

# **Meeting of the Council of Governors**

14:00 - 16.30 on Thursday 16 May 2024

Boardroom, 2nd Floor Washington Suite, Worthing Hospital, Lyndhurst Road, Worthing, BN11 2DH

# **AGENDA - MEETING IN PUBLIC**

Item 1	Time: 14:00	Welcome and Apologies for Absence To note	Verbal	Presenter: Chair Alan McCarthy
Item 2	14:00	Quoracy of Council of Governors Meetings	Verbal	Presenter: Chair Alan McCarthy
		A meeting of the Council shall be quorate and shall not commence until it is quorate. Quoracy is defined as meaning that there shall be present at the meeting at least one third of all Governors (7 allowing for vacancies). Of those present, at least 51% shall be elected Governors.		
Item 3	14:00	Declarations of Interests To note and agree any required actions	Verbal	Presenter:
Item 4	14:00	Minutes of Council of Governors Meeting in PUBLIC held on 29 February 2024 To approve	Enclosure	Presenter: Chair Alan McCarthy
Item 5	14:05	Matters Arising from the Minutes of the Public meeting held on 29 February 2024 None	N/A	Presenter: Chair Alan McCarthy
		ACCOUNTABILITY		
Item 6	14:05	Chief Executive Report to Council To receive and agree any necessary actions	Enclosure	Presenter: George Findlay
Item 7	14:25	NHS E undertakings update To note	Enclosure	Presenters: Darren Grayson
Item 8	14:35	Report from the Patient Engagement & Experience Committee Meeting held on 14 March 2024 To note	Enclosure	Presenter: Frances McCabe as Committee Chair
Item 9	14:45	Update from the Membership Engagement and Experience Committee Chair To note	Enclosure	Presenter: John Todd as Committee Chair

		LISTENING AND REPRESENTING		
Item 10	14.50	Lead Governor's Report To receive and agree any necessary actions	Enclosure	Presenter: Lindy Tomsett
Item 11	15.00	Public Governors' Update To receive and agree any necessary actions	Verbal	Presenter: Those public Governors in attendance
Item 12	15:05	Staff Governors' Update To receive and agree any necessary actions	Verbal	Presenter: Miranda Jose
Item 13	15.15	Appointed Governors' Update  Brighton & Hove City Council University of Brighton West Sussex County Council Voluntary Sector - Age UK Inclusion To receive and agree any necessary actions	Verbal	Presenter: Those appointed Governors in attendance
		OTHER ITEMS		
		OTHER ITEMS		
Item 14	15.40	People Committee - Chair Feedback To receive and agree any necessary actions	Presentation	Presenter: Paul Layzell
Item 15	16.00	Company Secretary Report To note	Enclosure	Presenter: Glen Palethorpe
Item 16	16.10	Questions from the public To receive and respond to questions submitted by the public at least 48 hours in advance of the meeting.	Verbal	Presenter: Chair Alan McCarthy
Item 17	16.20	Any Other Business To receive and action		Presenter: Chair Alan McCarthy
Item 18	16.30	Date and time of next meeting: The next meeting in public of the Council of Governors is scheduled to take place at 14:00 – 16:30 on Thursday 15 August 2024	Verbal	Presenter: Chair Alan McCarthy





Minutes of the Council of Governors meeting held in Public at 2pm on Thursday 29 February 2024 in the Boardroom, Second Floor, Washington Suite, Worthing Hospital, Lyndhurst Road, Worthing, BN11 2DH and virtually via Microsoft Teams Live Broadcast.

Alan McCarthy MBE DL Chairman

Andy Heeps Deputy Chief Executive & Chief Operating Officer

Katie Urch Chief Medical Officer

Maggie Davies Chief Nurse

David Grantham Chief People Officer Darren Grayson Chief Governance Officer Roxanne Smith Chief Strategy Officer Non-Executive Director Paul Layzell Non-Executive Director Lizzie Peers Non-Executive Director Bindesh Shah Non-Executive Director Jackie Cassell Non-Executive Director Philip Hogan Non-Executive Director Lucy Bloem Non-Executive Director **David Curley** Public Governor - Adur John Todd Public Governor - Arun Maria Rees

Frances McCabe
Lindy Tomsett (Lead Governor)
Doug Hunt
Colin Holden

Public Governor – Brighton & Hove
Public Governor – Chichester
Public Governor – Mid Sussex
Public Governor – Mid Sussex

Andy Cook Staff Governor – Royal Sussex County Hospital

Jo Norgate Staff Governor – St Richard's Hospital

Miranda Jose Staff Governor – Peripatetic

Helen Rice Appointed Governor – Voluntary Sector

Cllr Alison Cooper Appointed Governor – West Sussex County Council

In Attendance:

Glen Palethorpe Company Secretary

Ben Smith Deputy Company Secretary

Jan Simmons Governor and Membership Manager

Theo Cronin Head of External Affairs

### COG/02/24/1 Welcome and Apologies for Absence

**ACTION** 

	1.1	Alan McCarthy welcomed all those present to the meeting and extended a particular welcome to members of the public who were in attendance and those viewing the meeting remotely.	
,	1.2	Alan introduced Philip Hogan, a new Non-Executive Director and Chair of the Finance & Performance Committee and Rox Smith the Trust's new Chief Strategy Officer. Alan then noted the following apologies that had been received.	
	1.3	Governors: Varadarajan Kalidasan, appointed Governor for the Trust Inclusion Groups, Maggie Gormley, Public Governor, Chichester, Pauline Constable, Public Governor, Worthing, Kate Galvin, Appointed Governor, Brighton University, Sue Shepherd, Staff Governors for Worthing Hospital, Claire	

	Bewick-Holmes, Staff Governor for Princess Royal Hospital, Cllr Bruno De Oliveira, appointed Governor for Brighton and Hove City Council and Paul Wayne, Public Governor, Horsham.	
1.4	<b>Executives:</b> George Findlay, Chief Executive Officer, Karen Geoghegan, Chief Finance Officer, Sandi Drewett, Chief Culture and Organisational Development Officer.	
1.5	Non-Executive Directors: Claire Keatinge and Malcolm Reed	
COG/02/24/2	Quoracy of Council of Governors Meetings	
2.1	The meeting was quorate with more than one third of all Governors in attendance and at least 51% of those present being publicly elected Governors.	
COG/02/24/3	Declarations of Interests	
3.1	There were no interests declared.	
COG/02/24/4	Minutes of Council of Governors Meeting in PUBLIC held on 23 November 2023	
4.1	The minutes of the meeting held in Public on 23 November 2023 were <b>APPROVED</b> as a correct record.	
COG/02/24/5	Matters Arising from the Minutes of Meeting	
5.1	There were no matters arising from the minutes of the previous meeting.	
	ACCOUNTABILITY	
COG/02/24/6	Chief Executive Report to Council	
	[Maggie Davies left the meeting at this point with no impact on quoracy]	
6.1	Andy Heeps presented the Chief Executive Report on behalf of George Findlay. The report provided the Council with a summary from the Chief Executive and the work of UHSussex over the last quarter.	
	[Cllr Alison Cooper and Jo Norgate joined the meeting at this point.]	
6.2	Andy began by acknowledging the extreme pressures, staff working exceptionally hard and the unrelenting focus to reduce waiting times. He expressed heartfelt thanks to all his colleagues for everything they did for patients, and each other, in such challenging circumstances. Andy reflected that he had never known it to be as busy as now meaning that the Trust was not able to deliver the services as it would wish to.	
6.3	It was important however, to recognise that progress had been made with the total patient waiting list having reduced in the lead up to Christmas by 11,000 patients in 11 weeks and this trend had been sustained during January despite the industrial actions and extraordinary winter pressures. Significant improvements had also been seen in the A&E performance against the national standard.	
6.4	Andy then took the opportunity of referring to the recent inspection by the Care Quality Commission (CQC) of predominantly the Surgery and Medicine Divisions of the Trust that had resulted in the Princess Royal, RSCH, St Richard's and Worthing all having been rated as Required Improvement. This	

	represented a downgrade from Outstanding for SRH and Worthing, but an improvement from Inadequate for RSCH.	
6.5	The Council was informed that the Trust had also commissioned an inspection from the Royal College of Surgeons (RCS) to seek assurance that its improvement plans were the right ones and an independent assessment of the progress being made as well as where further progress was still required. The report gave confidence that the right plans were in place whilst providing valuable feedback from the RCS and staff.	
6.6	Andy then highlighted and congratulated the huge number of individual staff members and teams throughout the Trust who had been recognised for their achievements, awards and recognitions including long service awards to celebrate a further 200 colleagues who had achieved 20, 30 and 40+ years' service with the Trust, giving a combined length of service of 4,750 years.	
6.7	Andy went on to advise that the new Southlands Community Diagnostic Centre in Shoreham was officially opened on 25 January 2024 and had been designed to speed up diagnosis and improve patient experience by supporting the Trust's elective care waiting times recovery programme and providing patients with access to diagnostic and testing services in a purpose-built facility, away from the busy acute hospitals. The centre had opened with brand-new CT and MRI scanners that would enable up to 45,000 patients per year to be seen.	
6.8	A new Urology Investigation and Treatment Centre at the Princess Royal Hospital was improving patient outcomes and transforming healthcare and a new state of the art Acute Stroke Centre was being developed at St Richard's Hospital in Chichester, following approval of the stroke improvement programme by the NHS Sussex board on 30 November 2023 and would work as part of a network with the Comprehensive Stroke Centre at the Royal Sussex County Hospital in Brighton. The acute Stroke Centre would improve care and outcomes for patients by providing access to specialist stroke service 24 hours a day, seven days per week.	
6.9	Andy informed the Council that the demolition of the Barry Building at the Royal Sussex County Hospital was now underway to prepare the site for the Trust's new Sussex Cancer Centre which was phase 2 of the hospital's 3Ts redevelopment. This would bring state of the art purpose-built facilities to support improved patient and staff experience for radiotherapy, oncology and haematology departments.	
6.10	The Council was informed that the Trust was the first in the country to use a new economical and environmentally friendly sterilisation machine based in the Royal Sussex County Hospital's Ear, Nose and Throat (ENT) department and which was helping to cut the department's carbon output by more than tonnes a year.	
6.11	Andy added that the organisation's workforce was a precious resource and explained the many broad-ranging and growing programmes to provide support for them as well as thank, acknowledge and recognise everything they did for patients, each other and the Trust. Andy highlighted the events taking place such as the Race Equality Week; Women's Network; training events; Disability awareness; Workforce Health Checks and extensive health and wellbeing programmes.	
6.12	Responding to a query from Doug Hunt, Andy advised that it was likely that the CQC would want to see improvements before they undertook another inspection, but pointed out that they had the right to enter the Trust at any time unannounced. Regarding a follow up from the Royal College of Surgeons	

	report Andy explained that the RCS and the Trust recognised the work to be undertaken and that a framework was in place for that to happen.	
6.13	Frances McCabe commented that she had been impressed with the new Community Diagnostic Centre (CDC) during a recent visit and emphasised the importance of ensuring that it was promoted by GPs and others in the community. As the Executive sponsor for the CDC, Darren Grayson welcomed Frances' comments and advised that representatives from primary care had been fully involved in the design of the pathways and that the centre was being well used.	
6.14	Responding to a query from Frances around end-of-life care, Katie Urch explained that a very good community package for end-of-life care was in place across Sussex with the best out of hospital end of life care and with an average of around 40% of deaths only occurring in hospital. This was one of the lowest in the country, with the national average of deaths occurring in hospital standing at between 51-59%.	
	[Philip Hogan left the meeting at this point with no impact on quoracy]	
6.15	Alan recognised how disappointed staff would have been with the recent CQC report and ratings, but that despite the difficulties of Covid, the merger of the Trusts and industrial action, good care had been, and was consistent throughout the organisation.	
6.16	The Council RECEIVED the Chief Executive's report.	
COG/02/24/7	Quality and Safety Improvement Programme	
7.1	Darren Grayson presented the update and reminded the Council that the Trust had established the Quality and Safety Improvement Programme (QSIP) to discharge its obligations as set out in the undertakings given to NHS England (NHSE) that required the Trust to develop and implement a comprehensive improvement plan with Board level accountabilities.	
7.2	Darren explained that as well as satisfying the undertakings, the purpose of QSIP was to make sustained improvements to the quality and safety of the Trust's services and to develop improved systems, processes and culture that would provide assurance to the Board. In doing so the Trust would also be better placed to provide assurance to the Integrated Care Board (ICB), the Care Quality Commission (CQC), patients, families and the communities it served.	
	[Maggie Davies and Phil Hogan rejoined the meeting at this point.]	
7.3		l
7.5	A number of delivery workstreams had been established, all having Executive leads and Director level Senior Responsible Officers. Each also had project charters for the workstream's delivery.	
	leads and Director level Senior Responsible Officers. Each also had project	

COG/02/24/8	Workforce Diversification	
8.1	David Grantham gave a presentation and explained that the workforce at UHSussex was changing and that in addition to doctors and nurses, healthcare was now provided by a range of professionals in an acute clinical setting.	
8.2	The diversification of roles could help support the delivery of high-quality patient care. On occasion, alternative roles were necessary to mitigate the shortage of medical or nursing staff or, in many cases, may present a more appropriate option based on patient need and how care could be most effectively provided. Such roles included Advanced Clinical Practitioner, Nurse Practitioner, Physician Associate and Nursing Associate.	
8.3	David advised the Council that workforce diversification remained a key component of the UHSussex workforce plan and education strategy including the use of apprenticeships to support the development of the Trust's future workforce.	
8.4	David went on to explain in more detail the roles of Nursing Associates, Advanced Clinical Practitioners and Physician Associates and the Trust's strategy for their deployment and how workforce diversification featured in the 24/25 workforce plan.	
	[John Todd joined the meeting virtually at this point]	
8.5	The Council debated the development of various aspects of the workforce diversification plans acknowledging the opportunities it presented to create more flexible career routes, not only for nursing and medical staff but also for apprenticeships and non-clinical staff.	
8.6	The Council NOTED the Workforce Diversification update.	
COG/02/24/9	Report from the Patient Engagement & Experience Committee Meeting held on 14 September 2023	
9.1	Maria Rees presented the report on behalf of Frances McCabe, the Committee Chair.	
9.2	Maria informed the Council that the Patient Engagement and Experience Committee had met on 14 December 2023. The meeting had been quorate with four Governors in attendance; it had also been attended by the Director of Patient Experience, Engagement and Involvement, the Assistant Director of Patient Experience, Strategy and Improvement as well as the Director of Nursing for Princess Royal Hospital, the Deputy Director of Facilities & Estates for an item on Patient Led Assessments of the Care Environment (PLACE) and the Communication Team's Head of External Affairs.	
9.3	The Committee had received information on the Emergency Department and In-Patient National Survey reports and an update on the approach being taken to relaunch the Trust's Peer Reviews to be led by the Hospital Directors of Nursing.	
9.4	The Committee had also received the Register of Governors Activities which had provided information on the Governors' involvement and experience in the Trust's improvement projects and the Quarter 2 Patient Experience Report.	

9.5	Maria went on to feedback to the Council her experience of having attended the recent training for the reinstatement of the Trust's Peer reviews delivered by the Director of Nursing of the Princess Royal Hospital and the subsequent monthly peer reviews that had taken place. Maria described the detailed process that formed the 15-step challenge used during the reviews and that would be applied across the Trust. The Council noted that the Hospital Directors were actively engaging with the Non-Executive Directors and Governors aligned to each hospital site to also undertake site visits.	
9.6	The Council <b>NOTED</b> the report of the Patient Engagement & Experience Committee Chair.	
COG/02/24/10	Report from the Membership Engagement Committee Meeting held on 20 July 2023	
10.1	Glen presented the report on behalf of John Todd the Committee Chair, and highlighted the following key areas.	
10.2	The Committee had noted that the Trust's current levels of membership were above the minimum levels per constituency as set out within the Trust's constitution.	
10.3	The Committee had discussed the Trust's performance within each of the key membership strategy themes and noted that recruitment events across the quarter had seen an increase of some 67 members recruited across all constituencies since the last report in October.	
10.4	Glen advised that during the year a good relationship had been established with the ICB, with the Trust being regularly invited to join their events to recruit members. A joint event, Improving NHS Services for Black, Asian and minoritized ethnic people, had been held in conjunction with several different organisations alongside NHS Sussex.	
10.5	Members of the Trust had been informed by email of ways in which they could participate in the public consultation on the plans for a new Sussex Cancer Centre at the Royal Sussex County Hospital in Brighton.	
10.6	Glen went on to advised that the third in the programme of online Expert Talks was held on the 5 December 2023, entitled Demystifying and simplifying the world of data protection and presented by the Group Head of Information Governance and Data Protection Officer at UHSussex. The event was well attended and, as previously, a recording of the talk had been placed on the Trust's website.	
10.7	The NHS Sussex Public Involvement Lead for West Sussex had provided an update on their activities and the Assistant Director of Communications and Engagement provided an overview of the current communication and engagement activities that had been taking place in the Trust and with external colleagues.	
10.8	The Council <b>NOTED</b> the report of the Membership Engagement Committee Chair.	
COG/02/24/11	Update on Chair recruitment	
11.1	Glen informed the Council that the Governors' Nomination & Remuneration Committee had recently met and had agreed a short list of three candidates for the role of Chair for the Trust.	

11.2	The candidates were a diverse group who would now move forward to interview in March. The Trust had very successfully engaged with the market and was confident that it would be able to recruit a successor prior to Alan's departure from the Trust at the end of his term in June 2024.	
11.3	Alan took the opportunity to thank Lucy Bloem and Lindy Tomsett for their involvement in the Chair recruitment process.	
COG/02/24/12	Appointed Governors' Update	
12.1	Brighton University	
	This item was deferred as there was no representative at the meeting.	
12.2	West Sussex County Council	
12.3	Councillor Alison Cooper provided an overview of the activities of West Sussex County Council.	
12.4	The Council's budget had been set for the year and carried a number of funding challenges that had continued into 2024/25. Alison explained that the Core Spending Power would increase by £49.6m but with only £14.5m from Government funding and the remainder from an increase in Council Tax income.	
12.5	Alison advised that in summary, during 2024/25, the County Council was expected to spend £2,043.1m on day-to-day revenue services and £131.6m through capital investment into roads, highways, schools, operational estate and IT and digital infrastructure, which was an increased amount from last year. However, similar to previous years, 64% of all service revenue spend would be on adult services and children and young people.	
12.6	The Council was informed that Highways was spending £59.1m this year of capital investment and an extra £4.5m per year had been included for the additional potholes and drainage issues from the wet winters over the next two years.	
12.7	Alison concluded her report by advising that the guide to planning school places had been published, a health and wellbeing survey had been launched, Cabinet had agreed procurement for additional domestic abuse housing support, and a scheme which prevented over 37 tonnes of food going to waste last year would continue for another year.	
12.8	The Council <b>NOTED</b> the report from the Appointed Governor for West Sussex County Council.	
12.9	Voluntary Sector - Age UK	
12.10	Helen Rice provided a brief update and was pleased to report there had been an improvement in the use of the Charity's discharge services but that recruitment and retention of staff remained difficult with a current vacancy rate of around 15% compared to the usual rate of 3-4%.	
12.11	Being an older person's charity, Helen highlighted issues that were being experienced by some older people with the increased use of digitalisation, not	

	only in the NHS but elsewhere too and the enormous level of digital support being requested of the Charity. Helen stressed the need to take this into account when providing new digital services.	
12.12	Helen went on to inform the Council of the work that was being undertaken in relation to dementia services and the ongoing delay and concerns around contracts and commissions from the ICS due to funding issues and the risks that presented to the Charity.	
12.13	The Council <b>NOTED</b> the report from the Appointed Governor for the voluntary sector.	
	[John Todd left the meeting at this point with no impact on quoracy]	
12.14	Trust Inclusion Groups	
12.15	This item was deferred as there was no representative at the meeting.	
COG/02/24/14	Lead Governor's Report	
14.1	Lindy Tomsett presented the Lead Governor's report and began by acknowledging the challenging start the Trust had to the year with the effects of the industrial action and the substantial effect this had on all members of staff.	
14.2	Lindy commended the Trust's leadership and determination to protect patient safety and to ensure emergency care would not be compromised given the financial constraints the Trust was currently under, with no additional winter funding available.	
14.3	Lindy went on to reflect on the role of the Governors to support, promote and enhance the reputation of the Trust but acknowledged how challenging the recent adverse media coverage had been for everyone.	
14.4	The Governors had received some valuable briefing sessions that had provided them with substantial information and had increased their understanding of different operational areas within the organisation. The briefings had included Stroke Reconfiguration and Data protection.	
14.5	In addition, the Governors had also received a presentation on the Royal College of Surgeons' report that had been initiated by the Trust and the latest CQC report. In relation to these the Governors had also been briefed on the Quality and Safety Improvement Programme (QSIP) and how this supported the response to the CQC's recommendations.	
14.6	A number of Governors and Non-Executive Directors had attended virtual training sessions led by one of the Hospital Directors of Nursing and which provided a framework for the Peer Reviews; this had given the process a muchenhanced evidence base of quality assurance and more understanding and satisfaction to Governors for this joint activity led by the Hospital Directors for each site.	
14.7	The Governors had welcomed the opportunity to attend the official opening of the Community Diagnostic Centre at Southlands Hospital. The Governors were inspired by the state-of-the-art equipment and the scope offered by the Centre for community treatment and to reduce the pressure on local hospitals.	
14.8	Lindy ended her report by informing the Council that the Governors had been actively involved in the process to recruit a new Trust Chairman, adding that	

	the focus had been to promote equality, diversity and inclusion (EDI). The Company Secretary had ensured that the Governors had been kept updated on progress and interest in the position and they now welcomed the opportunity to meet the prospective candidates at the Stakeholder meetings prior to the interviews.	
14.9	The Council <b>NOTED</b> the Lead Governor's report.	
	[Helen Rice left the meeting at this point with no impact on quoracy]	
COG/02/24/15	Public Governors' Update	
15.1	There were no updates to receive from the Public Governors.	
COG/02/24/16	Staff Governors' Update	
16.1	Miranda Jose presented the report on behalf of the Staff Governors and began by reflecting on the unprecedented workload demands and pressures being experienced by staff across the Trust which had been particularly tough during the past four to six weeks. Having recently met with the CEO, the Staff Governors had welcomed the honest and transparent conversations.	
16.2	Miranda described the challenges that were currently being encountered in the emergency departments across the Trust and the effect this was having throughout the organisation, from cleaning staff to administrative staff, clinical staff and senior managers.	
16.3	The Staff Governors drew attention to the impact on a team's ability to remain positive about what it did considering the negative public attention that had been compounded by the recent media focus on the Trust. As representatives of the staff body the Governors were keen to encourage the Trust to review the support and care provided for staff to mitigate the negative attention and workload.	
16.4	A proposal put forward by the Staff Governors was that the Chief Nurse's team could review how the Trust provided robust and meaningful opportunities for reflective learning as a way to invest not only in staff development but also as an opportunity to celebrate the amazing care they gave.	
16.5	Miranda continued the report by reflecting on the impact and disappointment of staff on the recent CQC reports and, although the high ratings across the organisation for the caring domain should be celebrated, the loss of the Outstanding rating to St Richard's and Worthing Hospitals had been a challenging blow.	
16.6	The Staff Governors were encouraging people to take part and recognise the exceptional work that staff and teams delivered by nominating them for this year's Trust STAR awards.	
16.7	On behalf of the Staff Governors, Miranda congratulated the Ward Sisters of both Burlington and Chilgrove wards at Worthing and St Richard's hospitals who had each received the Silver Award for Nursing Excellent from the Chief Nursing Officer for England.	
16.8	The Council was informed that the disability staff network had set up the first Trust-wide Disability Awareness conference; this was a significant step forward to the Trust and gave a great opportunity to promote the needs of disabled people.	

16.9	In conclusion Miranda was pleased to report that the MacMillan Information Hub had opened in the Amberly Unit in Worthing Hospital to provide even more support to patients, many of whom were navigating some of the most challenging days of their lives.	
16.10	Alan thanked Miranda and the Staff Governors for their heartfelt report, and recognised the anxieties and challenges that were currently being experienced by all staff.	
16.11	The Council discussed the ongoing impact on staff following the recent media scrutiny of the Trust and the work being undertaken by the Communications Team to manage it, as well as the plans for increased Executive visibility and aligning Non-Executive Directors and Governors to hospital sites.	
16.12	Maggie Davies thanked Miranda for a very powerful update and offered to meet with the Staff Governors to discuss in more detail some of the issues raised during the report.	
16.13	The Council <b>NOTED</b> the Staff Governors' update.	
	OTHER ITEMS	
	OTHER TIEMS	
COG/02/24/17	Patient & Quality Committee - Chair Feedback	
17.1	Lucy Bloem, the Trust's Patient and Quality Committee Chair gave a presentation to the Council.	
17.2	Lucy began by outlining the history and the recent merging of two Committees to form the Patient and Quality Committee which met monthly. These monthly meetings would afford the committee time to identify areas of concern and gain assurance on key topics and provide timely updates on any quality issues and plans including regulatory reports. It also provided significant development in Divisional assurance as well as Quality and Safety Domain assurance.	
17.3	The Committee's Terms of Reference for 2023/24 had been updated to enable a new format and to exercise enhanced oversight to a number of additional and more quarterly reports.	
17.4	Lucy explained the broad remit and flow of the Committees and numerous groups that fed up into the Quality Governance Steering Group, Trust Management Committee and finally into the Patient and Quality Committee. This governance structure enabled the Trust to deliver a safe and high-quality service for patients.	
	[Miranda Jose left the meeting at this point with no impact on quoracy]	
17.5	The Patient and Quality Committee's membership consisted of the Chair plus four Non-Executive Directors, the Chief Medical Office, Chief Nurse and Chief Governance Officer plus core Corporate Directors and was well attended. Lucy added that although significant work had been undertaken the Quality Dashboard had not yet been completed but external assurance would be sought on data quality to enable the Committee to use this as a cornerstone and basis for exception reporting.	

17.6	Lucy shared the format for the monthly Divisional reports that were received by the Committee, and which provided information on each Division's quality metrics and had enhanced the richness and connectivity of the Patient and Quality Committee down to the Divisions and improved the assurance received.	
	[John Todd rejoined the meeting at this point]	
17.7	In conclusion, Lucy outlined her role as Non-Executive Director Maternity Safety Champion for the Trust which included monthly ward walkarounds, chair a monthly Perinatal Listening Events, Health Safety Investigation Branch quarterly meetings and other recognised bodies to assist with improvements.	
17.8	Responding to a question from Doug Hunt on how assurance was gained from the numerous sub committees, Lucy confirmed that she attended some of the meetings and Katie Urch explained that either she or one of her team were always in attendance.	
17.9	Following a question from Andy Heeps relating to the Governors holding the Non-Executive Directors to account, the Council was advised that the link between the Governors' Patient Engagement and Experience Committee and the Patient and Quality Committee was the Director of Patient Experience, Engagement and Involvement.	
17.10	The Council <b>NOTED</b> the Patient and Quality Committee Chair Feedback.	
COG/02/24/18	Company Secretary Report	
18.1	Glen presented the report and explained that the terms of office for three of the five appointed governors would end on 31 March 2024. West Sussex County Council had confirmed that their nomination remained with Councillor Alision Cooper until the Local Authorities own elections in May 2025. Varadarajan Kalidasan (Kali) had indicated that he would seek to remain an appointed governor as he still worked with the Trust's inclusion groups and the Trust was seeking an extension for a second term for Helen Rice the appointed governor representing the voluntary sector to enable the Trust to engage with the various locality Groups.	
18.2	Glen drew attention to the other items in his report that covered the retirement of two Non-Executive Directors and the appointment of Phillip Hogan and Wayne Orr as replacements, and the schedule of Board meetings held in public, Council of Governors meetings and the Trust's Annual General Members meeting for 2024/25, Governor elections and Governor induction.	
18.3	The Council <b>NOTED</b> the Company Secretary's Report and <b>AGREED</b> the appointment of appointed governors for WSCC (Cllr Alison Cooper), Inclusion (Varadarajan Kalidasan (Kali)) and Voluntary Sector (Helen Rice from Age UK).	
COG/02/24/19	Any Other Business	
19.1	Approval of the Minutes of the Council of Governors meeting held in Private on 23 November 2023	
19.2	The minutes of the meeting held in Private on 23 November 2023 were <b>APPROVED</b> as a correct record.	
19.3	There was no other business to discuss.	

COG/02/24/20	Questions from the public	
20.1	Glen confirmed that a question received by both the Council and the Board had been responded to at the Trust Board meeting earlier in February; the response had been shared with the Governors and a detailed response provided to the person who had asked the question.	
20.2	The Council had received a further question relating to the Trust's policy on male lactation.	
20.3	Katie responded advising that there had been guidance for staff since 2020 regarding non-binary and trans people who go through pregnancy and childbirth. The guidance was there to help staff be sensitive to the particular needs of this group – it was not prescriptive and did not specify any treatments or actions. The Trust's position was that it respectfully offered advice and care to trans parents, like everyone else, on an individual basis which carefully considered risks and benefits to the parents and the child.	
20.4	The Council <b>NOTED</b> the question that had been received from the public and subsequent response.	
COG/02/24/21	Date of Next Meeting	
COG/02/24/21	Date of Next Weeting	
21.1	The next meeting of the Council of Governors was scheduled to take place at 14.00 – 16.30 on Thursday 16 May 2024	

Jan Simmons Governor & Membership Manager February 2024

Signed as a correct record of the meeting
Chair

Date



Agenda Item:	6.	Meeting:	Council of Governors		Meeting Date:	May 2024		
Report Title: Chief Executive's Report								
Sponsoring Exec	Dr George	Findlay,	Chief Executive	ve				
Author(s):								
Report previousl	y conside	ered by						
and date:								
Purpose of the re	eport:							
Information			Yes	Assura	nce		N/A	
Review and Discu			N/A		al / Agreemen		N/A	
Reason for subm	nission to	Trust Boar				t):		
Commercial confid	dentiality		N/A	Staff co	onfidentiality		N/A	
Patient confidentia			N/A		exceptional circ	cumstances	N/A	
Link to ICB (Integ	grated Ca	re Boards)			า			
Link to ICB Annua	-	Yes	Annua		Yes			
Implications for	Trust Stra	itegic Them	nes and any	link to	<b>Board Assura</b>	ance Framewo	ork risks	
Patient		Yes						
Sustainability		Yes						
People		Yes						
Quality		Yes						
Systems and Part	nerships	Yes						
Research and Inn		Yes						
Link to CQC Don	nains:							
Safe			Yes	Effectiv	/e		Yes	
Caring	Yes	Responsive			Yes			
Well-led Yes Use of Resources Yes								
Regulatory / Statutory reporting requirement								
Communication	and Cons	ultation:						
N/A								
Executive Summ	ary:							
This report gives t work of UHSusse:				summary	of highlights f	rom the Chief I	Executive and the	
Key Recommend	lation(s):							
The Governors are asked to <b>NOTE</b> this report.								



#### CHIEF EXECUTIVE BOARD REPORT

To: Council of Governors Date: May 2024

From: Chief Executive - Dr George Findlay

#### 1. THANK YOU

- 1.1. The past three months have been characterised by an unseasonal extension of winter pressures into Spring, with all our hospitals continuing to operate either at, or even above full capacity for prolonged periods. Consequently, we have had to call Business Continuity Incidents on several occasions at each of our main hospitals to redirect resources and call upon greater support from system partners to help more patients leave hospital in a safe and timely manner.
- 1.2. While we have seen an increase in attendances at all our Emergency Departments, more significant has been the growing proportion of acutely unwell people who have needed urgent admission onto a ward. At the same time, an unsustainable number of our beds have been occupied by patients who are medically ready for discharge (MRD) but who are unable to leave hospital while they are waiting for non-acute care elsewhere to be arranged or become available.
- 1.3. On average, we have been caring for more than 300 MRD patients a day, and sometimes many more, which is the equivalent to more than ten full wards that need to be staffed and resourced despite their patients no longer requiring acute hospital care. Sadly, this has resulted in longer waits in our Emergency Departments recently due to beds not being available when they are needed most.
- 1.4. We deeply regret how this has affected patients and I wish to apologise to anyone who has experienced this in recent months. We are working extremely hard to address the problem, with high profile improvement programmes to ensure we are doing all we can to improve flow through our hospitals, and by working very closely with our system partners but they too are experiencing significant systemic pressures.
- 1.5. At the beginning of April, we also had to declare a Critical Incident when a highly contagious strain of a diarrhoea and vomiting bug circulated in the Chichester area led to an outbreak at St Richard's Hospital at a time when the hospital was already operating at full capacity. Several wards were closed, visiting suspended and ambulance diversions put in place to Worthing Hospital and Princess Royal A&E units. I am hugely grateful for the support of colleagues in these hospitals, as well as the way everyone at St Richard's responded to the incident. Their efforts were acknowledged by an outpouring of supportive and kind messages on social media.
- 1.6. Messages of support mean so much when people are working so hard, and I wish to thank everyone who took the time to show their appreciation of our staff.



Throughout winter, our have stepped up and responded so admirably to keep patients safe and minimise disruption and waiting times as far as possible. I wish to take this opportunity to thank them all for their hard work, dedication, and incredible resilience. The past six months have been hugely challenging, and we need to acknowledge the toll this can take and do everything in our gift to support them.

- 1.7. Support comes in many guises, from health and wellbeing services to ensuring departments have the right number of staff, as well as access to up-to-date equipment. We have worked hard to invest where we can and improve staffing, equipment, governance, and culture. Our formal response to the Care Quality Commission on 10 April, following publication of our latest hospital reports in January, highlighted many of the improvements we have been able to make despite operational and financial challenges.
- 1.8. For example, we have reduced turnover among nursing, midwifery and medical colleagues, reviewed staffing numbers and developed a new standardised staffing template. Together, these measures should improve staffing levels and reduce pressure on clinical teams. Our divisional directors of nursing are also leading a review of equipment availability to plug any gaps and help ensure colleagues have the right items they need to provide excellent care.
- 1.9. We have a new incident reporting system that alerts our chief medical officer, chief nurse, and patient safety director to all moderate or more severe harms, and which makes it easier to flag issues and share feedback and learning. And we are also working to improve interprofessional communication through human factors safety training and promoting the principles of the Civility Saves Lives project.
- 1.10. We know there is much more we need to do, and the months ahead will be challenging again, but we have plans in place to address issues. Over the past three months we have attended council scrutiny committees in West Sussex, Brighton & Hove, and East Sussex to talk about our improvement plans, as well as the higher than usual regulatory and media scrutiny we have been experiencing. The committees appreciated our openness, and we look forward to updating them throughout the coming year. We are also grateful to the ongoing support from Healthwatch in Sussex, as they fulfil their statutory duties as our critical friend and provide support as an independent advocate for our patients.
- 1.11. We have also been working closely with our commissioning partners at NHS Sussex to develop our Annual Plan 2024/25, which is now being reviewed by NHS England as part of the NHS Sussex submission for the whole Integrated Care Board. Further changes may be required by central government before final approval is received in late May/June. The Annual Plan focuses on achieving new national waiting time standards in elective care, cancer, diagnostics and urgent and emergency care. It is clear the year to come will be another extremely challenging one as we work to improve performance, quality and our estate within some very tight budget and workforce constraints.



- 1.12. Our improvement efforts will be underpinned by our Quality and Safety Improvement Programme (QSIP), which ensures we are able to assure ourselves and our stakeholders that we are delivering all essential standards of care. We are forecasting that delivering the Annual Plan will leave us with a significant budget deficit in 2024/25. This is subject to achieving efficiency savings of £75 million, the majority of which will be targeted through reductions in staffing costs. We propose making these savings by lowering spend on agency staffing, reducing our need for escalation staffing by improving patient flow, reducing sickness absence and undertaking establishment/staffing reviews.
- 1.13. At just three years old, University Hospitals Sussex remains a young Trust, and it is important to remember that merging two large organisations during a pandemic was both complex and complicated. Each of our legacy trusts brought strengths and weaknesses to the partnership and, distilling the best from each, and forging successful change, takes time. It cannot be rushed but our trajectory is sound, and the pace of maturity is accelerating.
- 1.14. We are realistic about the challenges that lay ahead, but we are optimistic as well. We have a team of 20,000 compassionate and talented people, the support of our communities, and of our partners and stakeholders too. Together, we can realise our immense potential as one of the largest trusts in the country and continually improve care and health services for the people of Sussex.

#### 2. ACHIEVEMENTS, AWARDS AND RECOGNITION - CONGRATULATIONS!

- 2.1. Despite the relentless demands upon our staff and hospitals, there are also many positive developments and achievements that it is important we take time to celebrate and share. So, I am delighted to be able to highlight a broad selection of achievements below that have occurred since our last Public Board three months ago. On behalf of the board, I wish to commend and thank all colleagues involved.
- 2.2. In February and March, a record 1,500 nominations were received for our annual staff recognition awards. The Patient First STAR awards are an important landmark occasion in our calendar and this year's strength of nominations demonstrates how much colleagues, patients and families want to celebrate the hard work, dedication, and innovation of so many members of staff, teams and departments across the Trust. In April, a large judging panel met to deliberate upon each category and on Friday 28 June everyone shortlisted for an award will be invited to our prize ceremony and celebration event, kindly funded by our trust charity My University Hospitals Sussex.
- 2.3. Our Practice Development Education team for Children's Services has been awarded the NHS South East Nursing and Midwifery Green Week award for Clinical Leadership, Systems and Workforce. The award recognises the team's efforts to deliver a green education programme for NHS staff, led by Sadie Sullivan, Practice Development Nurse. The initiative helps improve knowledge to provide effective, safe and compassionate care to children and young people, who are being treated in hospital and have mental health concerns. The programme which embodies the Trust's Patient First, Planet First green plan, was also accepted for presentation at the Royal College of Nursing Education Conference in April.

Council of Governors May 2024



- 2.4. Specialist head and neck cancer dietitian **Kirsty Clutterbuck** has published a cookbook specifically designed for patients with head and neck cancer and receiving treatments such as chemo and radiotherapy. The "Not so porridge" cookbook features recipes specifically designed to help patients with altered or complete loss of taste, painful swallowing or a loss of appetite. The book was funded by the Sussex Cancer Fund and copies can be bought from the charity, with proceeds used to support patients with cancer in Sussex.
- 2.5. An award commemorating a much-loved colleague has been established by the Critical Care and Pharmacy departments at Royal Sussex County Hospital, recognising individuals who have championed patients and their safety. The **new Jess West Award** is named in memory of **Critical Care pharmacist**, **Jess West**, who worked at Royal Sussex County and Princess Royal hospitals for more than 15 years. Jess was the Trust's first dedicated Critical Care pharmacist, and as leader of the pharmacy team was fundamental to the safe running of the intensive care unit. Jess sadly passed away after a short illness in February 2023.
- 2.6. The Sussex Orthopaedic Treatment Centre (SOTC) team are joint winners of the national Sustainability Partnership of the Year award for a green study they conducted that cut carbon their footprint, reduced costs, and saved time for more than 1,000 patients. Last year, the team won funding to pioneer the creation of a green digital pathway for elective orthopaedic surgery patients at SOTC at Princess Royal Hospital. Their goal was to reduce the need for face-to-face visits from referrals to leaving hospital, to take the patient journey from paper to digital and look at the carbon footprint savings at the end of the six-month. SOTC is now set to increase its use of more sustainable, digital resources by introducing a new electronic notes system.
- 2.7. An innovative pathway, first established in the Trust at St Richard's, has seen nearly 250 patients undergo same day total laparoscopic hysterectomy the most in the South East. A total laparoscopic hysterectomy allows the surgeon to remove the uterus using a keyhole technique, which avoids a large cut to the lower abdomen, is much quicker, less painful and means patients can go home just hours after surgery. Consultant gynaecology surgeon Miss Melanie Tipples and surgical care practitioner Sam Roberts have both contributed to new national best practice guidance for the procedure.
- 2.8. Consultant neurologist, Professor Dennis Chan, has led a study that shows people at risk of Alzheimer's disease have impaired spatial navigation before problems with other mental functions, including memory, manifest themselves. It is hoped the findings, which have been published in the Alzheimer's and Dementia journal, might lead to developing a diagnostic support tool for the NHS in the coming years.
- 2.9. Colleagues wished a fond farewell to paediatric ambulatory care assistant Jean Redfern, a much-loved member of the Bluefin children's ward at Worthing Hospital, who has retired after 50 years with the Trust. Jean began her career at Southlands Hospital in the early 1970s after being an inpatient on a surgical ward where she was keen to help and so supported staff making beds. The ward sister asked her if she would like a job and, within the hour, she was giving an application form! In the half century since, Jean has worked in many departments, from gynaecology and orthopaedics to surgery and maxillofacial before joining paediatric care 35 years ago.



- 2.10. Our chief finance officer, Karen Geoghegan is joining NHS England South-East as its regional director of finance. Karen has an exemplary track record as our executive lead for finance since 2014 and can be immensely proud of her many achievements and the sound financial management she has provided over the past 10 years. She has provided strength, stability, and rigour throughout a huge period of change and ably contributed to every major decision taken by the board. We wish her every success in her new regional leadership role.
- 2.11. Our chairman Alan McCarthy MBE is retiring in June, following the completion of his second three-year term at the helm of the Trust Board and Council of Governors. I want to take this opportunity to thank Alan for being such a staunch ally for the Trust and a great source of support and advice for the executive team, and especially for me as chief executive. We will miss working with him but wish him every happiness in his retirement. Joining us this summer, our new chair will be Philippa Slinger, a mental health nurse by background with more than 25 years of board level experience, working in mental health, acute care, and the private sector. Philippa is aware of the challenges we face, and I am excited to start working with her on our long-term improvement journey.

#### 3. INVESTING IN OUR HOSPITALS AND SERVICE IMPROVEMENTS

- 3.1. Patients can now access diagnostic scans in Bognor at the new Community Diagnostic Centre (CDC). The mobile CDC, run by the Trust but located on the Bognor Regis campus at the University of Chichester, provides easy access to diagnostic pathways, including CT and MRI scanning, and offers accurate and timely diagnoses away from our main hospitals. This new facility works alongside the CDC in Falmer, based at the AMEX stadium, to form a network led by the Trust's main CDC at Southlands Hospital in Shoreham-by-Sea.
- 3.2. Patients are being seen more quickly and safely thanks to innovative changes at the Emergency Department at Princess Royal Hospital, Haywards Heath. From piloting a new GP-led Urgent Treatment Centre, introducing a rapid assessment and treatment service and launching a new Ambulatory Clinical Decision Unit (ACDU), the team is improving flow through the department and allowing medical teams to focus more on the sickest patients. Due to these innovations, the Emergency Department has been awarded £10,000 by the National Institute for Health Care and Research to further explore the potential of their new scoring system and how it is supporting the success of the ADCU.
- 3.3. A **new Health Information Point (HIP)** is providing a free and confidential health information service for patients, visitors, staff and volunteers at the Royal Sussex County Hospital. The offer includes guided internet access for health-related queries; expert advice on improving health literacy; information on healthy living, as well as medical conditions, treatments, tests and medicines; and signposting to local support services and self-help groups.
- 3.4. A new garden has opened at Worthing Hospital outside of The Friends Café in the North Wing, providing a peaceful haven to help boost the wellbeing of patients, visitors, and staff. The space, which had remained unused for years, was transformed over six months to become a calming, accessible sanctuary, complete with vibrant planting and outdoor seating. The garden has been funded by the Friends of Worthing Hospitals and the Trust's dedicated charity, My University

Council of Governors May 2024



Hospitals Sussex. A mural was also commissioned by the Trust's Organ Donation Committee.

- 3.5. Our Breast screening services have developed a sustainable electronic system that helps increase uptake for breast screening across Sussex and is being used by more than 150 GP surgeries. The new system is part of a local action plan to get more people to attend their screening and is the first system of its kind in the country. After carrying out pilots of the new electronic reports with local GPs, the new system received very positive feedback with colleagues estimating that is has halved the time it takes to process paper-based reports.
- 3.6. Demolition work is well underway on the Barry Building at the Royal Sussex County Hospital to make way for a **new Sussex Cancer Centre**. The redevelopment of the plot marks stage 2 of the £750m 3Ts redevelopment of the hospital campus. Over the next few months, the old hospital estate and surrounding buildings will be carefully dismantled, and a revised planning application submitted for our new £155 million Sussex Cancer Centre. It will bring state-of-the-art purpose-built facilities, employing novel treatments and technologies, expertise and research together in an environment that supports improved patient and staff experience for our radiotherapy, oncology and haematology departments.

#### 4. SUPPORTING OUR PEOPLE

- 4.1. Our staff are our most precious resource, and we have a comprehensive, broad-ranging and growing programme to provide support for them, as well as thank, acknowledge, and recognise everything they do for our patients, each other, and the Trust. Full details are available on our website at <a href="https://www.uhsussex.nh.uk/Wellbeing">www.uhsussex.nh.uk/Wellbeing</a> and below are some recent examples:
- 4.2. Staff can now sign up for a free check up with our new health check nurses. Each appointment includes blood pressure, BMI and pulse check, along with advice and signposting for lifestyle changes such as weight loss, stopping smoking, alcohol reduction and mental wellbeing.
- 4.3. A new 'Managing mental health and wellbeing at work' training course is being introduced and run in-house by Health, Wellbeing and Engagement managers Tracy Grover and Kelly Salter. The course is designed for managers and staff in positions of responsibility.
- 4.4. The Trust's first Disability Awareness Conference took place in March the Royal Sussex County Hospital. Organised by the Disabled Staff Network, but open to all staff, the event featured speakers from a variety of organisations, including Kim Hoque (Lead of the Disability Employment Charter) and Stuart Moore (NHS & Genius Within), as well as informative and educational breakout sessions.
- 4.5. We continue to help colleagues approaching or going through the menopause with various resources and events. The most recent was a meeting of the Trust's Menopause Café on 27 March which explored the topic of Testosterone with guest speaker and GP with an advanced certificate in menopause care, Dr Rhianydd McGlone.
- 4.6. The Trust's new Health and Wellbeing Network met for the second time on 14 March, with guest speakers including Freedom to Speak Up Guardian Trish Marks



- and health check nurse Rachel Gardiner. The group also talked about the Trust's two other new staff networks focusing on Carers and Women, as well as this year's NHS Staff Survey results.
- 4.7. On 1 January, the Trust's Crisis Fund had been in operation for one year, with 608 applications out of 697 received supported with grants and/or general cost of living awards to the value of £122,374. A further 149 staff were supported in January and February 2024, with awards given to the value of £32,000.
- 4.8. Our Financial Wellbeing Support Officer, Tracy Cox Horton, has now been at the Trust for eight months and has supported 1,633 staff with budgeting, NHS pensions advice, inheritance tax guidance, debt management and financial services signposting. Tracy has also run 15 training courses with 238 attendees.

#### 5. INTERESTED TO FIND OUT MORE?

5.1. The news section of our website provides more detail and great images related to some of the events and achievements I have referenced above. Please visit <a href="https://www.uhsussex.nhs.uk/news">www.uhsussex.nhs.uk/news</a>. We are also active on social media. Please join the conversation, comment, like and share by searching for @UHSussex on your favourite platform or use the hashtag #UHSussex. We also invite people living locally to join UHSussex as a member, volunteer in our hospitals or develop their career with us. With seven hospitals across Sussex and numerous satellite services, we are proud to be at the heart of the communities we serve. We wish to welcome others to our UHSussex family too. Visit <a href="https://www.uhsussex.nhs.uk/join-us-thank">www.uhsussex.nhs.uk/join-us-thank</a> you.

#### 6. RECOMMENDATIONS

6.1 The Governors are asked to NOTE the Chief Executive Report.



Agenda Item: 7.	Meeting:	Council of Governors Meeting Date:		May 2024				
Report Title: NHSE U	Undertakings Progress Report							
Sponsoring Executive Dire	ector:	Chief Gove	ernance Officer					
Author(s):		Chief Gove	ernance Officer					
Report previously consider and date:	ered by	N/A	N/A					
Purpose of the report:								
Information		N/A	Assurance		N/A			
Review and Discussion		Yes	Approval / Agreeme	nt	N/A			
Reason for submission to	Trust Boar	d in Private	only (where relevar	nt):				
Commercial confidentiality		N/A	Staff confidentiality		N/A			
Patient confidentiality	N/A	Other exceptional cir	Yes					
Link to ICB / Trust Annual Plan								
Link to ICB Annual Plan N/A Link to Trust Yes Annual Plan								
Implications for Trust Stra	tegic Them	es and any	link to Board Assur	ance Framework	risks			
Sustainability	Yes							
People	Yes							
Patient & Quality	Yes							
Systems and Partnerships	Yes							
Research and Innovation	Yes							
Link to CQC Domains:								
Safe	Yes	Effective		Yes				
Caring	Yes	Responsive		Yes				
Well-led		Yes	Use of Resources		Yes			
Regulatory / Statutory rep	Regulatory / Statutory reporting requirement							

# Yes

# **Communication and Consultation:**

#### **Executive Summary:**

In the autumn of 2023, the Board entered into Undertakings on its licence with NHSE. The undertakings are focussed on a range of areas and required the Trust to have a comprehensive improvement plan.

The purpose of this paper is to confirm progress on developing that plan and identify how each element is assured through Trust governance.

The Trust has developed a Quality and Safety Improvement Programme (QSIP) that brings together its work to address the Undertakings and drive sustainable improvement. QSIP has the following workstreams:

- Improving Quality Governance, Risk Management and assurance
- Improving Access to Surgery
- Improving Safety Culture
- Well-Led
- Communications and Engagement (enabling workstream)

QSIP and each of its workstreams has an Executive Sponsor and a Director Senior Responsible Officer with Programme Management Office support. In addition, each workstream has developed its Key Performance

**NHSE Undertakings Progress Report** May 2024

Indicators and delivery plans. The Chief Executive chairs the monthly Steering Group that oversees the progress of the programme.

The Trust has recently received feedback from NHSE and the ICB on its approach to the Undertakings and is refining its approach appropriately. The Trust will also produce a document that sets out its approach and the progress being made in a readily accessible form.

External assurance and oversight are provided through the Quality Review Process led by the ICB and attended by NHSE.

To assure QSIP the Board has established a dedicated committee which meets each month. The following table sets out where each element of the Undertakings is assured noting that the QSIP committee will draw on the assurances from the other committees so that it can assure progress against the Undertakings as a whole.

Undertaking	Trust Board Committee providing Assurance
Development and delivery of a comprehensive improvement plan with Board level accountabilities, incorporating feedback from NHSE and any external reviews commissioned as part of its improvement work	Quality and Safety Improvement Programme
Delivery and assurance of priorities and actions in relation to all previous CQC inspection reports	Patient and Quality
Delivery improvement to four-hour performance and planned care	Finance and Performance
Engage and support staff in the improvement plan	Quality and Safety Improvement Programme
Transparent internal processes and reporting is available to provide staff with confidence to raise concerns	People
Ensure effective mechanisms for all staff to provide feedback and respond effectively to this feedback including staff survey, complaints, grievances, and whistleblowing concerns	People
Ongoing triangulation of the impact of improvement actions with wider quality metrics including patient and staff feedback, incidents and complaints	Patient and Quality

**NHSE Undertakings Progress Report** May 2024

Nev Recommendation(S	Ke	Recommendation(	s)
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The Council of Governors is asked to note this report.

NHSE Undertakings Progress Report May 2024



Agenda Item: 8	Meeting:	Council of Governors		Meeting Date:	16 May 2024				
Responsible Governor:			cCabe, Public Govern		ve				
Author(s):		Jan Simmo	ons, Governor & Meml	pership Manager					
Report previously cons	dered by	N/A							
and date:									
Purpose of the report:									
Information		Yes	Assurance		Yes				
Review and Discussion		N/A	Approval / Agreemer		N/A				
Reason for submission	to Trust Boa	rd in Private	e only (where relevar	nt):					
Commercial confidentialit	/	N/A	Staff confidentiality		N/A				
Patient confidentiality		N/A	Other exceptional cir	N/A					
Link to ICB / Trust Annu	Link to ICB / Trust Annual Plan								
Link to ICB Annual Plan N/A Link to Trust N/A									
Annual Plan									
Implications for Trust S		nes and any	link to Board Assur	ance Framework	risks				
Patient Yes									
Sustainability	Sustainability N/A								
People	N/A								
Quality	Yes								
Systems and Partnership	s N/A								
Research and Innovation	Yes								
Link to CQC Domains:									
Safe	Yes	Effective		Yes					
Caring	Yes	Responsive		Yes					
Well-led	Yes	Use of Resources		N/A					
Regulatory / Statutory re	eporting requ	iirement							
Communication and Co	nsultation:								

**Executive Summary:** 

The Patient Engagement and Experience Committee met on 14 March 2024. The meeting was quorate with four Governors in attendance. It was also attended by the Director of Patient Experience, Engagement and Involvement, the Assistant Director of Patient Experience, Strategy and Improvement, Associate Director of Patient Safety as well as the Managing Director of Planned Care and Cancer and the Assistant Director of Performance and Improvement. Apologies were received from the NHS Integrated Care Board and Healthwatch representatives and the Deputy Director of Estates and Facilities.

#### PLACE Audits - National Audit Results

As the results of the National PLACE audits had not been finalised it was agreed to defer this item to the next meeting.

# Patient Access Transformation

The Committee received an overview of the progress being made in relation to the Patient Access Transformation programme which was one of the Trust's Corporate Projects and the Managing Director of Planned Care and Cancer described the role of each of the programme's four workstreams.

Patient experience and Engagement Committee Chair's report March 2024



#### Patient Safety Incident Response Framework

The Committee received a presentation by the Associate Director of Patient Safety who explained the background and changes to the way that serious incidents (SIs) were processed and investigated.

#### Register of Governors Activities

The Committee also received the Register of Governors Activities which provided information on the Governors' involvement and experience in various Trust improvement projects.

#### Governor Feedback / Contact with Public

There was no feedback provided at this meeting from the Governor's contact with the public.

#### Stakeholder Feedback

There being no ICB representative at the meeting the Stakeholder Feedback item was deferred to the next meeting.

#### **Healthwatch Update**

There was no representative present from Healthwatch but the meeting Chair provided a brief update.

#### Patient Experience Quarter 3 Report

The Committee noted the Trust's Quarter 4 Patient Experience Report and information relating to the Trust's principal sites at Brighton, Chichester, Haywards Heath, Worthing and Southlands and those areas where the Trust had performed well for patients, as well as concerns and complaints received, and the satisfaction feedback levels for the Friends and Family test.

#### **Key Recommendation(s):**

The Council is asked to **NOTE** that there were no matters from this meeting that were referred to the Council for action.

#### COMMITTEE HIGHLIGHTS REPORT TO BOARD

Meeting:	Patient Engagement & Experience Committee	Meeting Date:	14 March 2024	Chair:	Frances McCabe	Quorate: Yes

#### **Declarations of Interest Made**

There were no declarations of interest made.

#### Assurances received at the Committee meeting

#### **PLACE Audits - National Audit Results**

The Committee **NOTED** that as the results of the National PLACE audits had not been finalised this item had been deferred to the next meeting.

# Patient Access Transformation - Corporate Project

The Committee **RECEIVED** a presentation by the Managing Director for Planned Care and Cancer Services across the Trust on the Patient Access Transformation programme to review and improve how the Trust managed referrals and communicating with patients whilst waiting for appointments.

The Committee **NOTED** that the programme consisted of four workstreams; the first to look at how referrals were processed, and the electronic referral system was used along with an automated robotic process to reduce administration. The second workstream focussed on the Netcall technology aimed at providing 2-way text communication with patients and assisting with the coordination of outpatient appointments. The third workstream would review how the booking teams operated across the Trust and look to define a uniform approach and the correct booking team model. The final workstream would concentrate on the validation of adherence and access policies.

#### Patient Safety Incident Response Framework Update

The Committee **RECEIVED** a presentation by the Associate Director of Patient Safety who explained the background and changes to the way that serious incidents (SIs) were processed and investigated.

# **Register of Governor Activities**

The Committee also **RECEIVED** a brief overview of the register kept of the Governors' involvement in the various improvement groups within the Trust.

# **Governor Feedback / Contact with Public**

The Committee **NOTED** that there was no feedback provided at this meeting from the Governor's contact with the public.

#### Stakeholder Feedback

The Committee **NOTED** that this item would be deferred to the next meeting as there was no representative from the ICB present at the meeting to give feedback.

### **Healthwatch Update**

The Committee **NOTED** that although there was no representative from Healthwatch present at the meeting to give feedback the Chair was able to provide a brief update on a mystery shopping project and the work Healthwatch was undertaking with a Cancer focus group and in relation to Dementia.

Patient experience and Engagement Committee Chair's report March 2024

#### Patient Experience 2023/24 Quarter 3 Report

The Committee **RECEIVED** the Trust's 2023/24 Quarter 3 Patient Experience Report and **NOTED** that during the reported quarter most (90.1%) patients were satisfied that they had a good or very good experience. This was comparable to previous quarters but the overall trajectory through 2023 had been slightly downward.

The Committee **NOTED** that there had been 295 complaints received during Q3 which had been a significant reduction from 345 in Q2, with more complaints closed than had been received in Q3.

The Committee **NOTED** that the number of enquiries and concerns received by the PALS service had reduced in Q3 despite an overall upward trajectory for concerns received. The PALS teams continued to work with clinical services when clusters of concerns were received to support early mitigating action, in particular relating to communication with patients. The highest number of contacts were for Trust wide issues, Emergency Department at SRH, Neurology, dates for appointments and surgery and discharges.

# Actions taken by the Committee within its Terms of Reference

The Committee did not take any specific decisions at this meeting other than the approval of the previous minutes.

Items to come back to Committee / Group (Items Committee / Group keeping an eye on)

#### **PLACE**

To receive results of National audits noting that this is to be scheduled for the June Committee meeting.

#### **Mental Health**

To provide a brief system update.

#### Research activities aligned to patient experience

To note how the work supported by the Trust's R&I Strategy is aligned to improved patient experience of healthcare.

#### **Q4 Patient Experience Report**

To note progress

# Items referred to the Board or another Committee for decision or action

The Council is asked to **NOTE** that there were no matters from this meeting that were referred to the Council for action.

Patient experience and Engagement Committee Chair's report March 2024



# Membership Experience and Engagement Committee Chair's update

Briefly, to report to the Council that the meeting of the MEC planned for April 2024 did not take place by mutual consent.

The Company Secretarial team had been engaged on other commitments during the preceding period and so there was no significant activity undertaken which would support a productive formal report as the numbers of members have not moved significantly.

Membership numbers to the 31<sup>st</sup> March have remained above the required minimum numbers and are presently being collated for the Annual Report which will provide that confirmation to the public.

Whilst there has been no meeting in April, work has recommenced on membership recruitment and Nadia recently attended the "Love Your Liver" roadshow put on by Love Your Liver Charity and supported by our nurses on Brighton seafront Tuesday 30<sup>th</sup> April where 48 new members were signed up. Nadia and other staff did a great job of showcasing and talking about the benefits of Trust Membership.

John Todd Membership and Engagement Chair



# Lead Governor Report 16th May

The Governors would like to give a very warm welcome to the Trust's new chair Philippa Slinger, and we look forward to having a strong, open and robust relationship with you.

We are very aware that Philippa enters the Trust at a very challenging time with a vast range of situations ranging from the impact of the extra burden of Norovirus on the daily operations of our Hospitals and the additional pressures on the staff, through to continuing Media coverage of matters that the Trust cannot be commented upon whilst the legal process continues which makes it hard for Trust staff.

We remain concerned as to the negative impact this coverage has on the Public, our staff and on those who may wish to build a career with the Trust.

We are Governors have a role to play in assisting to promote a more balanced view of how the Trust operates and act as a conduit between the Trust and the Public and seek to provide that balanced view by voicing the Trusts' achievements.

We regularly receive updates on the Trust's activities these in themselves are balanced with a recognition of the challenges facing the Trust and the achievements being made. Whilst we like the Trust recognise there is more to do nothing is more pleasing then for us to be able to say that the waiting lists for patients wating for cancer treatment have reduced and have fallen faster than any other trust within the country despite the pressures of Industrial action and the winter pressures.

The Trust's response to the last CQC inspection highlights the changes that have been made. These range from increases in staffing, continued investment in replacement equipment to those made within the Trust quality governance systems and investment in the Trust's culture. The Governors like the Board itself receive reports on the established improvement programme and the Governors appreciate that this is being successfully achieved through the dedicated focus of many in the Trust through the developing Quality and Safety Improvement Programme (QSIP).

The challenges for the staff on a daily level undoubtably result in many stressful situations, therefore the initiation of the 'Stress Awareness Month' is a great step forward. Helping staff to recognise it's okay to say they are

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stressed and to receive help before it becomes a greater problem is an initiative applauded by the Governors.

Despite all these pressures the Trust continues with its pioneering work with the Green Plan to reduce the carbon footprint of all the Hospitals and through the engagement with the 'Heat Network' for Worthing Hospital and the local partners the Trust is seeking to support its wider community. It is an amazing venture, and the Governors look forward to hearing more about this and spread this exciting news to the Public.

More recently at the last Board Meeting the Governors heard of the exciting opportunities the 2024/25 capital programme holds not least to support the continuing development at the Royal Sussex County Hospital A&E department which has suffered from cramped conditions but with the opportunity to provide better patient assessment space will make a real difference. The Governors recognise the challenges in progressing this scheme not only logistically but also financially and are pleased to be receiving a specific briefing on this scheme later in May.

The Governors continue to be active within the Hospitals and take part in the Peer Reviews which have recently recommenced, Place Audits, NEDS and Governors quarterly alignment reviews, Hospital forums and Kali is our representative at the LGBT and EDI forums within the Trust.

A 'Welcome Standard' training session was attended by several Governors all of which found to be a very well organised and a thought-provoking experience and would highly recommend this training, as it really opens hearts and minds and incorporates not just the public and patients but also how we respond respectfully to treat each other.

The Governors 'coffee mornings' have recommenced via Teams and it offers Governors the opportunity to have an informal private chat where they can discuss any topics or raise any concerns which the Governors feel are pertinent from a public perspective that have arisen from their interactions with the Trust. The Company Secretary is very willing to provide clarification to all the Governors and where necessary arrange an appropriate person for us to feedback too or arrange a briefing session with more information on areas where improvements are being made. We welcome and appreciate this arrangement and find it is very beneficial to enhancing the Governors role and providing a practical way the Governors can influence change.

Some Governors have been involved with the judging process which



culminates in the final nominations for a prestigious 'Patient First Star Awards' which acknowledges a team or an individual's contribution to excellent patient care. It has been a privilege to read through the nominations and learn of the huge amount of people within this trust that go above and beyond their duty to others, this process remains a truly inspirational experience and a showcase for the Trust staff who are truly amazing.

Lastly as this is the Chairman's last COG's meeting in Public we would like to take this opportunity to sincerely thank him for all his support to the Governors. Alan has listened to our comments and helped us feel very much involved with the Trust by regular briefings and has been instrumental in establishing Governor and NED's workshops and the support for peer reviews with each Hospital site. This has resulted in a good working relationship with the NED's and enhanced understanding and respect for each other's roles and how it can work to the advantage of the Trust,

Alan, a big thank you to you from us all.



Council of Governors Meeting May 2024 Agenda Item: 15. Meeting: Date: Report Title: Company Secretary Report Author(s): Company Secretary Report previously considered by and date: Purpose of the report: Information N/A Assurance N/A Review and Discussion Yes Approval / Agreement N/A Reason for submission to Trust Board in Private only (where relevant): Commercial confidentiality N/A Staff confidentiality N/A N/A Patient confidentiality Other exceptional circumstances N/A Link to ICB / Trust Annual Plan Link to ICB Annual Plan N/A Link to Trust Yes Annual Plan Implications for Trust Strategic Themes and any link to Board Assurance Framework risks Patient N/A Sustainability N/A N/A People Quality N/A Systems and Partnerships N/A Research and Innovation N/A Link to CQC Domains: Safe N/A Effective N/A Caring N/A Responsive N/A Use of Resources N/A Well-led Yes Regulatory / Statutory reporting requirement Foundation Trust's are required to establish and maintain an effective Board and systems of governance.

**Communication and Consultation:** 

# Report:

#### **New Chair**

The Council of Governors approved the appointment of Philippa Slinger as Trust Chair from 1 July 2024. Trust has concluded the reappointment checks, none of which identified any issues specifically with Philippa's ability to meet the fit and proper persons requirements.

Philippa has commenced with a programme of orientation which is designed to support the Transition of Chair when Alan McCarthy retires on the 30 June.

# Governor elections

As was reported at the last meeting a number of governors terms of office end in 2024/25, these positions are those with terms of office that end on the 30 June, these being for Brighton and Hove 2 positions; Horsham 1 position, Mid Sussex 1 position and for East Sussex / Out of Area 1 position and the RSCH staff governor. The positions with terms of office that ends on the 30 September are Chichester 2 positions and the St Richards Hospital staff governor from 31 October.

The nomination process opened on the 18 April with a deadline for the submission of a nomination by 17 May 2024. During this period the Trust is offering a number of briefing sessions allowing those interested

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to understand the role of a governor, these are taking place, by MS Team, with the Company Secretary on Tuesday 30 April at 17.00, Wednesday 8 May at 13.00 and Monday 13 May at 17.00. Places at these sessions can be booked by e-mailing <a href="mailto:uhsussex.governors@nhs.net">uhsussex.governors@nhs.net</a> We have also included information on the Trust's website about the role of a Governor and the election process <a href="https://www.uhsussex.nhs.uk/about/governors/">https://www.uhsussex.nhs.uk/about/governors/</a>

Should seats be contested then the notice of the poll will be published on 10 June 2024, with voting packs dispatched on 11 June, with the closure of the elections on the 4 July 2024.

We are taking the opportunity during the election process to review our Governor Induction Handbook with support from recently recruitment governors.

#### Recommendations

The Board is recommended to

**NOTE** the commencement of the orientation of the Trust Chair designate ahead of their formal commencement on the 1 July 2024.

**NOTE** that the Trust governor elections process has commenced and the Trust is continuing to support those members interested through drop in briefing session to enable those interested to understand the governor role.