. Regulatory action
17. Recognition of organisations

## MEASURES FOR VULNERABLE GROUPS:

18. Students / trainees/ BME
19. Primary Care
20. Legal protection should be enhanced.



# FTSU in Gateshead Health: Meet the Team



## Freedom to Speak Up Guardian



Tracy Healy, Freedom to  
Speak up Guardian

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07483975392

It's Not Ok

We won't accept abuse of any kind

If you see it, or experience it, speak to us

 Alison Marshall Chair	 Trudie Davies Group Chief Executive	 Gillian Findley Group Deputy Chief Executive   Chief Nurse and Professional Lead for Midwifery and AHPs	 Carmen Howey Group Medical Director
 Amanda Venner Group Director of People and OD	 Kris Mackenzie Group Director of Finance and Digital	 Neil Halford Medical Director for Strategic Relations	 Joanne Halliwell Group Chief Operating Officer
 Hilary Parker Non Executive Director	 Andrew Moffatt Non Executive Director	 Adam Crampsie Non Executive Director	
 Martin Hedley Non Executive Director	 Mike Robson Non Executive Director	 Maggie Pavlou Non Executive Director	



## Freedom to Speak Up Champions

 Diane Clisholm Medical Secretary	 Helen Burn Community Nurse Practitioner	 Heather Prid Staff Nurse	 Helen Atwell Specialist Radiographer	 Greg Wilson Senior Medical Engineer	 Ruth McDonald Clinical Procurement	 Lyneey Curry Lead Clinical Pharmacist	 Louisa Wardhaugh Midwife	 Sharon Surrey Sister EAU
 Sihakyaw Win Staff Nurse	 Judith Curry Patient experience & Volunteer Manager	 Anita Nabikolo Staff Nurse	 Antonia Pennington Sister EAU	 Maria Connolly Sister EAU	 Vicky Graham Ward Sister JASRU	 Sarah Neilson Head of ELD	 Chakrapani Katturi Consultant Anaesthetist	 Julie Taylor Domestic services business support
 Karen Straughan Domestic	 Kuldip Sohanpal EDI Lead	 Stew Connolly Volunteer	 Lisa Neelan ODP Theatres	 Nigel Little Security	 Maria Alberts Receptionist / Union Staff side chair	 Claire Ellison Service Improvement Lead	 Andrew Lamb L&D Facilitator	 Kieran Singiseti Consultant Surgeon T&O

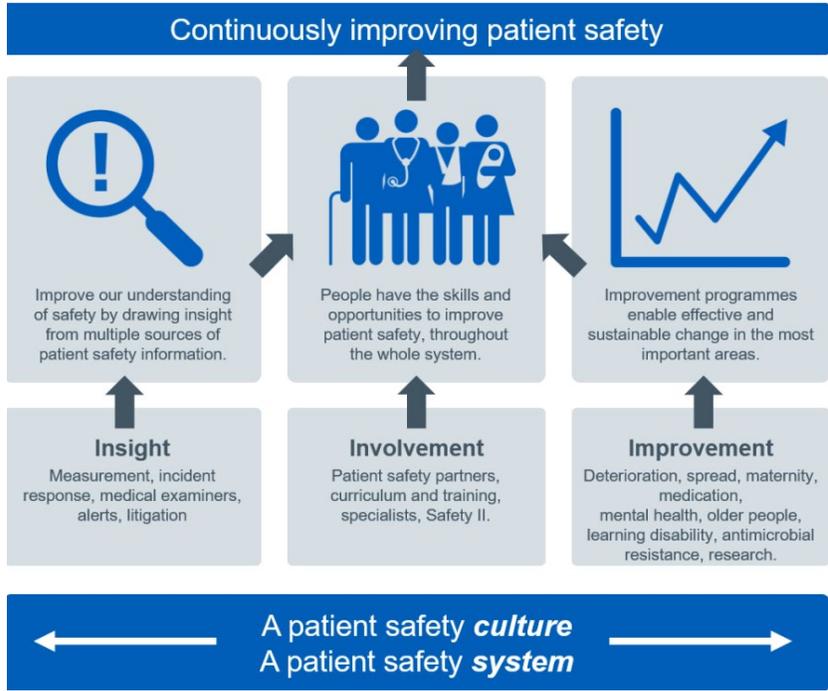
It's not okay

We won't accept abuse of any kind

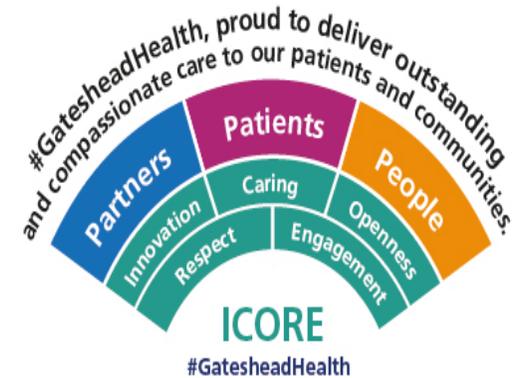
If you see it, or experience it, speak to us



# FTSU at Gateshead Health:



- To safeguard patient care
- To look after our staff
- To ensure that we deliver high quality services
- To develop an open and supportive culture
- To enable the Trust to learn and improve



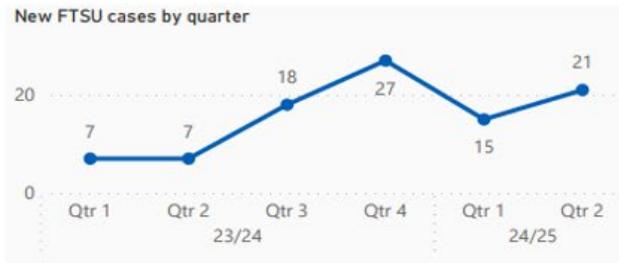
Freedom to Speak Up links to every one of the Trust's values.



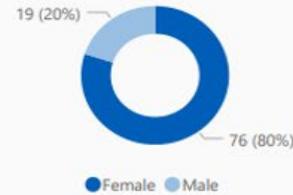
# FTSU Gatehead Health: Speaking Up - what this looks like?

## FTSU Report - Summary

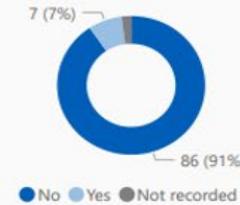
Quarter 2 - 24/25



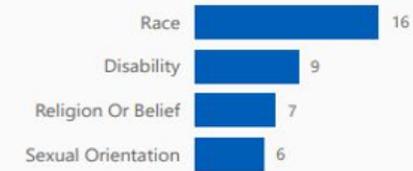
Cases raised by gender



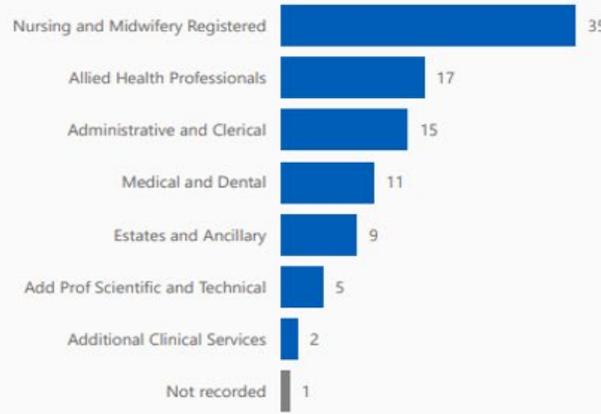
Cases raised anonymously



Protected characteristic



Cases by staff group



Nature of concerns



Freedom to  
**Speak  
Up**

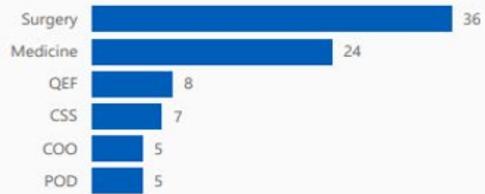
# FTSU Gatehead Health: Speaking Up - what this looks like?

## FTSU Report - Areas, concern & learning

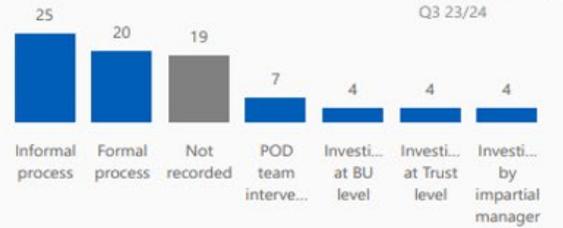
Quarter 2 - 24/25

Areas with 5 or less cases have been suppressed to protect anonymity

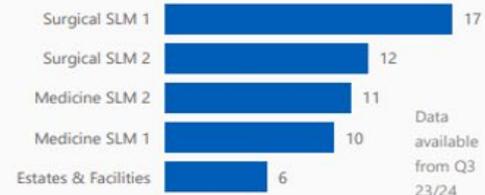
### Cases by business unit since Apr23



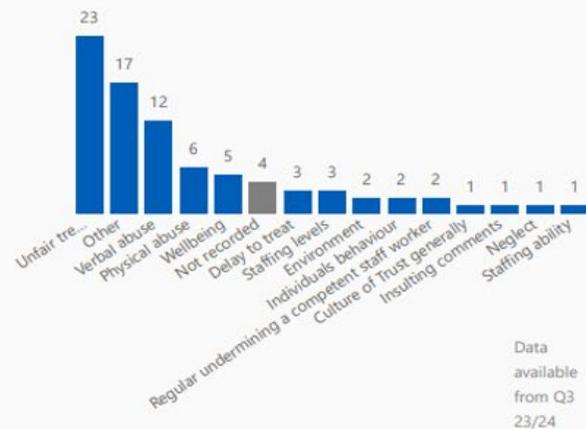
### Cases by investigation category



### Cases by SLM since Sep23



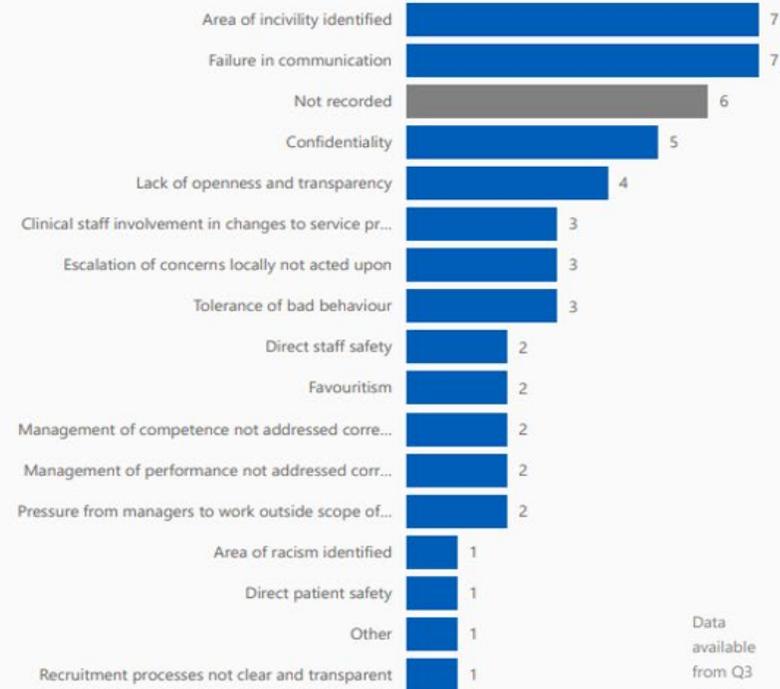
### Concern sub categories



### Cases by department since Sep23



### Closed cases by learning



# FTSU Gatehead Health: Speaking Up - what this looks like?

## FTSU Report - Key phrases

Quarter 2 - 24/25



The treemap above shows key phrases & number of occurrences allocated to freedom to speak up cases. Each case recorded since Q3 23/24 has the opportunity to be allocated up to 3 key phrases.



# Following Up. ZERO Tolerance: The Journey so far.....

## Zero Tolerance Working Group

Comprised of the following workstreams:

**Show  
Racism the  
Red Card**

Workstream  
Lead:  
Sarah Neilson

**Sexual  
Safety**

Workstream  
Lead:  
Kerry

**Civility and  
Respect**

Workstream  
Lead:  
Sam Corcoran

**Violence and  
Aggression**

Workstream  
Lead:  
Lee Taylor

**Zero  
Tolerance  
Hub**

Workstream  
Lead:  
Dale Jones

Oversight by  
Culture  
Programme  
Board

Supported by Communications Team via the 'It's not okay...' campaign

Freedom to  
**Speak  
Up**

# What have we done so far...

## SRTRC

- Manager Training completed (circa 200 managers)
- Train the Trainer completed – circa 10 trainers
- Comfortable to Challenge Training written, ready to rollout

## Sexual Safety

- NHS Sexual Safety Charter signed
- New Sexual Safety Policy PP60 launched
- Policy Guidance written – easy to understand for individuals
- Active bystander ‘train the trainer’ sessions completed by 3 members of staff (inc. FTSU Guardian) ready for rollout

## Civility and Respect

- Training session designed and delivered to a small number of teams
- Targeted training starting to be delivered, informed by relevant data and intelligence
- Civility guide designed & approved by Chief Exec
- Task and finish group set up to ensure focus and relevance of materials.

## Violence and Aggression

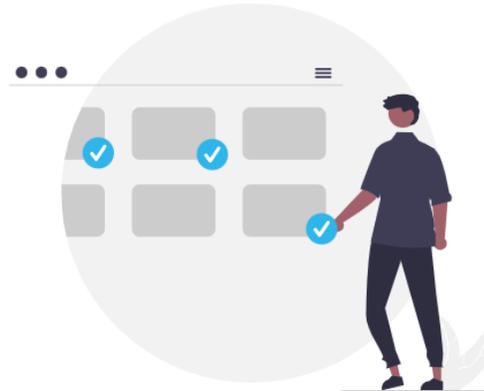
- Policy updated – awaiting final sign off
- Red and Yellow cards are starting to be issued to patients who demonstrate unacceptable behaviours
- Monthly Violence and aggression group set up to discuss incidents and strategies on dealing with violence in the workplace including training.

## Zero Tolerance Hub

- Zero Tolerance Hub designed and live
- A number of sections have been populated and are ready for use



# Zero Tolerance Support Hub



The Zero Tolerance Support Hub has been created primarily as a constantly-developing area which is home to advice, reporting, support and signposting options around instances which may constitute discrimination, harassment, bullying, victimisation, incivility or any other unacceptable behaviour.

Freedom to  
**speak  
up**

## Next Steps...

- Agree areas for targeted training – led by the data
- Agree a plan for wider rollout of training as a second phase
- Finalise reporting on In Phase, including anonymous reporting
- Populate all areas of zero tolerance hub
- Launch full intranet page
- Measure impact – e.g. staff survey data
- Review of culture board program – reintroduction.



Freedom to  
**speak  
up**

# References

- The NHS Patient Safety Strategy Safer culture, safer systems, safer patients July 2019 NHS England and NHS Improvement.
- The National Guardian's Office – <https://nationalguardian.org.uk>
- Gateshead NHS Foundation Trust – <https://www.gatesheadhealth.nhs.uk>
- WE ARE THE NHS: People Plan 2020/21 - action for us all. NHS England and NHS Improvement.



Freedom to  
**speak  
up**



Thank you for  
listening



Any Questions?



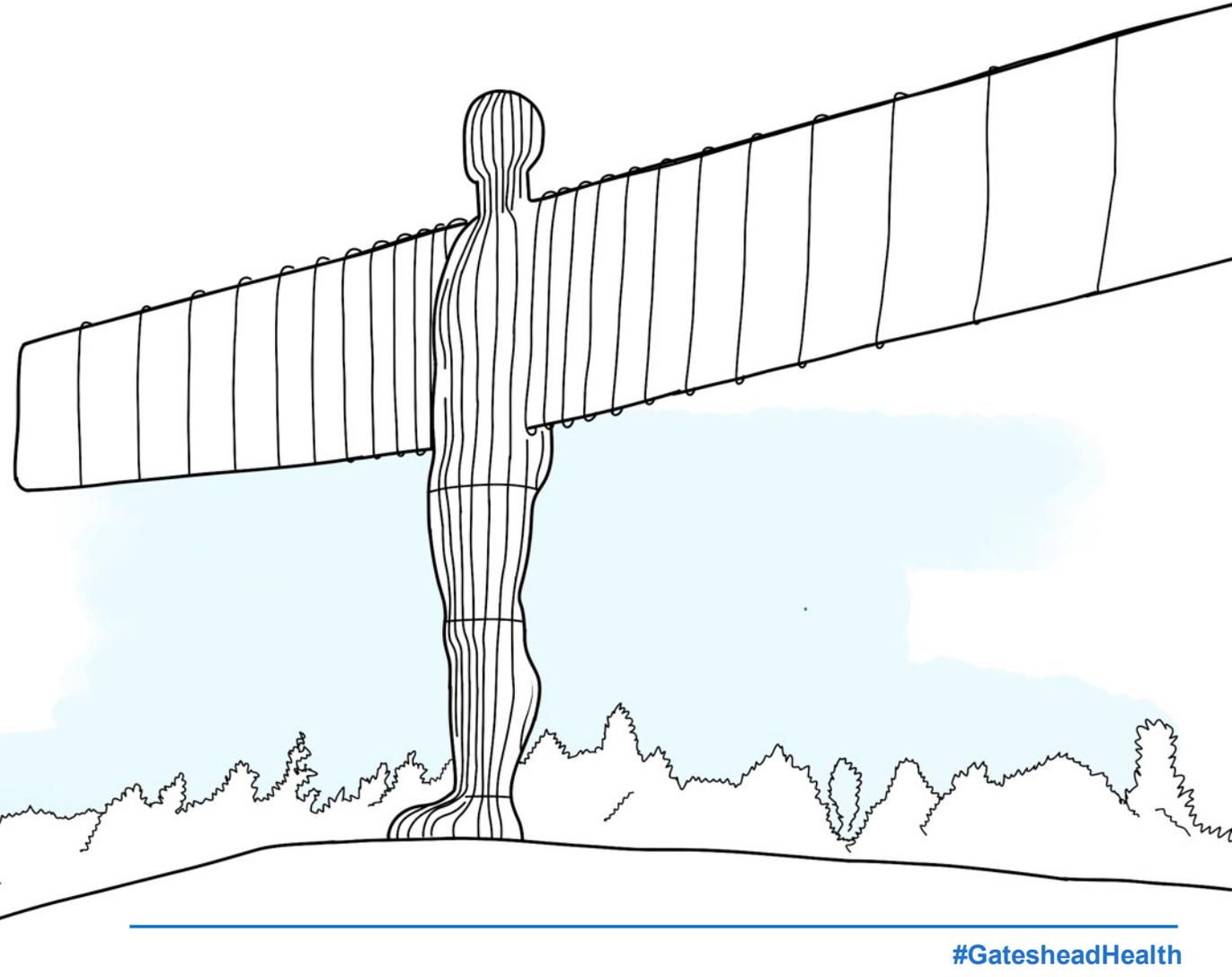
Freedom to  
**Speak  
Up**

# Chief Executive's Update to the Council of Governors

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Trudie Davies, Chief Executive

20 November 2024



# National statistics and context

## National policy, context and operating models

Department of Health & Social Care and NHS England to work closer together

*Change NHS* consultation, development of the 10 year plan and focus on the 3 shifts – community, prevention and technology

NHS productivity plan due shortly (Autumn)

More group and shared leadership arrangements emerging

New CQC Chief Executive announced – Sir Julian Hartley

Budget announcements:

- £22.6billion increase in day-to-day health budget this year and next
- £3.1billion increase in capital budget this year and next
- £1billion to tackle RAAC and repairs backlog
- £1.5billion of funding for new surgical hubs and diagnostic scanners

National pay awards of 5-6% for Agenda for Change staff, doctors and Very Senior Managers

Pay disputes resolved for junior doctors and consultants

# National performance headlines

## National performance

In general September's figures show that trusts are increasing activity and improving performance against national targets.

76.3% of patients seen within 4 hours in A&E (August 24). For type 1 A&E performance this was 62.5%.

Busiest summer on record for urgent and emergency care.

Decreased number of emergency admissions compared to 5 years ago.

8.6% of patients at A&E departments (type 1 and 2) waited more than 12 hours from arrival.

Maintenance backlog in the NHS has tripled in size since 2010/11 – £11.6bn

Delayed discharges remain a national challenge. As an example on Saturday 31 August, there were 20,600 patients who no longer met the criteria to reside in hospital. Of these, 60% remained in hospital that day.

The 28 day faster diagnosis target was met, but the 31 day and 62 day pathway standards were not (July 24). The numbers of treatments waiting over 52 weeks dropped to the lowest since December 2020.

High demand for elective care – record number of urgent cancer referrals in July.

Significant financial challenges in the NHS – 31 out of 42 ICSs have deficit plans

# National context

## Change NHS

- A national consultation has been launched to help build a health service fit for the future. *Change NHS: help build a health service fit for the future* is described as a national conversation to develop the 10-Year Health Plan.
- This follows on from the Lord Darzi report which identified some of the challenges facing the NHS. A summary of the key findings was shared at the last Council of Governors meeting.
- Amongst other things the consultation seeks views on the proposed 3 'shifts':
  - Shift 1: moving more care from hospitals to communities
  - Shift 2: making better use of technology in health and care
  - Shift 3: focussing on preventing sickness, not just treating it
- *Change NHS* was launched by the Health and Social Care Secretary Wes Streeting and invites the public, patients, carers and NHS workers to share experiences and suggestions for change.
- Responses can also be submitted collectively on behalf of organisations (closing date 2 December).
- Further information can be found on the dedicated website: [Change NHS](#)
- **Question** – how can we support Governors to engage with Change NHS? E.g. a workshop to help formulate a response?

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



**Engagement, involvement and visits:**

- CDC opening
- Cragside and Sunnyside
- Theatres
- Patient Safety Conference

- We have been undertaking work to **prepare us for winter**, working closely with our system partners. As part of this we are focussing on patient flow to ensure we are caring for our patients in the place that is most appropriate for their needs. We are also encouraging colleagues to take up the opportunity to be vaccinated against flu to protect themselves, their families and our patients.
- In July 2024 the Care Quality Commission (CQC) undertook unannounced Mental Health Act (MHA) monitoring visits to **Cragside and Sunnyside** wards. We have received the reports from these visits. The findings were largely very positive about the care provided and included positive feedback from staff and patients. The actions identified as part of previous MHA monitoring visits were confirmed as being resolved. Well done to all involved!
- Our **Secondary Prevention Service (lipid management pharmacy service)** has been shortlisted in the Outstanding NHS Industry Collaboration category at the Bright Ideas in Health Awards 2024. In addition the initiative to **reduce CO2 emissions in the emergency department** has also been shortlisted for the Towards Net Zero Award.
- Our **Breast Care Nursing** team were commended at the recent Northern Cancer Alliance (NCA) annual awards. The team created a six week programme to help patients with breast cancer feel supported and learn more about their illness. The programme created a place where patients could meet other people going through the same thing, share advice and learn new things to help them feel less anxious and more knowledgeable about their condition.
- We held our annual **Patient Safety Conference** – a great opportunity to share experiences and collectively learn more about patient safety and creating the right kind of learning culture.
- The **volume of falls and falls harm rates** both increased in September 2024 and continue to be reviewed by our Trust-wide falls group as part of the Patient Safety Incident Response Plan (PSIRP).
- The Trust's 2024/25 **C. difficile** threshold is 37; at the end of Month 6 there have been 23 cases reported against this threshold. Rates per 100k bed days have increased to 42 and community prevalence remains high. A 10 point reduction plan is in place with a 'back to basics' approach to support improving our position.
- As previously reported to the Council due to a significant increase in demand for our **maternity services**, we have had to take some difficult decisions to manage demand and ensure that our birthing numbers are in line with our capacity to provide safe, quality care. We are actively reviewing and monitoring the number of bookings over the forthcoming months and working closely with our regional partners to facilitate this.



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



- We hosted our annual **Star Awards** on 1 November, recognising the fantastic achievements of our colleagues across the Trust and QE Facilities. Congratulations to all of our winners and nominees. A special congratulations to our Lead Governor, Steve Connolly, who won the award for Volunteer of the Year!
- We celebrated **Black History Month** in October with the theme of 'reclaiming narratives'. We shared profiles of colleagues of black heritage who help to make Gateshead Health a great place to work. This is important to reinforce the Trust as an inclusive organisation which celebrates and fosters diversity.
- We took part in national **Speaking Up Month**, promoting the importance of Freedom to Speak Up (FTSU) as a way for colleagues to raise concerns. The theme for this year was #ListenUp and a number of our FTSU Champions and leaders shared their pledges. This is particularly important given historic challenges with colleagues feeling heard as outlined in recent reviews.
- On World Mental Health Day a **memorial garden** was opened in partnership with Gateshead Health Charity and national charity Doctors in Distress. Dr Andreas Hinsche planted a plant as part of the Doctors in Distress national tree planting campaign and those in attendance took time to remember colleagues we have lost. The garden creates a quiet and peaceful garden space for colleagues.

## Engagement, involvement and visits:

- Star Awards
- Memorial garden opening ceremony
- CEO roadshows
- Consultant interviews
- Non-Executive Director interviews



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



- At the end of month 6 we are reporting a **financial deficit of £5.7m**, representing a £0.042m positive variance from planned deficit levels of £5.740m, however, this position does include a number of one-off financial benefits. The Trust is required to deliver a revised forecast outturn deficit position of £7.088m, aided by an additional £5m non-recurrent deficit support funding which has been allocated to the North East and North Cumbria Integrated Care System (ICS). The Trust is forecasting achievement of this deficit while acknowledging scenario modelling presents some real challenges in delivering.
- The **Cost Reduction Plan (CRP)** is behind plan with a negative variance of £0.680m with £6.4m transacted as at month 6 against a plan of £7.1m. Risks remain in the proportion of non-recurrent savings (one-off) made to date and the CRP plan being heavily weighted towards Q3 and Q4. The Board through the Finance and Performance Committee are considering other schemes to reduce the in-year shortfall and achieve more on a permanent basis.
- There remains a significant focus on improving our **financial position** and making the best use of the resources available to us. We are working with our clinical and non-clinical teams to look at how we can ensure efficiency, effectiveness and quality in the delivery of our services. This links to our planning for winter and future strategy development. Key operational performance exceptions:
  - **Length of stay** continues to be challenging.
  - The **A&E 4-hr standard** decreased slightly from 72% in August to 71.4% in September, below national target level of 78% and planned improvement levels. A weekly clinically-led task and finish group is in place to identify drivers of performance variation and support improvement actions. The group are exploring ways in which the use of Same Day Emergency Care (SDEC) can be maximised to support the achievement of the 4 hour target.
  - The revised stretch target of achieving zero > **52 week** RTT waiters was not achieved by the end of Q2 and at the end of September the number of long waits have increased to 123 (from 108 in August). Lower than planned activity levels in some key specialty areas, additional unplanned workforce pressures and pre-assessment challenges have all contributed to longer waits. Speciality level pressures continue in Urology, Gynaecology and Trauma and Orthopaedics. Additional urology mutual aid is being sought and agreed to reduce the backlog further in Q3 and recent appointments in Gynaecology will support improvements in Q4. For Trauma and Orthopaedics demand and capacity has been balanced to support the delivery of zero 52 week waits by year end.
- Further performance information is included at Appendix 1.

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

- Colleagues from Critical Care and the Organ Donation Committee hiked up Scafell Pike in partnership with other trusts to 'turn the peaks pink' and promote **Organ Donation Week**. Over the past year, 9 people in Gateshead have had their lives saved or transformed thanks to deceased organ donors from across the UK. However, sadly 3 people a day will still die while in need of a transplant due to the shortage of people willing to donate organs.
- As a member of the region's Imaging Network a **new artificial intelligence (AI) tool** will be added to our X-ray kit to help catch lung cancer quicker. The AI technology acts like a second pair of eyes for clinicians, with the ability to prioritise cases where the X-ray has found something suspicious which may indicate possible lung cancer. It has been shown to improve diagnostic accuracy by 45% and increase diagnostic efficiency by 12%.
- We have made a number of **new consultant appointments**, including in acute medicine and psychiatry. The quality and number of applications is a positive sign that consultants really want to work at Gateshead and share our commitment to improving health outcomes.

## Engagement, involvement and visits:

- Provider Collaborative workforce meetings
- Great North Healthcare Alliance meetings ICS Chair and CEO workshop
- Place-based meetings



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

- The **Community Diagnostic Centre (CDC)** opened at the Metrocentre in October 2024 and welcomed its first patients. The CDC is a partnership between Gateshead Health and Newcastle Hospitals, providing a variety of diagnostic services such as imaging, respiratory and cardiac investigations. It takes healthcare into the community and aims to relieve pressures on local hospitals. We were delighted that a number of Governors could join us on a tour of the facility during the opening week.



# Appendix 1 – performance against constitutional standards



Metric	Target	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23	Jan 24	Feb 24	Mar 24	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Ass/Var
Achievement of the A&E 4 hours standard	>78%	71.3%	71.4%	70.6%	70.5%	66.1%	68.6%	69.0%	72.2%	71.8%	72.0%	76.3%	71.0%	72.2%	71.4%	
12 hour trolley waits (DTA to left department)	0	0	50	24	0	7	1	0	0	1	4	0	3	0	0	
% of ED attendances > 12 hours in department	<2%	4.4%	6.5%	5.7%	4.9%	7.4%	7.0%	4.9%	3.6%	3.8%	4.1%	2.3%	5.4%	4.4%	4.4%	
Ambulance handover delays 30-60 minutes	0	77	123	99	80	110	25	1	0	0	2	1	10	4	3	
Ambulance handover delays 60 minutes +	0	16	122	100	51	50	2	0	0	0	0	0	13	0	0	
Achievement of the RTT 18 week standard	>92%	68.9%	67.0%	66.9%	67.7%	67.2%	68.3%	67.8%	67.9%	68.9%	70.6%	70.6%	70.3%	69.2%	68.6%	
Achievement of the 52 week RTT standard	Apr 24 - 58 May 24 - 42 Jun 24 - 18 Jul 24 - 0	237	293	273	263	143	113	112	76	72	109	88	81	108	123	
Achievement of the 6 week diagnostic standard	>95%	90.7%	88.6%	92.4%	94.1%	91.4%	90.0%	92.1%	91.2%	88.8%	86.0%	83.8%	84.7%	84.3%	86.4%	
Achievement of the Cancer 28 day standard	>77%	77.6%	76.0%	76.8%	78.5%	80.4%	75.9%	83.0%	81.1%	79.7%	82.1%	80.7%	80.6%	79.7%	77.6%	
Achievement of the Cancer 31 day standard	>96%	99.6%	99.5%	100.0%	99.4%	99.4%	99.6%	100.0%	97.9%	99.1%	99.6%	100.0%	98.9%	99.7%		
Achievement of the Cancer 62 day standard	>70%	73.5%	70.4%	68.6%	70.0%	64.6%	72.4%	71.2%	73.9%	75.3%	68.1%	70.9%	70.0%	74.8%		

# Appendix 1 – performance against our leading indicators (aligned to our strategic aims and objectives)

## Strategic Objectives 2024/25

We will continuously improve the quality and safety of our services for our patients

Full compliance with the Maternity Incentive Scheme (MIS) and the Ockenden actions

Full delivery of the actions within the Quality Improvement Plan leading to improved outcomes and patient experience with particular focus on improvements relating to mental health, learning disabilities and cancer.

An agreed strategic approach to the development of an EPR supported by a documented and timed implementation plan.

Development & implementation of an Estates strategy that provides a 3 year capital plan to address the key critical infrastructure and estates functional risks across the organisation by March 2025

Metric	Target	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23	Jan 24	Feb 24	Mar 24	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Ass/Var	Trend	
<b>LEADING INDICATORS</b>																		
Ockenden Recommendations % compliance with Total Recommendations	100%	55.5%	55.5%	88.8%	88.8%	88.8%	77.7%	77.7%	77.7%	78.0%	78.0%	74.0%	74.0%	89.0%	90.0%			
Maternity Incentive Schemes % compliance with Total Recommendations	100%									62.9%	70.8%	76.4%	77.5%	83.0%	89.0%			
Reduction in patient safety incidents linked to estate issues	<=4		2	2	1	9	1	4	4	3	4	6	4	7	3			
Compliance with the quality improvement plan indicated by the % of actions on track	100%	68%	76%	76%	84%	80%	84%	88%	88%	88%	88%	76%	84%	88%	84%			

## Strategic Objectives 2024/25

We will be a great organisation with a highly engaged workforce

Caring for our people in order to achieve the sickness absence and turnover standards by March 2025

Growing and developing our people in order to improve patient outcomes, reduce reliance on temporary staff and deliver the 24-25 workforce plan

Improvement in the staff survey outcomes and increase staff engagement score to 7.3 in the 2025 survey

Metric	Target	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23	Jan 24	Feb 24	Mar 24	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Ass/Var	Trend	
<b>LEADING INDICATORS</b>																		
Maintain the vacancy rate at <=2.5%	<=2.5%	3.1%	2.3%	1.8%	2.5%	2.5%	2.3%	2.2%	2.4%	1.7%	1.7%	1.6%	3.2%	3.1%	2.7%			
Improve the staff engagement score to 7.3	>=7.3			7.00			6.60			6.60			6.63					

**Strategic Objectives 2024/25**

**We will enhance our productivity and efficiency to make the best use of our resources**

Improve the quality of care delivery and accessibility for patients by meeting the locally agreed stretch standards by March 2025

Evidence of reduction in cost base and an increase in patient care related income by the end of March 2025 leading to a balanced financial plan for 2025-26



Metric	Target	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23	Jan 24	Feb 24	Mar 24	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Ass/Var	Trend	
<b>LEADING INDICATORS</b>																		
<b>Average Length of Stay Non-Elective &lt;4 days</b> <i>Revised to align with operational guidance definitions</i>	<=4	4.97	5.23	5.74	5.23	5.31	5.38	5.26	4.46	5.19	7.62	6.87	7.17	7.73	7.97			
<b>Achievement of the 4 hours trajectory</b>	≥78% (Local ≥80%)	71.3%	71.4%	70.6%	70.5%	66.1%	68.6%	69.0%	72.2%	71.8%	72.0%	76.3%	71.0%	72.2%	71.4%			
<b>Achievement of the 52 week RTT standard</b>	Apr 24 - 58 May 24 - 42 Jun 24 - 18 Jul 24 - 0	237	293	273	263	143	113	112	76	72	109	88	81	108	123			
<b>Achievement of 2024/25 financial Plan - Variance (£k)</b>	Figure in brackets favourable									2,312	2,609	0.009	(0.004)	(0.073)	(0.042)			
<b>Finance - Forecast Out-turn Deficit (Plan)</b>	12,650									12,650	12,650	12,650	12,650	12,650	7,088			

**Strategic Objectives 2024/25**

**We will develop and expand our services within and beyond Gateshead**

Contribute effectively as part of the Great North Healthcare Alliance to maximise the opportunities presented through the regional workforce programme

Evidenced business growth by March 2025 with a specific focus on Diagnostics and Women's health and commercial opportunities



Metric	Target	Aug 23	Sep 23	Oct 23	Nov 23	Dec 23	Jan 24	Feb 24	Mar 24	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Ass/Var	Trend	
<b>LEADING INDICATORS</b>																		
<b>0.5% increase in QEF externally generated turnover</b>	>=0.5%									0.2%	0.2%	0.2%	0.8%	1.8%	2.2%			

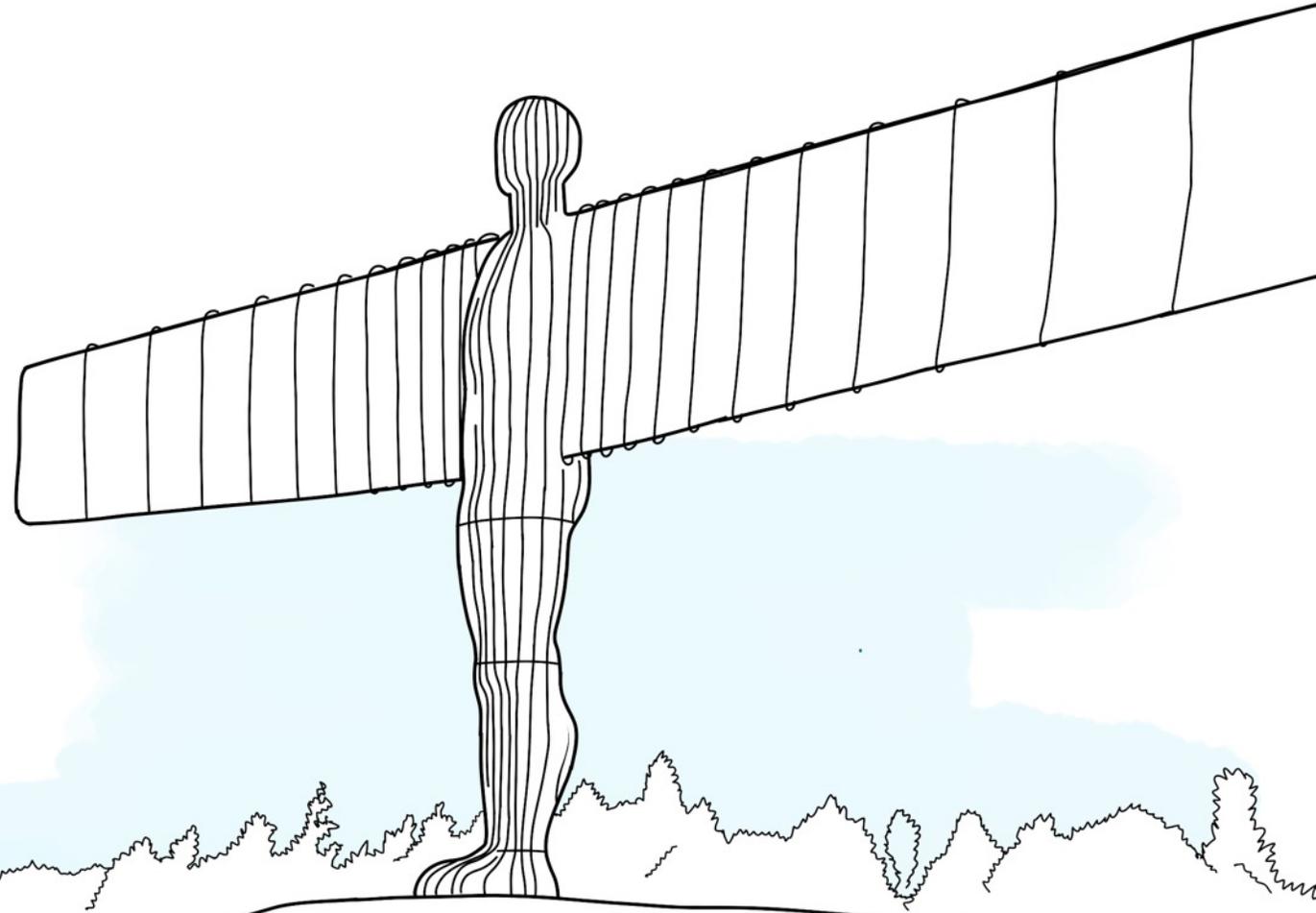


# Work of the People and OD Committee

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Maggie Pavlou , Chair of the Committee

January – November 2024



# Examples of issues considered and assurances received

PODC have met 6 times since January 2024

Strategic  
Objectives

People & EDI  
Strategies

Workforce  
Planning

Local Records  
Management

EDI Strategy

Workforce  
Growth

Retention

WRES and  
WDES Action  
Plans

Absence  
Management

People & OD  
Metrics &  
Leading  
Indicators

## Reports

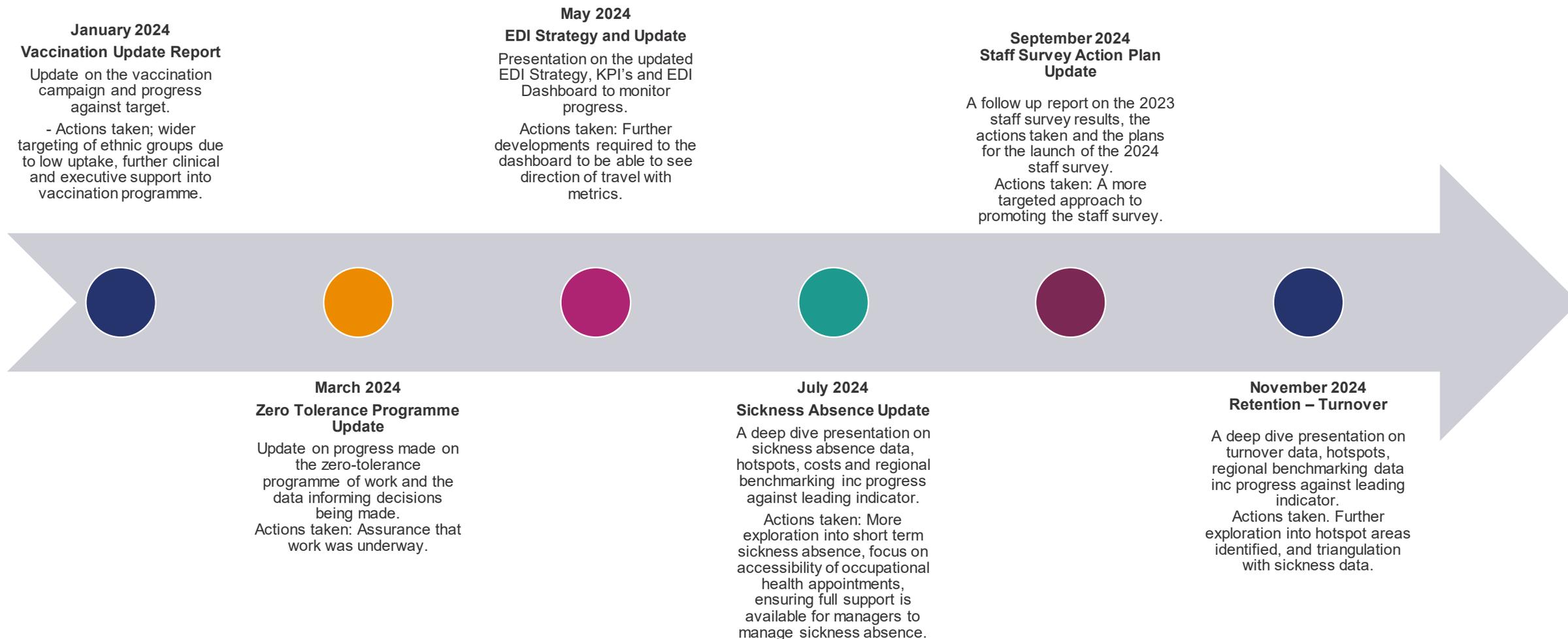
Guardian of Safeworking / Freedom to Speak up / Revalidation Report /  
GMC Survey / ADQM / Gender Pay Gap

# Case Study

SA2.1 Caring for our people in order to achieve the sickness absence and turnover standards by March 2025.



**Gateshead Health**  
NHS Foundation Trust

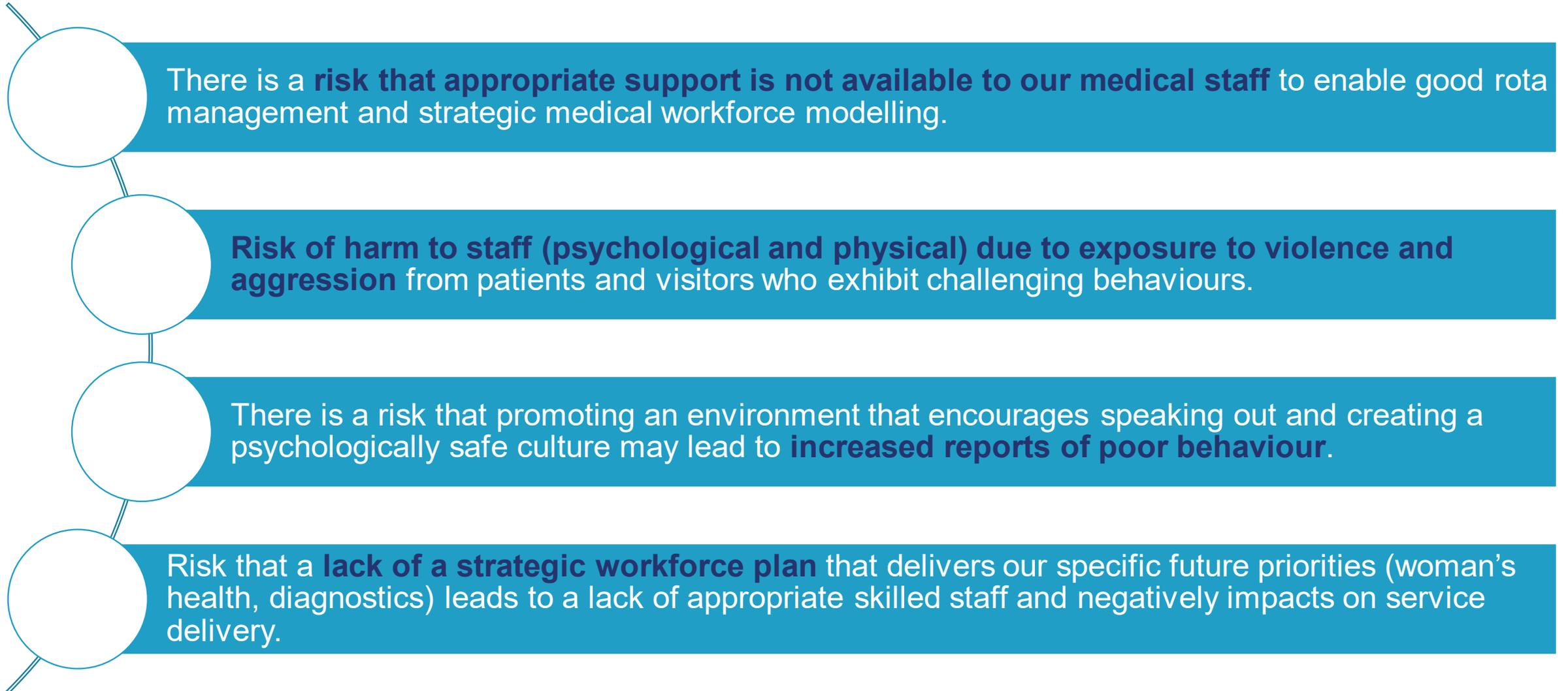


# Is this work making a difference?

- **Vacancy rate: Target is  $\leq 2.5\%$ , currently  $2.7\%$ .**  
This was below target for April – June and following stricter vacancy controls has remained over the target since. This is an accepted variance.
- **Staff Engagement Score: Target is  $\geq 7.3$ . 2023 staff survey was  $7.0$ .**  
Quarterly people pulse survey samples too small a sample size to benchmark progress as a less than 5% completion rate, 2024 staff survey results due January 2025 and will be the next check point.
- **Sickness Absence: Target is  $\leq 4.9\%$ , currently  $5.6\%$  (Rolling average figure).**  
In-month sickness is observing a positive trajectory (currently  $5.4\%$ ), the 12-month rolling sickness absence figure will take a while to follow as it averages the last 12 months.
- **Temporary Staffing Spend: Target is  $< 2.3\%$  of paybill, currently  $0.4\%$ .**  
Costs on temporary staffing has reduced significantly and remains consistently under target.

# Key Risks

The Committee is currently monitoring 4 risks on the Organisational Risk Register



# Key Area's for Assurance: Dec 2024 – March 2025

Monitoring delivery of the corporate objectives, People and EDI Strategy, organisational risk and board assurance framework

Caring For Our People

Growing & Developing Our People

Being a Great Place to Work

Guardian of Safeworking

Vaccination Programme

Audit Reporting

ADQM

Workforce Planning

WRES & WDES Updates

Gender Pay Gap Report

Staff & Pulse Survey

Freedom to Speak Up

GMC Survey

# Key Priorities for Assurance: Dec 2024 – March 2025

Zero-  
Tolerance  
Campaign

Sickness  
Absence

Workforce  
Planning

Staff Survey

Retention

Audit  
Reporting

Medical  
Staffing

Workforce  
Growth

Any  
questions?

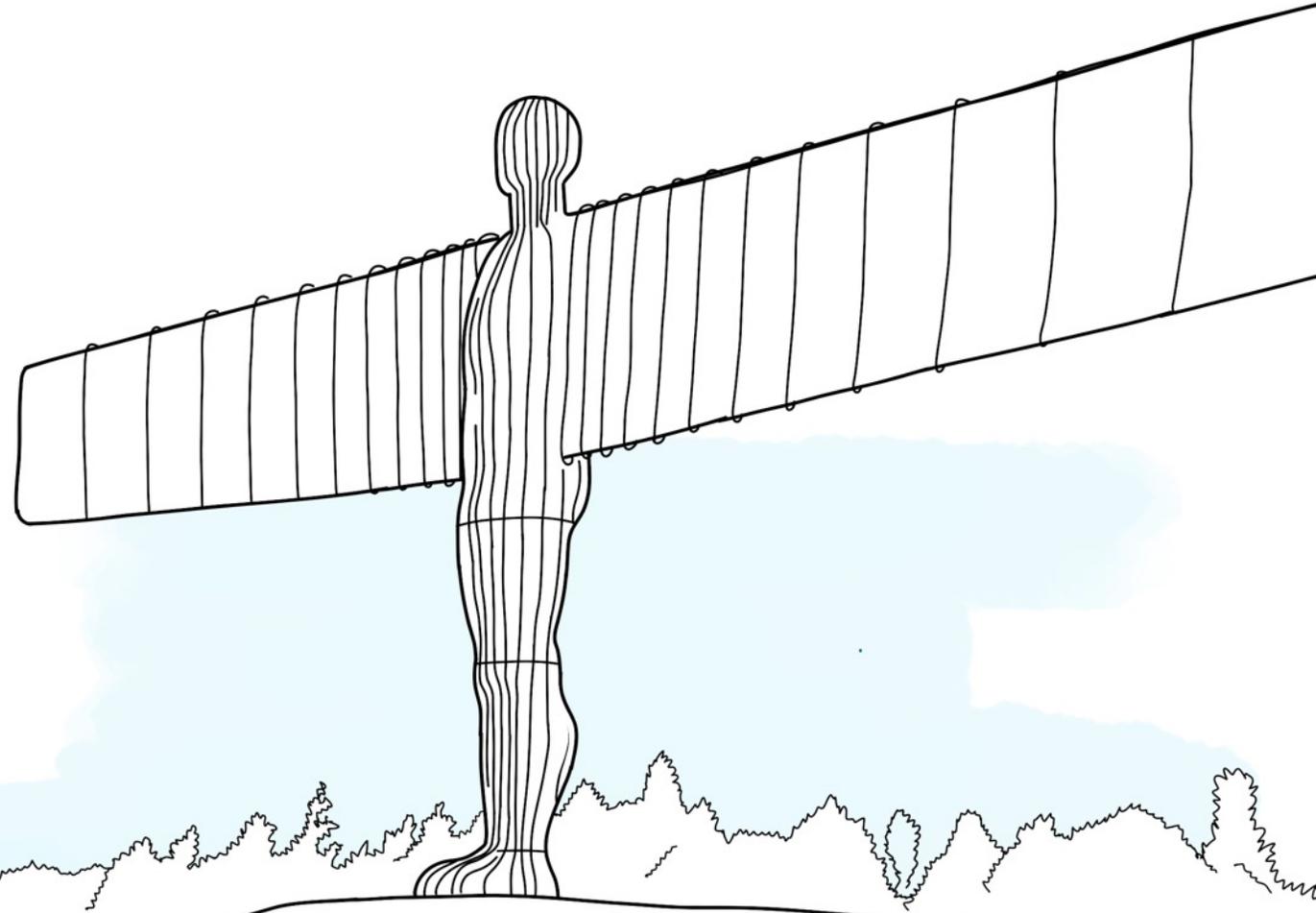


# Work of the Finance and Performance Committee

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Mike Robson, Chair of the Committee

20 November 2024



# Examples of issues considered and assurances received



# Alert, Advise, Assure

## Financial Plan & Performance

- Achieved 'updated' target in 23/24 whilst 24/25 plan agreed late and more challenging
- Currently on plan but has required significant mitigations
- Pressures to be addressed includes delivery of CRP, Medicine Business Unit, Medical Staffing, establishment controls, Community Services contract

## Leading Indicators & Breakthrough Objectives

- Strong overall performance in 23/24.
- Stretch targets agreed internally for 24/25
- Challenges include non elective targets, elective recovery, specialty specific challenges, paediatric autism pathway, GP collective action / shared care

# Key risks

- The Committee is currently monitoring 7 risks on the Organisational Risk Register

4577 – the Trust does not achieve its 24/25 planned deficit (20)

2341 – failure to maintain business continuity due to estate infrastructure, age and backlog maintenance requirements exceed capital allocation (16)

2424 – efficiency requirements are not achieved (16)

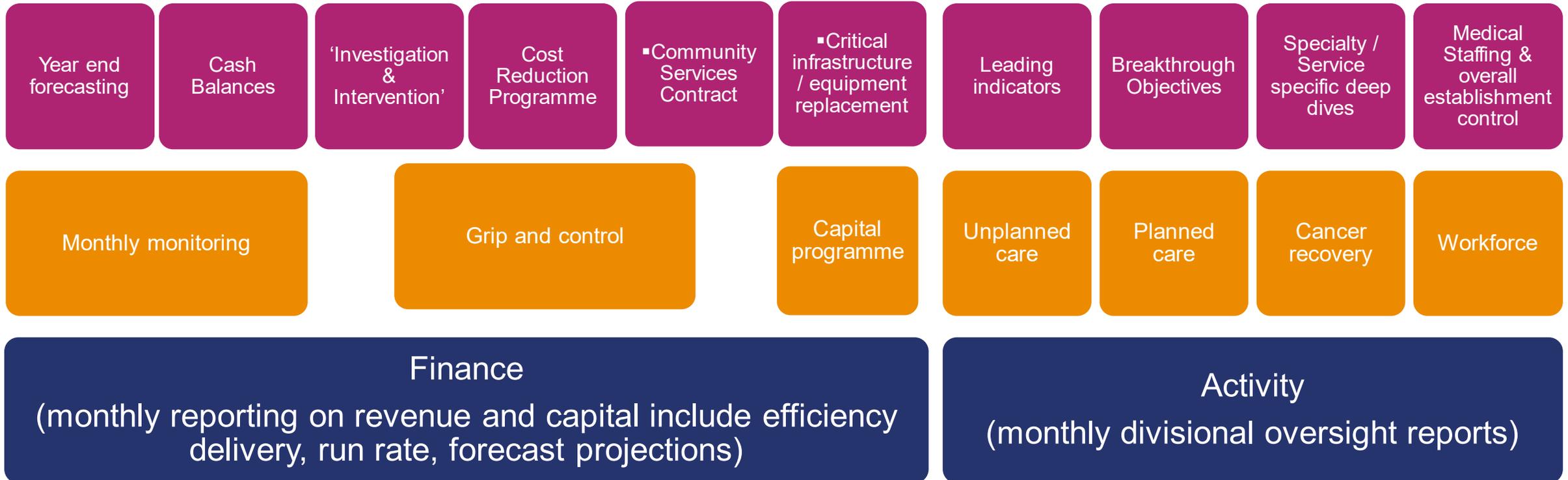
2425 – activity not delivered in line with planned trajectories (16)

4541 – failure of governance arrangements as we transition to new governance structure (16)

4559 – lack of support to medical staff to support good rota management and strategic medical workforce modelling (16)

4591 – significant disruption of services due to GP collective action including withdrawal from share care arrangements (16)

# Key areas of assurance



**Delivery of the planned financial and activity trajectories**

# Key priorities for assurance over the next 6 months

Oversight of  
delivery of  
revenue and  
capital plans

Oversight of  
operational  
performance

Development  
and approval of  
the 2025/26  
Annual Plan

Implementation  
of strengthened  
internal  
governance  
arrangements

Monitoring Delivery of the Strategic  
Objectives, Organisational Risks and Board  
Assurance Framework

Any  
questions?



# Report Cover Sheet

# Agenda Item: 9

<b>Report Title:</b>	<b>Proposed Constitutional Amendment – Public Constituencies</b>			
<b>Name of Meeting:</b>	Council of Governors			
<b>Date of Meeting:</b>	20 November 2024			
<b>Author:</b>	Jennifer Boyle, Company Secretary			
<b>Executive Sponsor:</b>	Alison Marshall, Chair			
<b>Report presented by:</b>	Jennifer Boyle, Company Secretary			
<b>Purpose of Report</b> <i>Briefly describe why this report is being presented at this meeting</i>	<b>Decision:</b>	<b>Discussion:</b>	<b>Assurance:</b>	<b>Information:</b>
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To seek Governor approval for a proposed constitutional amendment to merge the Central and Eastern Gateshead public constituencies				
<b>Proposed level of assurance</b> <i>– to be completed by paper sponsor:</i>	<b>Fully assured</b>	<b>Partially assured</b>	<b>Not assured</b>	<b>Not applicable</b>
	<input type="checkbox"/> <i>No gaps in assurance</i>	<input type="checkbox"/> <i>Some gaps identified</i>	<input type="checkbox"/> <i>Significant assurance gaps</i>	<input checked="" type="checkbox"/>
<b>Paper previously considered by:</b> <i>State where this paper (or a version of it) has been considered prior to this point if applicable</i>	Proposal discussed at the Membership, Governance and Development Committee			
<b>Key issues:</b> <i>Briefly outline what the top 3-5 key points are from the paper in bullet point format</i>  <i>Consider key implications e.g.</i> <ul style="list-style-type: none"> <li>• Finance</li> <li>• Patient outcomes / experience</li> <li>• Quality and safety</li> <li>• People and organisational development</li> <li>• Governance and legal</li> <li>• Equality, diversity and inclusion</li> </ul>	<ul style="list-style-type: none"> <li>• The proposed merger of Central and Eastern Gateshead constituencies should result in: <ul style="list-style-type: none"> <li>• Increased public Governor representation and ability to deliver the ‘holding to account’ element of the role</li> <li>• Increased ability to achieve quorum at the Council of Governors</li> </ul> </li> <li>• A by-election will result in additional financial cost, but at present the Council cannot operate effectively with the number of vacancies remaining from the current election.</li> </ul>			
<b>Recommended actions for this meeting:</b> <i>Outline what the meeting is expected to do with this paper</i>	The Membership, Governance and Development Committee recommends that the Council approves a constitutional amendment to merge the Central and Eastern constituencies. The exact changes to the Constitution are set out in Appendix 1.			

<b>Trust Strategic Aims that the report relates to:</b>	<b>Aim 1</b> <input checked="" type="checkbox"/>	We will continuously improve the quality and safety of our services for our patients			
	<b>Aim 2</b> <input checked="" type="checkbox"/>	We will be a great organisation with a highly engaged workforce			
	<b>Aim 3</b> <input checked="" type="checkbox"/>	We will enhance our productivity and efficiency to make the best use of resources			
	<b>Aim 4</b> <input checked="" type="checkbox"/>	We will be an effective partner and be ambitious in our commitment to improving health outcomes			
	<b>Aim 5</b> <input type="checkbox"/>	We will develop and expand our services within and beyond Gateshead			
<b>Trust <a href="#">strategic objectives</a> that the report relates to:</b>	All indirectly				
<b>Links to CQC Key Lines of Enquiry (KLOE):</b>	Caring <input type="checkbox"/>	Responsive <input checked="" type="checkbox"/>	Well-led <input checked="" type="checkbox"/>	Effective <input type="checkbox"/>	Safe <input type="checkbox"/>
<b>Risks / implications from this report (positive or negative):</b>					
<b>Links to risks (identify significant risks – new risks, or those already recognised on our risk management system with risk reference number):</b>	Risk 4577 - Achievement of 2024/25 revenue financial plan (20)				
<b>Has a Quality and Equality Impact Assessment (QEIA) been completed?</b>	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>		<b>Not applicable</b> <input checked="" type="checkbox"/>	

## Proposed Constitutional Amendment – Public Constituencies

### 1. Executive Summary

- 1.1. The Trust currently has four public constituencies. Of the Gateshead constituencies Eastern is the smallest constituency in respect of numbers of members and in recent years there has been a lack of interest in members self-nominating for Governor positions.
- 1.2. Despite a focus on engaging with the public and members in the Eastern area, the current elections have again resulted in no Governor representation in the East.
- 1.3. Historically there has been a strong level of interest in the Central constituency resulting in contested elections. Given the close geographical proximity of parts of the Central constituency and the Eastern constituency and the wider role of Governors to consider the interests of the public at large it is proposed to merge the two constituencies together.
- 1.4. This would help to improve public representation at the Council of Governors and maintain the important public accountability of the Foundation Trust to Gateshead residents.

### 2. Introduction

- 2.1. The Trust currently has four public constituencies – Western Gateshead, Central Gateshead, Eastern Gateshead and the Out-of-Area constituency.
- 2.2. In recent years Governor representation in Eastern Gateshead has proved particularly challenging. This is shown in the below table:

	Western	Central	Eastern	Out of Area
<b>January 2025 start date</b>				
Seats available	3	2	3	N/a
Nominations received	1	4	0	N/a
Vacant seats	2	0	3	N/a
<b>January 2024 start date</b>				
Seats available	2	2	2	1
Nominations received	3	2	0	2
Vacant seats	0 but increased to 1 during the year	0	2 but increased to 3 during the year	0
<b>January 2023 start date</b>				
Seats available	3	4	3	N/a
Nominations received	3	6	1	N/a
Vacant seats	0	0	2	N/a

- 2.3. The table shows that over the last 3 years there has only been 1 member who self-nominated for the Eastern constituency. Sadly, this Governor passed away and since this time there has been no Governor representation in Eastern

Gateshead. This will continue through into the 2025/26 financial year as there have been no nominations in the current elections.

- 2.4. The table also shows that Western Gateshead will not be as well represented given that there was only one nomination for the current elections. The historic data does not indicate that this is longstanding issue and therefore the current situation is not comparable to Eastern Gateshead.
- 2.5. This paper proposes a constitutional change to mitigate the risks presented by the lack of Eastern representation.
- 2.6. Constitutional changes require approval by both the Council of Governors and the Board of Directors. Any changes impacting upon the power or duties of Governors must also be presented retrospectively to the Annual Members' Meeting for voting (and the changes reversed should members not support them).

### **3. Key issues / findings**

- 3.1. The lack of representation in Eastern Gateshead has a number of implications.
- 3.2. As Foundation Trusts are accountable to the public and members via the public Governors, and public Governors also represent the interests of members and the public, this risks weakening the ability to deliver the accountability and representation role.
- 3.3. It reduces the number of current public Governors on the Council. In order to be quorate one third of the Governors in office (i.e not counting vacant posts) must be present, with the majority of those in attendance being public Governors. From January 2025 the composition of the Council will be 12 public Governors, 6 staff Governors and 6 appointed Governors. As 50% of the Council is made up of staff and appointed Governors, many of which are good attenders, it means that achieving quorum is challenging. This has been evidenced through recent meetings.
- 3.4. A number of steps have been taken to encourage both membership and interest in Governor positions in Eastern Gateshead. Current Governors have supported with this by reaching out to members of the public and contacts. This included attending a community event in the Eastern constituency in August 2024. Whilst this generated 10 new members, only 2 lived in the Eastern constituency area and none translated into nominations for the Governor positions.
- 3.5. On reflection all membership engagement and recruitment events in recent years have actually been held in or on the border of the Eastern constituency - namely the two Trust Open Days, a talk at Felling Methodist Church and the stall at Embells Community Market.
- 3.6. The challenge of filling the Eastern seats has been discussed with the Membership, Governance and Development Committee. The discussions at the Committee have resulted in the proposal to merge the Central and Eastern constituencies together to create one constituency.
- 3.7. The Central Gateshead constituency typically attracts more interest in Governor nominations. Over the last 3 years all seats have been filled and on 2 occasions there has been a contested election, meaning some keen members lose out on

the opportunity to become Governors. This will be the case in the current election, where there are 4 candidates for 2 seats. Meanwhile 3 Eastern Gateshead seats across a notional border remain vacant.

- 3.8. Through discussions with the Committee it was noted that when Governors engage with members / the public and represent their interests they don't restrict themselves to their constituency areas. Additionally, as NHS England's *Addendum to your Statutory Duties* document (2022) clarified Governors are also expected to represent the interests of the Trust as a whole and the public. The document states that Governors are required to seek and form a view of the interests of the 'public at large'.
- 3.9. Merging the two constituencies together should in time increase the number of public Governors who are able to represent the interests of the public and strengthen the chain of representation and accountability which is key to Foundation Trust governance. It will also support the Council in being able to achieve the important principle of public Governors accounting for the majority of Governors attending Council meetings, enabling quorum to be reached for decision-making.
- 3.10. As shown in Appendix 1 merging the constituencies together would result in a combined minimum membership of 10,000 members represented by 10 Governors.
- 3.11. The Committee discussed whether the Western constituency should be included in the merger, creating a single Gateshead constituency. Whilst this could be a future option, the Committee recommends proceeding with a merger of the Central and Eastern constituencies first and assessing the impact of this before taking any further steps to adjust constituencies.
- 3.12. Should the recommendation to merge the Central and Eastern constituencies be supported by the Council, it is proposed that a by-election is held to fill the vacant seats. Whilst this will incur an additional cost from the election company, it is critical to support the ability of the Council to be quorate over the next year. The by-election would be held in Q4 2024/25.

#### **4. Solutions / recommendations**

- 4.1. The Membership, Governance and Development Committee recommends that the Council approves a constitutional amendment to merge the Central and Eastern constituencies. The exact changes to the Constitution are set out in Appendix 1.
- 4.2. Should the Council approve this amendment it will be presented for approval at the Board of Directors on 27 November. In addition it will be presented to the next Annual Members' Meeting in September 2025 (although it can be enacted before this time, the change must be unwound if members do not provide approval).

## APPENDIX 1 – Proposed Constitutional Amendments

5.2 The Trust is to have ~~four~~<sup>five</sup> Membership Constituencies, namely:

(a) ~~Three~~<sup>Four</sup> “Public Constituencies” (including the “Out of Area Constituency), and

(b) One “Staff Constituency”

▲ 5.3 Public Constituencies (other than “Out of Area”):

5.3.1 An individual who lives in an area specified in Annex 1(a) ~~or~~, (b) ~~or~~ (c) as an area for a public constituency may become or continue as a member of the Foundation Trust.

5.4 Out of Area Constituency:

5.4.1 Members of the Trust who are Members of the Out of Area Constituency are to be:

(a) Individuals who live in the area of the Trust listed in Annex 1 (~~c~~) or

(b) Individuals who live outside the area of the Trust listed in Annex 1 (a), (b) ~~or~~, (c) ~~or~~ (d) and who have used any of the Trust’s services within the 7 years immediately preceding the date of their application for membership and had domestic responsibility for the care of the patient once they have received their treatment from the Trust (other than an individual providing care in pursuance of a contract (including a contract of employment) or as a volunteer for a voluntary organisation.

## Annex 1

### Public Constituencies Of The Trust

Name of Constituency	Area	Minimum number of Members	Number of Governors
(a) Western Gateshead	The Western area will consist of Prudhoe, Crawcrook & Greenside, Chopwell & Rowlands Gill, Winlaton & High Spen, Blaydon, Ryton, Crookhill & Stella, Whickham North, Whickham South & Sunnyside, Dunston & Teams, Dunston Hill & Whickham East.	600	6
(b) Central <u>and Eastern</u> Gateshead	The Central <u>and Eastern</u> area will consist of Lamesley, Birtley, Lobley Hill & Bensham, Bridges, Saltwell, Deckham, Low Fell, Chowdene, High Fell Chester-Le-Street, Ouston and Pelton, Washington, <u>Felling, Windy Nook &amp; Whitehills, Pelaw &amp; Heworth, Wardley and Leam Lane and parts of Jarrow &amp; Hebburn.</u>	<u>1,000</u> <del>700</del>	<u>10</u> <del>7</del>
<del>(c) Eastern Gateshead</del>	<del>The Eastern area will consist of Felling, Windy Nook &amp; Whitehills, Pelaw &amp; Heworth, Wardley and Leam Lane and parts of Jarrow &amp; Hebburn.</del>	<del>200</del>	<del>2</del>
<del>(c)</del> Out of Area	The geographical area covered by the North East and North Cumbria Integrated Care System other than any areas noted above and users of Trust services living outwith the areas (a) (b) (c) and (d)	100	1

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# Committee Escalation and Assurance Report

<b>Name of Governor Committee</b>	Membership, Governance and Development Committee
<b>Date of Governor Committee:</b>	17 October 2024
<b>Chair of Governor Committee:</b>	Steve Connolly (Lead Governor)

<p><b>Alert</b> <i>(matters of significant concern requiring escalation to the Council for further action)</i></p>
<ul style="list-style-type: none"> <li>No issues of significant concern</li> </ul>
<p><b>Advise</b> <i>(areas subject to ongoing monitoring where some assurance has been noted / further assurance sought or emerging developments that the Committee is seeking assurance over)</i></p>
<ul style="list-style-type: none"> <li>Discussion took place around the challenges in filling some of the vacant seats particularly within the Eastern Gateshead constituency and whether it would be beneficial to consider merging this constituency with Central Gateshead to gain greater public Governor representation given that four nominations have been received with only two seats being available. The Committee agreed that this would be a sensible approach however it was noted that this will require a constitutional amendment which will need to be approved by the Board and Council of Governors.</li> <li>The Committee discussed whether it would be appropriate to refine the membership database and remove any inactive members or those who do not wish to remain on the database. It was noted that this may significantly reduce the membership base however it would result in an engaged cohort of members and reduce financial wastage of sending election material to members who are no longer interested. Mrs Boyle will discuss further with the election company and provide an options paper for the next meeting to highlight the advantages and disadvantages or undertaking this process.</li> </ul>
<p><b>Assure</b> <i>(key assurances received and any highlights of note for the Council, including recommendations for items requiring Council approval / ratification)</i></p>
<ul style="list-style-type: none"> <li>Plans are being undertaken around the next Medicine for Members event which will focus on Living Well with a suggestion that this will undertake a different format from previous events, allowing the public to be involved in different sessions.</li> </ul>

- The Committee approved the new Terms of Reference for the newly merged Committee and these will be presented to the Council of Governors for ratification and are appended to the this report for ratification.
- Mr Bedlington wished to acknowledge that the response received in relation to the measures implemented to manage maternity demand was understood and highlights the high standards and subsequent demand for the service. It was agreed that Governors would be appraised of the impact of the measures put in place to manage demand.

**Risks (any new risks / proposed changes to risk scores)**

<h1 style="margin: 0;">Governor Committees</h1> <h2 style="margin: 0;">Terms of Reference</h2>	 <b>Gateshead Health</b> NHS Foundation Trust
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## Membership, Governance and Development Committee

**Constitution and Purpose** – The Membership, Governance and Development Committee is a formal group with delegated responsibility from the Council of Governors to review a range of governance matters and lead on membership engagement and recruitment on its behalf.

The Committee is authorised by the Council of Governors to investigate any activity within its Terms of Reference. Any decisions of the Committee shall be taken on a majority basis. All members of the Group have an equal vote. In the event of a tied vote, the Chair of the meeting will hold the casting vote.

Date Adopted / Reviewed	October 2024
Review Frequency	Annually
Review and approval	Membership, Governance and Development Committee
Adoption and ratification	Council of Governors – November 2024

Membership	The Group shall consist of: <ul style="list-style-type: none"> <li>Lead or Deputy Lead Governor (Chair of the Committee)</li> <li>All Governors</li> </ul>
Attendance	The following will be expected to attend the Group on a routine basis to provide advice, support and administration: <ul style="list-style-type: none"> <li>Company Secretary</li> <li>Corporate Services Assistant</li> </ul> <p>The Chair and Non-Executive Directors have an open invitation to attend the Committee.</p>
Meeting frequency and quorum	Meetings shall be held quarterly and as required by any relevant regulatory requirements.

	<p>To be quorate there should be at <b>least 5 Governors</b> present at the meeting.</p> <p>Members and regular attendees are expected to achieve <b>75% attendance</b> annually.</p>
Meeting organisation	<p>The Group shall be supported administratively by the Trust's Corporate Services team.</p> <p>In accordance with the Trust's Standing Orders, <b>papers will be circulated to members and attendees six days before the meeting</b> wherever possible, and no later than three clear days before the meeting, save in emergency.</p> <p>Minutes of the meetings are circulated (alongside the agenda for the following meeting), to members and attendees.</p>

Duties and responsibilities – Governance	
Governor training and development	<p>To review the induction and training arrangements for Governors, including working with the Company Secretary to identify appropriate topics for training and development.</p> <p>To develop an annual cycle of business for quarterly development sessions for approval by the Council of Governors.</p>
Trust Governance Documents	<p>To review proposed changes to the following key governance documents and make recommendations to the Council of Governors (which must formally vote on proposed changes):</p> <ul style="list-style-type: none"> <li>• Trust's Constitution</li> <li>• Council of Governors' Standing Orders</li> </ul>
Governor Policies and Procedures	<p>To review key policies and documents relating to Governors.</p> <p>The Committee will make recommendations to the Trust's Policy Review Group and the Council of Governors in respect of these policies where appropriate.</p> <p>To monitor compliance with these policies in line with the monitoring arrangements articulated within the policies themselves.</p>
Reviewing the Effectiveness of Council Governance	<p>To review Governor conduct and attendance, including attendance rates for Council meetings, committees and training events.</p>

	<p>The Committee will also oversee the process for the allocation of Governor group / committee members every two years (where applicable).</p> <p>To review the outcomes of the Council’s annual effectiveness review and oversee the implementation of any resulting actions.</p>
<p>Other Governance Issues / Requirements</p>	<p>To review and understand key principles of the regulatory framework and requirements, particularly where this impacts on the role of the Council of Governors.</p> <p>To be the first point of contact for the discussion of significant transactions and / or service changes where consultation and / or approval by the Council of Governors may be beneficial.</p> <p>To review other key governance-related requirements or requests as and when they arise.</p>
<p><b>Duties and responsibilities – Membership and Engagement</b></p>	
<p>Membership Strategy</p>	<p>To work collaboratively with the Corporate Services team on the development of the Trust’s Membership and Engagement Strategy, making recommendations to the Council of Governors.</p> <p>To develop and monitor an action plan to support the delivery of the Membership and Engagement Strategy.</p>
<p>Membership / Public Engagement and Communication</p>	<p>To explore and propose methods to communicate with, engage and recruit members and the public at large in the activities of the Trust.</p> <p>To work with the Corporate Services team to develop plans for membership engagement activities and campaigns and actively support membership engagement and recruitment activities.</p> <p>Work in partnership with the Corporate Services team to develop communication methods that enable the views and opinions of members and the wider public to be heard and to communicate how such feedback has been used.</p> <p>Work in partnership with the Trust’s Corporate Services Team to ensure that the Trust’s members are kept informed and updated on developments within the Trust.</p> <p>Work in partnership with the Trust’s Corporate Services Team to inform the wider membership and public of how Governors have represented their views.</p>

Membership Profile	To receive and discuss information on the Trust's membership profile to ensure that it is representative of the population served.
Elections	To receive information for assurance over the annual nomination and election process.

Reporting and monitoring	
Reporting	An assurance report from this Committee will be presented by the Chair to the next meeting of the Council of Governors.
Monitoring	<p>Compliance with the terms of reference will be reviewed via an annual self-assessment. This will inform any proposed revisions to the terms of reference and the cycle of business.</p> <p>The outcome of the effectiveness and terms of reference review is presented to Council of Governors following consideration by this Committee.</p>

# Committee Escalation and Assurance Report

<b>Name of Governor Committee</b>	Governor Remuneration Committee
<b>Date of Governor Committee:</b>	22 October 2024
<b>Chair of Governor Committee:</b>	Chris Toon, Appointed Governor for Gateshead College

<p><b>Alert</b> <i>(matters of significant concern requiring escalation to the Council for further action)</i></p>
<ul style="list-style-type: none"> <li>No issues of significant concern to alert the Council to.</li> </ul>
<p><b>Advise</b> <i>(areas subject to ongoing monitoring where some assurance has been noted / further assurance sought or emerging developments that the Committee is seeking assurance over)</i></p>
<ul style="list-style-type: none"> <li>At the time of the meeting the recruitment process for the Clinical Non-Executive Director was underway, but the Committee were informed that there were no shortlisted candidates for the Financial Non-Executive Director position. The Committee agreed that a number of options would be considered on how to proceed with the Financial Non-Executive Director recruitment, with the Committee meeting again before the Council of Governors to formulate a recommendation. An update from this meeting will be covered in Part 2 of the Council meeting.</li> </ul>
<p><b>Assure</b> <i>(key assurances received and any highlights of note for the Council, including recommendations for items requiring Council approval / ratification)</i></p>
<ul style="list-style-type: none"> <li>Assurance was provided that Non-Executive Director appraisals have been conducted in line with the agreed process and in accordance with the NHS England Leadership Competency Framework. The Council will consider the appraisal assurance report in Part 2 on the recommendation of the Committee.</li> <li>The Committee received a verbal update on the Great North Healthcare Alliance. This update was subsequently shared with the full Council on 31 October 2024.</li> </ul>
<p><b>Risks (any new risks / proposed changes to risk scores)</b></p>

# Report Cover Sheet

# Agenda Item: 12

<b>Report Title:</b>	<b>Governor Election Results</b>			
<b>Name of Meeting:</b>	Council of Governors			
<b>Date of Meeting:</b>	20 <sup>th</sup> November 2024			
<b>Author:</b>	Diane Waites, Corporate Services Assistant			
<b>Executive Sponsor:</b>	Alison Marshall, Chair			
<b>Report presented by:</b>	Diane Waites, Corporate Services Assistant			
<b>Purpose of Report</b> <i>Briefly describe why this report is being presented at this meeting</i>	<b>Decision:</b>	<b>Discussion:</b>	<b>Assurance:</b>	<b>Information:</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
This paper provides the Council of Governors with an update on the election results				
<b>Proposed level of assurance – to be completed by paper sponsor:</b>	<b>Fully assured</b> <input checked="" type="checkbox"/> <i>No gaps in assurance</i>	<b>Partially assured</b> <input type="checkbox"/> <i>Some gaps identified</i>	<b>Not assured</b> <input type="checkbox"/> <i>Significant assurance gaps</i>	<b>Not applicable</b> <input type="checkbox"/>
<b>Paper previously considered by:</b> <i>State where this paper (or a version of it) has been considered prior to this point if applicable</i>	n/a			
<b>Key issues:</b> <i>Briefly outline what the top 3-5 key points are from the paper in bullet point format</i>  <i>Consider key implications e.g.</i> <ul style="list-style-type: none"> <li>• Finance</li> <li>• Patient outcomes / experience</li> <li>• Quality and safety</li> <li>• People and organisational development</li> <li>• Governance and legal</li> <li>• Equality, diversity and inclusion</li> </ul>	<ul style="list-style-type: none"> <li>• 3 new Governors were elected in the 2024/25 elections, with 2 current Governors retaining their seats.</li> <li>• This means that 2 of our public Governors for Central Gateshead will sadly be leaving the Council of Governors on 4 January 2025 – John Bedlington and Brenda Webb.</li> <li>• Five vacancies remain in respect of public Governor seats, including 3 from Eastern Gateshead. A proposal for addressing the longstanding vacancies in Eastern is covered within a separate agenda item.</li> </ul>			
<b>Recommended actions for this meeting:</b> <i>Outline what the meeting is expected to do with this paper</i>	<ul style="list-style-type: none"> <li>• Note the outcome of the elections;</li> <li>• Record congratulations to all successful candidates;</li> <li>• Record a formal thank you to all outgoing Governors for their contributions and commitment; and</li> </ul>			

	<ul style="list-style-type: none"> <li>Be assured that incoming Governors will be provided with a comprehensive induction and training</li> </ul>				
<b>Trust Strategic Aims that the report relates to:</b>	<b>Aim 1</b> <input type="checkbox"/>	We will continuously improve the quality and safety of our services for our patients			
	<b>Aim 2</b> <input checked="" type="checkbox"/>	We will be a great organisation with a highly engaged workforce			
	<b>Aim 3</b> <input checked="" type="checkbox"/>	We will enhance our productivity and efficiency to make the best use of resources			
	<b>Aim 4</b> <input checked="" type="checkbox"/>	We will be an effective partner and be ambitious in our commitment to improving health outcomes			
	<b>Aim 5</b> <input checked="" type="checkbox"/>	We will develop and expand our services within and beyond Gateshead			
<b>Trust corporate objectives that the report relates to:</b>	Not directly linked to a specific objective, but ensuring the Council has the appropriate induction and training to discharge its role will seek to ensure that there is appropriate accountability in respect of the achievement of the strategy and objectives.				
<b>Links to CQC KLOE</b>	Caring <input type="checkbox"/>	Responsive <input type="checkbox"/>	Well-led <input checked="" type="checkbox"/>	Effective <input type="checkbox"/>	Safe <input type="checkbox"/>
<b>Risks / implications from this report (positive or negative):</b>					
<b>Links to risks (identify significant risks and DATIX reference)</b>	No direct linkages				
<b>Has a Quality and Equality Impact Assessment (QEIA) been completed?</b>	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>	<b>Not applicable</b> <input checked="" type="checkbox"/>		

# Election Results

## 1. Executive Summary

- 1.1. The 2024 election process is now complete with seats filled through uncontested elections in the Western Gateshead and Staff constituencies. Three Governors were elected unopposed, with two vacancies remaining in Western and three vacancies remaining in Eastern.
- 1.2. Contested elections took place in the Central Gateshead constituency, with the results being communicated on Tuesday 12<sup>th</sup> November 2024.
- 1.3. We look forward to welcoming 3 new public Governors, 1 returning public Governor, 1 returning staff Governor and 1 new staff Governor. All new terms will commence on 5<sup>th</sup> January 2025.
- 1.4. The sincere thanks of the Council and Board is noted for all Governors who will be leaving the Council on 4 January 2025.

## 2. Introduction

- 2.1. The 2024 elections consisted of 10 available seats:
  - 2 x Staff Governors
  - 2 x Public Governors for Central Gateshead
  - 3 x Public Governors for Western Gateshead
  - 3 x Public Governors for Eastern Gateshead
- 2.2. Five of the available seats were filled with two vacancies remaining in the Western Gateshead Constituency and three vacancies remaining in the Eastern Gateshead constituency which will be carried forward to next year.
- 2.3. This paper updates Governors on the election results.

## 3. Governor changes

- 3.1. The following candidates were elected unopposed, with terms commencing on 5<sup>th</sup> January 2025.

<b>Constituency</b>	<b>Elected candidates</b>
Public: Western	Gordon Main – re-elected to second term of office (5 Jan 2025 – 4 Jan 2028)
Staff	Dr Andy Lowes – re-elected to second term of office (5 Jan 2025 – 4 Jan 2028)
Staff	Janet Thompson – elected to first term of office (5 Jan 2025 – 4 Jan 2028)

- 3.2. Elections took place for Public: Central Gateshead constituency with four candidates for two seats. The following candidates were elected, with terms commencing on 5<sup>th</sup> January 2025 and we look forward to welcoming them to the Council:

<b>Constituency</b>	<b>Elected Candidates</b>
Public: Central	Mark Learmouth – elected to first term of office (5 January 2025 – 4 January 2028) <i>Mark was previously a public Governor until 4 January 2024.</i>
Public: Central	Carol Hindhaugh – elected to first term of office (5 Jan 2025 – 4 Jan 2028)

- 3.3. This means that the remaining two candidates for Central Gateshead, current public Governors John Bedlington and Brenda Webb, will sadly be leaving the Council on 4 January 2025.
- 3.4. An induction session will take place for all new Governors with the Chair and Corporate Services Team in December.
- 3.5. The Governors who will be leaving the Council on 4<sup>th</sup> January 2024 are:
- John Bedlington, Public Governor for Central Gateshead, who has served as a Governor since January 2019;
  - Brenda Webb, Public Governor for Central Gateshead, who has served as a Governor since January 2022;
  - Ged Quinn, Public Governor for Western Gateshead, who has served as a Governor since January 2022; and
  - Richard Morrell, Staff Governor, who has served as a Governor since January 2022.
- 3.6. As this is the last Council meeting before the end of their tenure, we would like to record our sincere thanks and appreciation to these Governors for their commitment and contributions to the Council and Trust.
- 3.7. Considerations regarding the longstanding vacant seats in Eastern Gateshead forms part of a separate paper on the Council's agenda.

#### **4. Recommendations**

- 4.1. The Council is requested to:
- Note the outcome of the elections;
  - Record congratulations to all successful candidates;
  - Record a formal thank you to all outgoing Governors for their contributions and commitment; and
  - Be assured that incoming Governors will be provided with a comprehensive induction and training.

# Report Cover Sheet

# Agenda Item: 13

<b>Report Title:</b>	<b>Council of Governors' Dates 2025/26</b>			
<b>Name of Meeting:</b>	Council of Governors			
<b>Date of Meeting:</b>	20 November 2024			
<b>Author:</b>	Diane Waites, Corporate Services Assistant			
<b>Sponsor:</b>	Alison Marshall, Chair of the Board and Council of Governors			
<b>Report presented by:</b>	Diane Waites, Corporate Services Assistant			
<b>Purpose of Report</b> <i>Briefly describe why this report is being presented at this meeting</i>	<b>Decision:</b>	<b>Discussion:</b>	<b>Assurance:</b>	<b>Information:</b>
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	To review the draft dates for key Governor meetings and provide feedback to the Company Secretary if required.			
<b>Proposed level of assurance – to be completed by paper sponsor:</b>	<b>Fully assured</b> <input checked="" type="checkbox"/> <i>No gaps in assurance</i>	<b>Partially assured</b> <input type="checkbox"/> <i>Some gaps identified</i>	<b>Not assured</b> <input type="checkbox"/> <i>Significant assurance gaps</i>	<b>Not applicable</b> <input type="checkbox"/>
<b>Paper previously considered by:</b> <i>State where this paper (or a version of it) has been considered prior to this point if applicable</i>				
<b>Key issues:</b> <i>Briefly outline what the top 3-5 key points are from the paper in bullet point format</i>  <i>Consider key implications e.g.</i> <ul style="list-style-type: none"> <li>• Finance</li> <li>• Patient outcomes / experience</li> <li>• Quality and safety</li> <li>• People and organisational development</li> <li>• Governance and legal</li> <li>• Equality, diversity and inclusion</li> </ul>	<ul style="list-style-type: none"> <li>• This paper provides draft dates for Council of Governor meetings and workshops.</li> </ul>			
<b>Recommended actions for this meeting:</b> <i>Outline what the meeting is expected to do with this paper</i>	To note the key dates and receive the report for information.			

<b>Trust Strategic Aims that the report relates to:</b>	<b>Aim 1</b> <input checked="" type="checkbox"/>	We will continuously improve the quality and safety of our services for our patients			
	<b>Aim 2</b> <input checked="" type="checkbox"/>	We will be a great organisation with a highly engaged workforce			
	<b>Aim 3</b> <input checked="" type="checkbox"/>	We will enhance our productivity and efficiency to make the best use of resources			
	<b>Aim 4</b> <input checked="" type="checkbox"/>	We will be an effective partner and be ambitious in our commitment to improving health outcomes			
	<b>Aim 5</b> <input checked="" type="checkbox"/>	We will develop and expand our services within and beyond Gateshead			
<b>Trust corporate objectives that the report relates to:</b>	SA2.1, SA2.2				
<b>Links to CQC KLOE</b>	Caring <input type="checkbox"/>	Responsive <input type="checkbox"/>	Well-led <input checked="" type="checkbox"/>	Effective <input type="checkbox"/>	Safe <input type="checkbox"/>
<b>Risks / implications from this report (positive or negative):</b>					
<b>Links to risks (identify significant risks and DATIX reference)</b>	-				
<b>Has a Quality and Equality Impact Assessment (QEIA) been completed?</b>	<b>Yes</b> <input type="checkbox"/>	<b>No</b> <input type="checkbox"/>	<b>Not applicable</b> <input checked="" type="checkbox"/>		

## Council of Governors' Calendar of Events 2025/26

	January 25*	February*	March*	April	May	June	July	August	September	October	November	December	January 26	February	March
<b>Council of Governors</b> 10.00 am to 1.00 pm Rooms 9&10 Ed Centre/Teams		<b>19</b>			<b>14</b>				<b>24</b>		<b>19</b>			<b>18</b>	
<b>Council of Governors Pre-Meets</b> Rooms 9&10 Ed Centre/Teams		<b>19</b>			<b>14</b>				<b>24</b>		<b>19</b>			<b>18</b>	
<b>Membership, Governance and Development Committee</b> 10.00 am to 12.00 pm	<b>9</b>			<b>9</b>			<b>16</b>			<b>8</b>			<b>7</b>		
<b>Workshops/Seminars for Governors</b>	<b>15</b>			<b>16</b>		<b>18</b>				<b>16</b>			<b>15</b>		

*\*Shown for completeness only as these dates were approved by the Council in November 2023.*

Committee:	Council of Governors
Chair:	Alison Marshall
Financial year:	2024/25

Denotes an item for Part 2 of the meeting

	Lead	Purpose of item	May-24	Sep-24	Nov-24	Feb-25
<b>Standing Items</b>						
Apologies	Chair	For Information	√	√	√	√
Declaration of interests	Chair	For Information	√	√	√	√
Chair's business	Chair	For Information	√	√	√	√
Minutes	Chair	For Decision	√	√	√	√
Action log & matters arising	Chair	For Assurance	√	√	√	√
Cycle of business	Chair	For Information	√	√	√	√
Meeting review / reflections	Chair	For Discussion	√	√	√	√
<b>Board and Committee Updates</b>						
Chief Executive's Update* including ICS / ICB updates	Chief Executive	For Assurance	√	√	√	√
People and OD Committee Report	Committee Chair	For Assurance			√	
Quality Governance Committee Report	Committee Chair	For Assurance		√		
Finance & Performance	Committee Chair	For Assurance			√	
Audit Co (including Audit Committee Annual Report and Terms of Reference)	Committee Chair	For Assurance		√		
Digital Committee	Committee Chair	For Assurance	√			√
Charitable Funds	Committee Chair	For Assurance	√			√
<b>Trust Updates Including Strategy</b>						
Patient / staff story / service showcase	Various	For Assurance	√	None due to AGM	√	√
ICS / ICB update presentation	ICB	For Discussion				√
QE Facilities	QEF Board Chair / QEF Managing Director	For Assurance		October workshop instead		√
NHS Staff Survey results	Director of People & OD / Chair of the HR Committee	For Assurance	√			
Developing the Quality Priorities	Chief Nurse	For Decision	√			
Annual planning update	Interim Director of Strategy, Planning and Performance	For Assurance	√			√
Equality, diversity and inclusion update	Group Executive Director of People and OD	For Assurance			deferred	√
<b>Governance</b>						
Review of Constitution	Company Secretary	For Decision	deferred	deferred	deferred	
Non-Executive Director appointments	Chair	For Decision		√	√	
Performance appraisal and assessment outcomes - Chair and Non-Executive Directors	Chair (for NEDs) Senior Independent Director (For Chair)	For Assurance		√	√	
Council of Governors' Register of Interests	Company Secretary	For Decision				√
Council of Governors' Annual Effectiveness Survey - Results	Company Secretary	For Discussion				√
Ratification of the terms of reference for Governor groups	Company Secretary	For Decision				√
Lead Governor & Deputy Lead Governor Appointments	Company Secretary	For Decision	√			√
Appointments to Governor committees (every two years) - not due in 2024/25	Company Secretary	For Information				
Annual report, accounts and auditor's report. NOTE this is addressed via the AGM	Executive Directors (co-ordinated by Company Secretary)	For Information		√		
Appointment of external auditors (note not due to consider until 2025/26)		For Decision				
<b>Elections and Members</b>						
Election update	Company Secretary	For Information		√		
Election results / new Governor welcome	Chair	For Information			√	
<b>Updates from Governor Committees and Groups</b>						
Membership Strategy Group	Chair of the Group	For Assurance	√	√		
Governor Governance and Development Committee	Chair of the Group	For Assurance	√	√		
Membership, Governance and Development Committee	Chair of the Group	For Assurance	√	√	√	√
Governor Remuneration Committee	Chair of the Group	For Assurance	√	√	√	