

Torbay and South Devon NHS Foundation Trust




Council of Governors

Anna Dart Lecture Theatre, Horizon Centre, Torbay Hospital.

12 December 2018 14:00 - 12 December 2018 16:00

AGENDA

#	Description	Owner	Time
1	<p>Chairman's welcome and apologies: Stuart Barker, Rob Dyer, John Harrison, Gary Hotine, Jacqui Marshall.</p> <p>For information</p>	Chairman	14:00
2	<p>Declaration of interests</p> <p>To receive</p>	Chairman	
3	<p>Minutes of the last meeting held on 21 September 2018 (enc)</p> <p>To approve</p> <p> 03 - 2018.09.21 DRAFT CoG minutes FINAL DRAF... 5</p>	Chairman	
4	<p>Chairman's report (verbal)</p> <p>To receive</p>	Chairman	14:05
5	<p>Clinical Schools Health Showcase (presentation)</p> <p>To receive</p>	Rachel Rapson	14:10
6	<p>Chief Executive's report (enc)</p> <p>To receive</p> <p> 06 - Report of the Chief Executive.pdf 15</p>	Chief Executive	14:20
7	<p>Company Secretary's report (enc)</p> <p>To receive</p> <p> 07 - Company Secretary's Report 2018-12-12.pdf 31</p>	Interim CoSec	14:25
8	<p>Governor Communications Log (enc)</p> <p>To receive</p> <p> 08 - Gov Comms Log as at 05.12.2018.pdf 37</p>	Interim CoSec	14:30
9	<p>Non-Executive Director reports (enc)</p> <p>To receive</p> <p> 09 - NED reports.pdf 43</p>	NEDs	14:35

#	Description	Owner	Time
10	<p>Non-Executive / Executive Director Presentation (verbal)</p> <p>To receive</p>	Chief Executive	14:45
11	<p>Waiting Times (presentation)</p> <p>To receive</p>	Neal Foster	14:55
12	<p>Intermediate Care (presentation)</p> <p>To receive</p>	Shelly Machin	15:10
13	<p>Lead Governor's report including Constituency Reports (enc)</p> <p>To receive</p> <p> 13 - Lead Governor report December 2018.pdf 53</p>	Lead Governor	15:30
14	<p>Quality and Compliance Committee Report (enc)</p> <p>To receive</p> <p> 14 - 2018.12.12_QandCC_Report.pdf 61</p>	Committee Chair	15:40
15	<p>Membership Group report (enc)</p> <p>To receive</p> <p> 15 - Membership Group notes.pdf 75</p>	Group Chair	15:45
16	<p>Details of next meeting: 22 March 2019, 10am – 12pm, Anna Dart Lecture Theatre, Horizon Centre, Torbay Hospital.</p> <p>For information</p>		
	<p>Executive Directors, Non-Executive Directors and members of the public please leave the meeting at this point</p>		15:50

INDEX

03 - 2018.09.21 DRAFT CoG minutes FINAL DRAFT.pdf.....	5
06 - Report of the Chief Executive.pdf.....	15
07 - Company Secretary's Report 2018-12-12.pdf.....	31
08 - Gov Comms Log as at 05.12.2018.pdf.....	37
09 - NED reports.pdf.....	43
13 - Lead Governor report December 2018.pdf.....	53
14 - 2018.12.12_QandCC_Report.pdf.....	61
15 - Membership Group notes.pdf.....	75

**MINUTES OF THE COUNCIL OF GOVERNORS MEETING
HELD AT 10AM IN THE ANNA DART LECTURE THEATRE,
HORIZON CENTRE, TORBAY HOSPITAL
21 SEPTEMBER 2018**

Governors

- | | | |
|-----------------|----------------------------|--------------------|
| * Ken Allen | * Richard Ibbotson (Chair) | * Lesley Archer |
| Stuart Barker | * Nicole Amil | * Bob Bryant |
| * Peter Coates | Derek Blackford | * Carol Day |
| * Annie Hall | * Craig Davidson | * Lynne Hookings |
| April Hopkins | David Hickman | * Michael James |
| * Mary Lewis | * Barbara Inger | * Wendy Marshfield |
| * David Parsons | * Paul Lilley | Anna Pryor |
| Sylvia Russell | Andy Proctor | * John Smith |
| Elizabeth Welch | Peter Smerdon | |

Directors

- | | | |
|-------------------|--|--------|
| * Liz Davenport | Interim Chief Executive | (CE) |
| Paul Cooper | Director of Finance | (DoF) |
| * Lesley Darke | Director of Estates and Commercial Development | (DECD) |
| Rob Dyer | Medical Director | (MD) |
| Judy Falcão | Director of Workforce and Organisational Development | (DWOD) |
| * John Harrison | Interim Chief Operating Officer | (COO) |
| Jane Viner | Chief Nurse | (CN) |
| Ann Wagner | Director of Strategy & Improvement | (DSI) |
| * Jacqui Lyttle | Non-Executive Director | (JL) |
| * Jacqui Marshall | Non-Executive Director | (JM) |
| Vikki Matthews | Non-Executive Director | (VM) |
| * Paul Richards | Non-Executive Director | (PR) |
| * Robin Sutton | Non-Executive Director | (RS) |
| * Sally Taylor | Non-Executive Director | (ST) |
| * Jon Welch | Non-Executive Director | (JW) |

(* denotes member present)

- | | | | |
|----------------|---------------|---|----------|
| In Attendance: | Dawn Butler | Deputy Director of Strategy | DDS |
| | Charlie Helps | Interim Company Secretary | IntCoSec |
| | Gary Hotine | HIS Director | HISD |
| | Rod Muskett | Deputy Director of Finance | DDF |
| | Monica Trist | Corporate Governance Manager and Note taker | CGM |

1. **Welcome and Apologies**

Apologies were received from Stuart Barker, Derek Blackford, David Hickman, April Hopkins, Andy Proctor, Anna Pryor, Sylvia Russell, Peter Smerdon, Elizabeth Welch, Paul Cooper, Rob Dyer, Judy Falcão, Jane Viner, Ann Wagner, Vikki Matthews.

Chairman welcomed members to the meeting and thanked them for attending a very

Action

busy day at the Trust, including an interesting annual members meeting.

2. **Declaration of Interests**

There were no declarations of interests.

3. **Minutes of the Meeting held on 18 July 2018**

The minutes were approved as an accurate record of the meeting.

4. **Chairman's Report**

The Chairman informed members of a recent opportunity to raise the Trust's profile through speaking to a delegation of MPs and representatives from the House of Lords on the issue of health and social care provision in a rural environment. He thanked D Butler for the comprehensive briefing paper she had prepared. This had been an excellent opportunity to bring the Trust's Integrated Care Model into the public domain.

This had been a very busy time lately with the NHS 70th birthday and Torbay hospital also celebrating its 70th birthday. Following the Annual Members meeting later in the day, at 4 p.m. a silver chalice and paten donated to the Hospital by Ella Rowcroft would be unveiled on display in the Main Entrance, a brief presentation on the history of the items would be given made and light refreshments would follow. The chairman invited any governors who were available to attend. The Chairman alerted governors that there might be a demonstration regarding the future of Teignmouth Hospital – it was important to understand that the final decision would be made by the CCG, as TSDFT was a Provider Trust.

5. **Chief Executive's Report**

The Interim Chief Executive apologised for the absence of some of her Executive Director colleagues, who had needed to attend major performance meeting with the CCG. The Interim Chief Executive provided some further information on a recent bid for Children's Services - this had been a very detailed and protracted procurement process, with the expectation that the CCG was due to announce shortly that the alliance bid, (for which the /trust was the main party) had been awarded preferred bidder status, although it should be noted this would not mean that the contract had actually been awarded yet.

The Interim Chief Executive advised that the previous day the Trust had attended a commissioners meeting with the CCG and NHSE looking at some exciting future commissioning developments. The Trust had recently started carrying out hip replacements as a day surgery procedure, a very exciting development.

The new structure the community was in the process of being rolled out, the first two posts had recently been recruited to with Joanne Watson and Ian Currie being appointed to Medical Director leadership roles, which will enable good clinical leadership to be provided. Interviews for the next wave of system leader posts would take place on 8 and 9 October, which would enable the ICO to move to the next stage of its journey, and engagement would take place with the workforce, partners and commissioners to determine what this would look like and this would include Governors.

6. **Company Secretary's report**

The Interim Company Secretary said that the Trust had recently appointed a permanent Company Secretary and he wished them well in their role. He would

remain in post until the new Company Secretary took up their post with the Trust. During this interim period he would continue to work with the Council of Governors and to progress the appointment of a new Membership Officer, the role would also encompass support for Governors.

7. **Governor Communications Log**

The Interim Company Secretary presented the latest version of the Governors' Communications Log, which provided a record of formal questions raised and the status of responses received, to provide a record of questions raised by governors and the status of responses received. The Interim Company Secretary asked governors to advise whether they were happy with the responses received, in which case a question could be closed, or whether the answer was felt to be unsatisfactory, with further information required.

Following further discussion on the detail of the Comms Log and the status allocated to questions, the Chairman asked that governors advise the Corporate Governance Manager by 28 September of any questions which they felt had not been answered; otherwise, they would be closed.

8. **2019/20 Business Planning**

DB provided the following presentation on the 2019/20 business planning process:-



NHS
Torbay and South Devon
NHS Foundation Trust

Council of Governors

A new approach to Business Planning for 2019/20, the foundations for the next phase of our journey

Dawn Butler
Deputy Director of Strategy,
Performance & Planning

Working with you, for you

The next phase of our journey

- Our new **delivery structure**
- Creating space for **autonomy and clear accountability**
- Engaging our staff with a **clear sense of purpose**



Business Planning Context

The collage features four documents:

- Five NHS provider sector tests:** A document with five numbered icons (1-5) representing different provider sectors.
- Integrated Care System - SOAP:** A document with a flowchart and a table detailing the SOAP (Strategic Outcomes Assessment Process) framework.
- Joint Strategic Needs Assessment Devon Overview 2018:** A document featuring a map of Devon and text describing the assessment process.
- System outcomes:** A document titled 'Strategic Commissioner Outcomes Framework (draft)' with a list of bullet points.

Planning parameters – latest

Performance NHSI indicators

- RTT: maintain 18 week position and 0 patients waiting over 52 weeks
- Emergency care: 95% <4 hour
- Cancer 62 day: 85%
- Diagnostic: 99% < 6 weeks

Finance

- CIP challenge – roll over any recurring underachieved 18/19 and 19/20 CIP challenge
- Making changes through new investment

Capital

- Capital programme envelope established – process to prioritise and maximise impact

The new 10-year strategic plan (released in November) sets out national priorities and we will update our plans accordingly

Our 5 Strategic Goals – Setting Direction

'Making plans for our future'

Teams will be asked to set their own goals against each of the 5 objectives working within the framework of our collective purpose and continuing the journey of our Integrated Care Model.



Working with you, for you

Making plans for our future

Wellbeing at work
Learn something of what
constituents expect of us

Right Care in the Right Place
Learn something of what
constituents expect of us

Sharing information
Learn something of what
constituents expect of us

Strengthening Partnerships
Learn something of what
constituents expect of us

Staying Well
Learn something of what
constituents expect of us

Delivering high quality care today

People

Quality/ Experience

Finance

Activity

Performance

Risk Framework

Proposal for how we work together to inform business planning

Focus Group

- 3 Constituencies
- Staff governor representative

OCTOBER 2018						
Mon	Tue	Wed	Thu	Fri	Sat	Sun

Purpose:

Create opportunities for governors on behalf of their constituents to meaningfully inform our business plans.

Timeline

Planning Action	Timeline
Release of national planning guidance and CCG 3 year funding allocations	Late September 2018
Business Planning Approach 2019/20 presentation & discussion with Governors about involvement in planning round - COG	21 st September 2018
Business Planning Approach 2019/20 – Paper for approval by Finance Committee	25 th September 2018
Development of interactive business planning tool	Complete by end of September 2018
Business Planning 2019/20 – Paper to public Board	3 rd October 2018
Business Planning launched at Trust Talks	4 th October 2018

Timeline...

Planning Action	Timeline
Team and SDU Planning - Focus on existing performance standards delivery with associated capacity and demand planning	October 2018 – December 2018
National 10-year Strategic Plan published. Our local requirements updated according to nationally set priorities	November 2018
Complete first version of team/SDU plans	December/January 2018/19
Bring and Share Planning Workshop (All SDU's)	January 2019
Presentation to Board of SDU Business Plans	February 2019
Submit Draft operational Plan	Subject to national planning guidance

DB explained that considerable efforts had been made to enable a partnership approach to this year's business planning process and an interactive tool had been developed, which could be printed off for use by teams so that the relationship of business planning with everyday work could easily be seen. Following discussions between DB and Lead Governor on how best to involve governors, a business planning focus group would be set up to which governors would be invited, DB hoped that it would be possible for representatives from each constituency to attend, P Coates and C Davidson said they would be very interested, subject to availability. DB would discuss dates for the focus group with CGM and governors would be invited to attend.

Mr Welch commended DB for the innovative approach to business planning, which should provide every opportunity for staff and stakeholders to contribute to the process. The interim Chief Executive confirmed that whilst timescales for the process

would need to be adhered to, contributions from all stakeholders would be welcomed. The Chairman felt that the new approach to business planning would help the ICO to meet its future challenges.

9. **Non-executive Director Committee Chair reports**

Mrs Taylor presented her report of the Audit Committee meeting held on 27 July 2018 and invited questions from governors. There were no further questions on the Audit Committee report.

Mr Sutton presented a report on the 28 August 2018 Finance, Performance and Investment Committee (FPIC) meeting, where reports had been received regarding the risk to the Trust not achieving its Control Total or CIP targets - further plans were being developed to ensure progress towards the required level of savings. The Chairman felt it was right that the CoG was advised of this at an early stage and made aware of how the Trust was managing this level of financial challenge.

10. **Non-executive Directors' presentation**

The Chairman invited Mr Richards to speak to the meeting. Mr Richards provided the following presentation on his career to date and the priorities he had identified for his role of NED at TSDFT:

Presentation to be inserted here

On behalf of the CoG, the Chairman thanked Mr Richards for an interesting and informative presentation and thanked him for his contribution to the Trust to date.

11. **Lead Governor's report**

Lead Governor (LG) presented her report. She thanked the Trust on behalf of the governors for inviting their involvement in the recent and forthcoming interview process for the Chief Executive, Company Secretary and System Leader posts.

LG drew members attention to the following recommendations contained in her report:

- 3.1 Governors to agree to the further work that is required in the development of the skills audit.
- 3.2 Governors to please feedback further changes which may be required to the Communications Log.
- 3.3 Governors to provide any items of interest they would like to be considered for the next development session taking place on 14 November.

The above recommendations were approved by the CoG

There were no further questions on the Lead Governor's report, which was noted by the CoG.

11.1 **Constituency reports**

The notes of the following meetings were received by the CoG - 10 July 2018 South Hams and 4 September 2018 – Torbay and there were no further questions from

governors.

12. **Quality and Compliance Committee Report**

LG presented a verbal report of the meeting which had taken place on 19 September 2018, and advised the CoG that the minutes of the meeting would be circulated shortly. She reported that there had been good attendance and some good feedback had been obtained from Governor Observer reports.

Pat Harris, Chair of Torbay Healthwatch, was now a valuable member of the committee and. a helpful report had been received from Claire Burton, the Trust's compliance Lead. The terms of reference were being reviewed and consideration given to the annual committee self-assessment.

Members noted the contents of the report provided

13. **Membership Group report**

L Hookings (LH), Chair of Membership Group reported on the meeting which had taken place on 7 August 2018 – the notes of this meeting were included together with the notes of 8 May meeting.

At the August meeting members had discussed the availability of promotional material and how best to communicate with members for whom the Trust did not hold email addresses. Anna Pryor had volunteered to help ensure that membership cards are left at all locations throughout the trust.

LH reported on various engagement activities undertaken by members of the Group, which had resulted to date in the recruitment of 79 new members. South Devon College students were working with members of the Group to design a new membership recruitment poster and it was hoped to hold a mini Medicines for Members event at the college, targeted at Health and Wellbeing students initially and to include an intensive b]drive to recruit younger members. Schools and leisure centres were also being approached to widen the membership base.

DECD offered to work with the Membership Group and LH thanked DECD for her offer.

The CoG noted the contents of the Membership Group report.

14. **Annual Audit letter**

Members approved the contents of the Annual Audit letter form the Trust's external Auditors, which was being taken to the Annual Members Meeting being held later in the day.

Details of the next meeting

12 December 2018, 2 pm – 4 pm, Anna Dart Lecture Theatre, Horizon Centre, Torbay Hospital.

Cover sheet for a report to the Trust Board					
Report title: Chief Executive's Business Update				Date: 5 Dec 2018	
Report sponsor	Chief Executive				
Report author	Director of Strategy and Improvement Joint Heads of Strategic Communications				
Report provenance	Report reviewed by Executive Directors (27 November)				
Confidentiality	Public				
Report summary	An update from the Chief Executive of key corporate, local system and national initiatives and developments since the last meeting of the board.				
Purpose (choose 1 only)	Note <input type="checkbox"/>	Information <input type="checkbox"/>	Review <input checked="" type="checkbox"/>	Decision <input type="checkbox"/>	Approve <input type="checkbox"/>
Recommendation	The Board is recommended to review the report and consider implications on the Trust's strategy and delivery plans.				
Summary of key elements					
Strategic context	Strategic/corporate objectives this report aims to support: <ul style="list-style-type: none"> • Safe, quality care and best experience • Improved wellbeing through partnership • Valuing our workforce • Well-led 				
Dependencies and risk	This report is set in the context of the following corporate risks: <ul style="list-style-type: none"> • Available capital resources are insufficient to fund high risk/high priority infrastructure/equipment requirements/IT Infrastructure and IT systems. • Failure to achieve key performance standards. • Inability to recruit/retain staff in sufficient number/quality to maintain service provision. • Lack of available Care Home/Domiciliary Care capacity of the right specification/ quality. • Failure to achieve financial plan. • Delayed delivery of integrated care organisation (ICO) care model. 				
Summary of scrutiny	This report has been reviewed by Executive Directors (27 November)				
Stakeholder engagement	This report is shared widely and forms the basis for Trust Talk, is published on the intranet and internet and is shared with Governors, MPs and other stakeholders				
Other standards affected	Nil				
Legal considerations	None				

Report title: Chief Executive's Business Update		Date: 5 Dec 2018
Report sponsor	Chief Executive	
Report authors	Director of Strategy and Improvement Joint Heads of Strategic Communications	

1 Trust key issues and developments update

Key issues and developments to draw to the attention of the Board since the last Board of Directors meeting held on 7 November are as follows:

1.1 Safe Care, Best Experience

Winter readiness

The winter of 2017/18 was exceptionally challenging for a whole host of reasons, including unprecedented severe weather, high levels of flu and norovirus and capacity issues right across our system. We managed to keep urgent and emergency services running safely – but the impact on staff was unacceptably high, and we need this year to be different.

Our starting point was carrying out a survey of staff to make sure we learned all the lessons we could from last winter, with a series of debriefs in April and May. We then did a 'system reset' in June, looking to make improvements in patient flow across all our services from ED to discharge and support at home. As a result of this listening and learning, we have invested £2.4 million in our winter plan to provide safer staffing levels on the wards, additional physicians, as well as senior nurse leadership in ED and the medical workforce.

Already, we are experiencing challenges across the system, from recruiting enough domiciliary care workers to provide the support people need at home, to dealing with high numbers of very sick people in our ED department. We are putting in place a wide range of measures to help us create capacity and resilience in the coming months, including:

- consolidating our admission avoidance work at the front door through a new Joint Emergency Team, bringing together the Rapid Assessment and Discharge Service with acute therapists, social care support and rapid response.
- expanding the waiting area and creating four new treatment areas in AMU for people who are not going to need a hospital stay overnight
- enhancing our severe weather plans and recruiting more volunteer 4x4 drivers
- running a four month test of change on a new acute assessment model, which involves:
 - developing an Acute Assessment Unit (in EAU3), enabling us to provide 24/7 assessment with consultant cover from 8am to 6pm – and potentially extending to 9pm three days a week)
 - changing EAU4 to a short-stay medical ward, to support patients who are likely to need a stay of less than 48 hours
 - opening Warrington as an 18-bedded general medical ward with dedicated consultant cover over the winter

- reducing elective activity from mid-December through January to focus on our emergency and urgent pathways and having some protected beds to ensure we continue with planned elective work

Comment:

We know that there is likely to be considerable pressure this winter. In view of this we have planned as thoroughly as possible to ensure we are as prepared as we can be. Staff at all levels have been involved throughout and we believe we have a robust plan in place.

Theatres

The reliability of the air management system in two of our theatres at Torbay Hospital has caused concerns. As a result of a detailed inspection, we have closed these two theatres whilst we commission new air handling equipment. Taking two theatres out of action means we have had to re-schedule or cancel operations for some people at very short notice. In addition we have had to temporarily close a third theatre for about a week due to a technical issue. We are directly contacting all patients affected by this. We are prioritising surgery for those with the highest clinical priority and for people who have waited the longest. We appreciate that this will also cause more pressure on staff and want to assure the Board we are doing everything we can to identify alternative theatre capacity, so that we can continue providing the same high quality and timely care that we know people rightly expect of us.

The actions we are progressing to enable us to minimise any further delays, distress and inconvenience for our patients include:

- working with commissioners to offer some orthopaedic patients the choice of having their surgery at Mount Stuart
- expanding our day case surgery capacity by running extended theatre lists
- investigating the possibility of a mobile theatre on site
- investing in a new air handling unit which will be located in theatre B and allow us to re-open theatre A (likely timescale up to six months)
- pursuing a range of in-sourcing and out-sourcing options with other providers.

Comment:

I wish to thank our community for their understanding and patience and front line teams, partners, regulators for their support as we strive to continue to offer the level and quality of service that local people value so highly. As well as short term solutions, critical infrastructure failure of this scale requires significant investment to secure long term mitigation. The risk of theatre failure has been signalled on the risk register for some time. Directors submitted a theatres business case application for national capital allocation and are awaiting a decision. Further detail is included in the Director of Estates report.

1.2 Well Led

Month 7 - Performance against the national NHS I Single Oversight Framework:

In October, whilst performance improved against most indicators compared to the previous month, the Trust did not meet the following national performance standards or agreed planned improvement trajectories:

- **Urgent care 4 hour standard** – Urgent care performance improved in October with the % of people discharged or admitted within 4 hours of arrival at Accident and Emergency Departments (ED) increasing to 85.6% from 83.8% last month. However this was below the 95% national standard and 92.7% operational plan monthly trajectory
- **Referral to Treatment times (RTT)** – RTT performance improved in October with the proportion of people waiting less than 18 weeks increasing to 82.3% from 81% last month. However this was below operational plan trajectory of 82.7% and National standard of 92%. The total number of incomplete pathways (waiting for treatment) is reducing with a fall of 1.0 % since April 2018 in line with our operational plan commitment to maintain or reduce total number waiting.
- **Cancer waiting times** – 62 day urgent referral to treatment - Forecast performance is below the 85% national standard at 74.3%, however above our agreed trajectory of improvement for October (66%) with a plan to achieve the National standard from January 2019.
- **Diagnostic waiting times** – The diagnostics standard was not met with 9.8% of patients waiting over 6 weeks against the standard of 1%. This is deterioration over last month and our worst position since April 2018

October saw the 5th consecutive month that the Trust achieved its target against its >52wk wait trajectory and November would have seen the second consecutive month where we would have achieved a month on month reduction. The Trusts overall RTT performance against the 92% Incompletes access target also saw a significant improvement with a month end position of 82.36% against a trajectory of 82.74%. As expected due to the improvements in the >52wk position and aggregate RTT performance we have also seen our >40wk waiters reduce to its lowest level since July 18.

Month 7 performance against 2018/19 plan:

- **Overall financial position:** The financial position at 31 October 2018 was a £8.33m deficit, which is £1.19m behind the budgeted position.
- **CIP savings delivery position:** The savings position for month 7 is reported as a £1.4m surplus against a £2.0m target. There is a cumulative surplus of £2.0m against a £7.8m target.
- **Forecast:** The forecast continues, at this stage, to assume delivery of the full CIP target, and the Trust is working hard to identify further improvement schemes of £5.9m to meet the current shortfall in identified projects and to move Amber and Red schemes to Green (£3.3m at outline plan stage). The forecast will deteriorate in future months to the extent that this is unsuccessful and if operational risks are not mitigated further. Operational pressures will need to be addressed to maintain this position; key pressures include agency costs (reflecting staff shortages, RTT and emergency system delivery), CHC, ASC, and more recently the domiciliary care provision and Theatre failures.

Comment:

The continued challenges in delivering key access targets are a cause for concern. We know this has an impact on individual patients and are prioritising clinical need, quality and safety. The Board will want further assurance that plans will deliver and that individual patient safety is not being compromised. The Interim Chief Operating Officer will update separately on the immediate impact of theatre failures on performance and financial forecasts and the development of options to address this loss of operating capacity.

1.3 Valuing our Workforce, Paid and Unpaid

The Staff Heroes Awards

The winners of the November Staff Heroes awards celebrated their success by attending a presentation ceremony on 13 November 2018 in the Bayview Restaurant at Torbay Hospital. Certificates were presented to the winners by members of the Board.

Comment:

Ensuring we have a good system in place to award staff for exceptional work is extremely important. The Staff Heroes Awards are an important way of recognising the hard work and commitment of our people and publicly saying a big thank you to them for going that extra mile. It was particularly gratifying to see people from front line teams and support services nominated for awards from grateful patients and their families, team leaders and colleagues from other teams. We are reviewing the scheme so we can link it more closely to our vision and values. As part of this review we aim to have not just a regular celebration but also a bigger annual celebration.

Our Journey

At the beginning of November we launched our staff engagement programme 'Our Journey'. The programme aims to engage staff right across the Trust in our vision of care. It looks at what we have achieved and encourages our people to see how their work supports the continuation of our journey towards our vision of caring for more people in their homes and communities.

The programme encourages teams to have conversations around their plans and successes and is supported by a suite of materials which include posters, an animation and questions cards. The conversations will lead teams to develop further plans of work in support of the delivery of this vision.



'See Something Say Something' anonymous green boxes launched

Sometimes people find it difficult to speak up about issues affecting patient safety or staff experience. They may not know who to speak up to. They may feel that anything they do raise might not be taken seriously, or that nothing will be done as a result. When there are obstacles to speaking up patients, staff and the organisation itself can suffer because the right actions and learning are not put into place. Now every NHS trust and Foundation trust in England has a Freedom to Speak Up Guardian and last year they handled over 6,700 cases brought to them by NHS workers. Here at Torbay

and South Devon we are launching See Something Say Something Anonymous green boxes. If any member of staff has an issue that is affecting them, and they feel they cannot speak directly to a Guardian or their line manager then they are encouraged to post their concern in one of these green boxes; they are located at various locations across acute and community sites. The boxes will initially be emptied by one of the Guardians on a fortnightly basis with any themes and issues raised published on ICON.

Comment:

The Trust has a number of different ways of supporting staff to raise concerns. An extremely important way is through the Freedom to Speak Up Guardians but sometimes staff prefer to raise a concern completely anonymously and the boxes are designed to support them to be able to do this.

National recognition and influence:

- **British Psychological Society, Obesity Task Force:** Our Lead Clinical Psychologist for the Trust's Specialist Weight Management Service, Dr Ian McKenna, provides leadership nationally to the British Psychological Society (BPS), Obesity Task Force. This task force was commissioned to write a document to present to Government to highlight the psychological aspects of the national obesity crisis. This aims to look at the complexities of obesity and how psychological factors play key roles in development and maintenance of obesity. Currently there is insufficient NICE guidance for Government and Clinical Commissioning Groups on how psychological interventions should be incorporated into treatments at all levels. This has resulted in variation in the provision of psychological services in obesity treatment nationally, inadequate care for individuals living with obesity, reduction in sustainable weight loss, and increased healthcare and economic costs. On 14 November, the BPS Obesity Task Force presented their initial briefing document to the All-Party Parliamentary Group: *Understanding obesity: The psychological dimensions of a public health crisis*. The goal was to highlight the need for Government to address the psychological causal and maintenance factors of obesity, and therefore influence future obesity policies and commissioning for population health, through to primary care, specialist weight management, and bariatric surgery services.
- **National research recognition for Trust podiatrist:** Trust podiatrist, Richard Collings, has been named as one of only 13 Allied Health Profession (AHP) research champions newly appointed by the National Institute for Health Research (NIHR) and Council for Allied Health Professions Research. AHP Research Champions will serve as ambassadors and champion the research work of AHPs, encouraging more AHPs to be aware of and get involved in health and social care research and the work of the NIHR for the benefit of patients. Richard who has worked at Torbay for 11 years as a podiatrist has had a long interest and involvement with research, currently working part time clinically and following a NIHR doctoral studentship, studying part time for his PhD with the University of Plymouth researching into offloading for ulcer prevention for people with diabetes (INSTEP-Insoles to Ease Pressure).
- **Recruitment drive at National Conference:** The Medical Directorate had a stand at the Acute & General Medicine Conference on 20th & 21st November at Excel Arena in London to promote the organisation and region as a place for

clinicians to come and work. Dr Kate Lissett, Consultant in Diabetes and Endocrinology and Clinical Director for Medicine supported by managers Lesley Wade and Sara Dorrans were available across the two days of the conference to discuss current opportunities at the Trust. Dr Maria Saunders, Consultant in Acute Medicine & Gastroenterologist, Dr Catherine Blakemore, Consultant Cardiologist and Dr Gareth Griggs, Consultant Geriatrician also travelled up to talk to doctors including registrars and consultants who might consider coming to work in Torbay and to give more specialty specific insights. There was a lot of interest in the stand and several people sought us out because they had heard of Torbay and South Devon and our work in integration. Being at the conference gave us further opportunity to discuss with people our model of care and aspirations. Several contacts were made across a range of specialties and whilst there the team took the opportunity to visit the stands of other Trusts and hear about their particular challenges and approaches to recruitment.

Remembrance Day commemoration

On Sunday 11 November 2018 we marked Remembrance Sunday and 100 years since Armistice Day. Each year we have held a Sunday morning service in the chapel followed by a Remembrance Day silence - this year it was decided to move to a more public area. A short commemoration was held in Torbay Hospital's main entrance at 10.45am, led by Co-ordinating Chaplain Martin Manley. Trust Chairman, Sir Richard Ibbotson then laid a wreath, and the customary two-minute silence was observed at 11am.

I would like to thank all who supported this moving commemoration – the main entrance is quite a busy area, so a few moments of stillness was particularly special.

2 Chief Executive Engagement: November

Internal	External
<ul style="list-style-type: none"> • Staff Side • Medical Staff Committee • Trust Talks • Freedom to Speak Up Guardians • Staff Engagement Session – Dartmouth Clinic • Staff Heroes Event • Torbay Hospital League of Friends 	<ul style="list-style-type: none"> • STP Chief Executive's Meeting • STP Programme Delivery Executive Group • Meeting with the Interim Accountable Officer NEW Devon CCG/ South Devon and Torbay CCG • Delivery and Improvement Director, NHSI SW • GP SPCC Meeting • Sarah Wollaston MP • Exec to Exec with Devon County Council • Mayor, Torbay Council • Principal, South Devon College • GP Locality Leads <ul style="list-style-type: none"> - Torquay - Paignton and Brixham - Coastal

3 Local Health and Care Economy Developments

3.1 Service Developments/Changes

Children's, Young People's and Family Services contract award

The governing bodies of Devon's clinical commissioning groups met on Thursday, 29 November and agreed to the award of the Devon contract to provide services to children, young people and their families to the Devon Children and Families Alliance led by the Trust in partnership with all NHS providers in Devon and the Plymouth contract to Livewell Southwest. The final stages of the contract process will now be concluded.

We were named preferred bidder for the contract in September, and have been working with commissioners to provide further detail since then to provide assurance to enable them to make a final decision. Following contract award there will be a 10 day stand still period before final contract negotiations can conclude. The contract is due to start on 1 April, 2019 and will run for seven years, with a possible three-year extension.

I know that everyone working in those areas is excited to be part of this opportunity to make these services the best they can be, improving and transforming lives.

Comment:

We are delighted that commissioners recognize that our shared vision for the future of services for children, young people and families in Devon will deliver their ambitious outcomes. This has been a fantastic example of true partnership working across Devon to achieve this shared vision. Everyone has worked with dedication, commitment and shared purpose. Whilst we continue to lead the partnership in discussions on the final stages of the contract detail including completing due diligence, we are also working on mobilisation to ensure that we have everything in place for a safe transfer when we take over the contract on 1 April 2019. Final recommendations to Boards to sign the contract will be presented in February and March with the Trust Board signing as prime provider.

Proposals for co-location of services in Teignmouth

We are continuing to work with the Clinical Commissioning Group towards the shared vision for Teignmouth. Our aim is that there is a co-location of the Health and Wellbeing team and the three local GP practices on one site along with voluntary services and community clinics with other more specialist services also accessible within the locality. The Clinical Commissioning Group supported by this Trust has been continuing engagement around potential options. Discussions with NHS England are also taking place with a view to launching a public consultation of the agreed options early 2019.

Dartmouth Health and Wellbeing Centre

In Dartmouth we continue to engage with representative community groups. A new collaborative working group has been established to work on the planned new Health and Wellbeing Centre. Its first meeting was on 29 October 2018, independently facilitated by Healthwatch Devon. Membership includes representatives of the CCG, Trust, Devon County Council, Dartmouth Area Health Action Group, Dartmouth Medical Practice, Dartmouth Medical Practice PPG, Dartmouth Caring and League of Friends of Dartmouth and District Healthcare.

At the meeting it was agreed that the Working Group's main purpose was to:

- determine the best site for the proposed Health and Wellbeing Centre
- discuss the provision of intermediate care beds (to deliver on one of the outcomes of the formal 2016 CCG consultation process)

It was made clear that the CCG's decision to close inpatient beds further to the formal consultation process would not be changed. The meeting also agreed the criteria for selecting the site for the new-build facility from the shortlist of two locations:

- A site owned by South Hams District Council near the park and ride
- The former Dartmouth Hospital site

The group continues to meet and will work with the Trust to ensure that the new Health and Wellbeing Centre meets the needs of the local community.

In the meantime, a full range of health and wellbeing services is being offered from Dartmouth Clinic as an interim Health And Wellbeing Centre. Building work to create additional physiotherapy space at the clinic is due to be complete by Christmas.

IVF eligibility and funding

NICE guidance recommends access to three cycles of IVF. However the peninsula-wide assisted conception policy, developed by NEW Devon, South Devon and Torbay and Kernow CCGs with clinicians and fertility experts to ensure people can access a range of treatments states eligible couples can receive just one cycle of IVF (In Vitro treatment) and up to four cycles of IUI (Intrauterine insemination). The CCGs have said that this is to give fair opportunity to treatment within the available budget.

Across England, other CCGs which buy healthcare have to make similar decisions based on their population's needs. Of the 208 CCGs in England, only 24 are able to offer three full cycles of IVF. There are a further 50 CCGs which offer two cycles, but the majority of CCGs (127 CCGs), including NHS Kernow, are only able to fund one cycle. There are seven CCGs that have stopped funding IVF services altogether and our understanding is that more that are considering withdrawing funding.

3.2 Partner and partnership updates

Devon Sustainability and Transformation Partnership

Feedback from stocktake with NHS England and NHS Improvement

Each of the STPs across England has regular stocktakes with regulators, NHS England and NHS Improvement. Leaders from the Devon STP met regulators on 8 November 2018. The meeting covered progress against STP priorities, successes, challenges and the support required from regulators. A number of successes were highlighted. For example:

- Progress on finances has seen successive savings of £100 million in 2016/17; and £158 million in 2017/18.
- Good integration in practice:
 - NDHT and RD&E management arrangement was working well.

- Mutual support across four Trusts, and commitment to further develop model of lateral Clinical Service Delivery Networks.
- Local provider partnership has been successful bidder for future Children's Services.
- Collaborative approach to system planning including on capital, technology and leadership bids has paid off.
- Across Devon, 9 out of 10 adult social care providers rated as 'outstanding' or 'good', and all GP Practices also rated as 'outstanding' or 'good'.

However, there was real challenge by the regulators on some of the financial and service performance issues and the system was asked to focus on making rapid improvements.

Developing a workforce strategy for Devon

The workforce strategy developed for the Devon STP sets out the challenges and the direction. There are five key areas of priority:

- i. *Right person, right skills, right place, right time*
- ii. *Growing Devon's future workforce*
- iii. *Effective use of a flexible workforce*
- iv. *Growing Devon's strategic partnerships with local and national education providers*
- v. *The health and social care sector is the best place to work in Devon*

More detail on the latest STP developments can be read in the Director of Strategy and Improvement's STP Update Board paper

Devon CCGs' developments

Update on CCGs' merger

The two Devon CCGs are continuing to discuss their proposed merger with GPs. This follows a poll which asked GP members whether they supported the merger. The results showed an overall support for the merger but in South Devon and Torbay 12 practices voted for merger whilst 14 voted against and two abstained. The CCGs are now taking the time to meet up with local GP practices in South Devon and Torbay to listen to their views. In parallel the CCG is keeping the door open to the possibility of merger by working with NHS England on the next steps.

Councils updates

Torbay Council budget

The council's public consultation on the proposed budget for 2019/20 continues until 14 December. As a key partner and a major commissioner the Council's budget plans are of huge relevance for the Trust. The Board will want to agree a formal response to the consultation.

Torbay Council housing survey – Information from Torbay Community Development Trust

Since the Big Vision event in January 2018, the Community Development Trust (TCDT) has been working with 14 older people who volunteered as a working party to develop

an Assembly to give people over 50 a platform to have their voices heard on matters important to them. Through this work, TCDT has been asked to help collect the views and aspirations of people over 50 in relation to housing needs in later life. Through written and online surveys, as well as focus groups, they want people to tell them what they think is important concerning properties in Torbay. It could be what they consider to be necessities in a home, what would inspire someone to live in a particular area, what support they think is key to making these facilities welcoming and useable to all.

As an active partner of Torbay's Ageing Well partnership and supporter of the Torbay Older Peoples Assembly the Trust welcomes the housing survey and encourages people to take part. The online version of the housing survey can be found at the following link: <https://ageingwelltorbay.us18.list-manage.com/track/click?u=b84fca88864ba7a1d240c45d7&id=d8ba024fea&e=1c9799541b> The deadline for responses is 14 December.

Devon County Council - A severe shortage of care workers

The Council has reported that care providers across Devon are currently reporting over 150 job vacancies, with particular problems with recruitment in Exeter and South Devon, making it increasingly difficult for the Council to arrange the right personal support and home care packages for everyone who needs them. Demand for care and support in people's homes is already at an unprecedented level for the time of year and with winter around the corner, there are concerns that demand for care packages will rise further to outstrip supply leaving the health and social care system struggling to cope.

Home care provision in Torbay: Mears plc

CQC Report on Mears Domiciliary Care Provision

Providing good quality domiciliary care is an important part of supporting people to be able to remain living in their own homes. In 2015 we began a five year contract with Mears plc for the provision of home care for people in Torbay. Most of this provision has been through a range of other agencies which Mears co-ordinate and provide a quality assurance function.

Mears have also provided some care directly. Recently they took over the provision of care following one agency in South Devon being rated by CQC as inadequate. At the time Mears assured us and CQC that they would be able to do this safely however it became apparent that there were a number of issues. This led to some complaints to CQC who inspected the service in early October. The inspection report published on 23 November rates the service as inadequate and contain many issues around missed and late appointments.

Comment:

We are currently working very closely with Mears to ensure they can continue to provide a safe service and are considering how this is managed in the longer term. Mears, with our support, are contacting all their clients to make them aware of the report and to reassure them that they will receive good quality care. They are also discussing the report with their staff to reassure them too. It is important to note that the report does not criticise the front line staff but more the leadership and systems and processes. We are grateful to all our staff that are supporting care and to care agencies at this time whose staff provide an invaluable service. All other care agencies are not impacted.

4 National Developments and Publications

Details of the main national developments and publications since the Board meeting on 7 November have been circulated to Directors through the weekly developments update briefings. There have been a number of items of particular note that I wish to draw to the attention of the Board as follows:

4.1 Government

NHS prevention strategy

Under plans to improve disease prevention to ease pressure on the NHS, health advice will be tailored to class, lifestyle, location and even genetic make-up using people's digital footprints. The health secretary Matt Hancock wants public health bodies to use personal data to target advice on alcohol, diet and exercise. He is urging employers to take more responsibility for workers' physical and mental well-being by offering fresh fruit, bike loans and counselling. More detail is promised next year but a "vision document" published in November highlights so-called "predictive prevention" as a major new element of public health. The announcement signals that prevention will be a key focus of the soon to be published NHS Long Term Plan.

Aim to increase Artificial Intelligence across NHS

Health Secretary Matt Hancock has pledged to increase the use of Artificial Intelligence (AI) across the NHS, with new Department for Health and Social Care figures showing that AI could cut GPs' and nurses' workload by a third. One of the most advanced AI health projects currently in use is taking place at Moorfields Eye Hospital in London, where doctors have partnered with DeepMind to create a system that examines patients' scans to create an algorithm to diagnose early signs of the eye diseases age-related macular degeneration and diabetic retinopathy.

4.2 NHS England and NHS Improvement

Working together to help residents stay healthy: NHS planning update

In June the Government asked the NHS to develop a long-term plan that described the future for the health service in exchange for a five-year funding settlement. Over the past four months, NHS England and NHS Improvement have set up a number of working groups – comprising local and national health and care system leaders, clinical experts and patient/voluntary sector representatives – to engage with partners on developing proposals.

Over the past two years there has been a major push towards a more integrated health and social care system with a greater focus on prevention to ensure people stay healthy for as long as possible and get joined up effective care when needed. The partnership between the NHS and local government and communities has never been more important. The details are still being worked on but there will be a small number of priority areas – mental health services, cancer care, improvement to stroke and heart attack outcomes, children's services, integrated care for older people, and a drive to reduce inequalities.

Next steps:

- **Early December 2018:** The Long-Term Plan for the NHS will be published.
- **December 2018:** NHS England will publish a five-year funding settlement for every local area, giving a greater degree of financial certainty.

- **January – summer 2019:** Using this financial settlement, NHS organisations, local councils and the voluntary sector work together to develop a local strategy, tailored for their particular circumstances, that will help to deliver on the aims of the national long-term plan.

Comment:

Integration work that has already been undertaken locally gives us a strong foundation to accelerate the development of services tailored to best suit local needs. Our close collaboration with Torbay Council and also with Devon County Council puts us well ahead of most in integration. The next part of our journey is extremely important in ensuring our partnership provides the best possible joined up services to support local people live their lives as well as possible.

New NHS England and Improvement structure

The two organisations recently issued their proposed joint executive senior manager structures to staff for consultation. Proposals include a single NHS executive group top team, seven new regions, and 11 national corporate teams.

NHS England and NHS Improvement will lose nearly 50 senior manager posts as they combine their structures. The consultation document issued to both organisations’ staff revealed whole time equivalent posts for executive senior managers would reduce from 373.8 to 325.2. This would cut the overall cost for this tier from £57m to £51.2m – a 10% reduction. Within roles labelled as “admin”, a cut of £8m is planned (17% of the “admin” baseline), while the budget for “programme” roles is due to increase by £2m to £13m (18%). Overall, the two organisations are planning to reduce their baseline administration costs by 15% by 2020-21, with changes at more junior levels taking place in 2019-20.

Subsidiary companies

New guidance to ensure foundation trusts are not creating subsidiary companies if plans are considered too “high-risk” is being issued. A number of trusts have set up subsidiary companies in the last few years, often to deliver savings from non-clinical services and in some cases from VAT. This has led to concerns from unions that the NHS is creating a “two-tier workforce”. In August, NHSI announced a consultation into the use of subsidiary companies after the Department of Health and Social Care said it wanted to strengthen its oversight of the companies. Previously, FTs could set up a subsidiary company on their own, while trusts needed approval from regulators.

In the new guidance, NHSI said all trusts would need to submit business cases for setting up subsidiary companies or making “material changes” to existing companies. These business cases will be reviewed by NHSI, which will take between three and six weeks. If the regulator rates those plans as “red”, it will use its regulatory powers to stop the plan – the guidance states. “Green” or “amber” ratings will allow the trust to continue with its proposals, although this could be subject to “additional oversight and monitoring of transaction-specific risks post transaction”.

Comment:

As a Foundation Trust we have used our ability to create subsidiaries carefully and always with strong business cases. We have two subsidiaries South Devon Developments Ltd which was a strong business case that demonstrated strong clinical benefits and Health and Care Innovations LLP which is a partnership with Rocklands Media Ltd and again had a good business case for income generation from likeminded

parties wanting to gain patient benefits from digital innovation solutions. The business cases for both were presented to the Finance Committee and also to the Board.

4.3 Other bodies

Royal College of Surgeons - Devices and implants – concerns raised about safety

Concern has been raised in the media after a study which was performed by the International Consortium of Investigative Journalists over 36 countries that suggests that controls over the licencing of medical devices and implants may be less stringent than would be expected. It is unclear to what extent this may be having impact in the UK. In response The Royal College of Surgeons is asking for urgent and drastic changes to the rules around medical devices, such as pacemakers to protect patients. It has said it wants a register of every device in every patient set up so doctors know if new innovations are causing harm. The government has said it would look at what changes may be required. Medical devices range from implanted contraceptives to hip replacements to pacemakers in the heart.

Comment:

The Medical Director will lead a detailed review of the medical devices used in Trust services. Many will be well-established with a proven safety record. Concerns about some others are already recognised and checks and controls in place. Any cause for concern raised by the article will be communicated to relevant staff and of course to patients who may be affected. It will be important to be able to offer advice and reassurance to patients where the benefits of their devices are clear. It is important to note that controls are in place through procurement of devices that meet Medicines and Healthcare products Regulatory Agency (MHRA) requirements. We also have a committee, joint with the CCG, called Joint Clinical Effectiveness Group through which permission to use any new device is sought. Similar controls are in place for implants through the CCG drugs and therapeutics committees.

New chairman appointed to Health Education England

Sir David Behan has been appointed chair of Health Education England, it has been announced. Sir David will chair HEE for three years from 1 December 2018, the Department of Health and Social Care has confirmed. Sir David announced he was stepping down as chief executive of the Care Quality Commission early this year after six years leading the regulator.

5 **Local Media Update**

News releases and campaigns:

- CAMHS team win national award
- Families invited to a weekend of events in memory of babies
- Remembrance Sunday commemoration
- Events for carers as part of Carers Rights day
- Encouragement for people to attend the HOPE programme
- Seeking lifestyles volunteers
- Increasing the uptake of flu jabs particularly for our staff
- World Radiography Day

- Oral cancer screening
- Give HIV the Finger – raising awareness of testing
- Coastal Team and NHS Quicker finalists at the HSJ awards

6 Recommendation

The Board is recommended to **review** the report and **consider** implications on the Trust's strategy and delivery plans.

AW/JG/CF
27 November 2018

Cover sheet and summary for a report to the Council of Governors dated 12 December 2018					
Company Secretary's Report - Corporate Governance					12 December 2018
Agenda item	07				
Report sponsor	Chairman				
Report author	Interim Company Secretary				
Report provenance	Direct				
Confidentiality	Public				
Report summary					
Purpose	Note <input checked="" type="checkbox"/>	Information <input type="checkbox"/>	Review <input type="checkbox"/>	Decision <input type="checkbox"/>	Approve <input type="checkbox"/>
Recommendation	The Council of Governors is advised to note the content of this report.				
Summary of key elements					
Purpose	This report is to brief the Council of Governors and those members of the public present on the top-level reviews and actions taken by the Interim Company Secretary during the 11 months to date. Details of other actions were reported at previous meetings of the CoG, the Board of Directors, and Board committees.				
Strategic context	<p>This report takes into consideration all four of the Trust's corporate objectives:</p> <ul style="list-style-type: none"> • Safe, quality care and best experience • Improved wellbeing through partnership • Valuing our workforce • Well-led 				
Dependencies and risk	<p>The Trust Board of Directors' ability to demonstrate compliance with applicable legislation, the NHS Constitution, the Trusts FT Provider License, the FT Constitution, Standing Orders, Standing Financial Instructions, the Monitor FT Code of Governance, and the Single Operating Framework depends on the implementation and on-going maintenance of adequate provisions for corporate governance, compliance, internal control, and risk management.</p> <p>There is a significant risk of Regulatory intervention and reputational damage under any circumstance where these provisions are seen to be inadequate, inappropriate, or are at risk of failing.</p>				
Summary of scrutiny	Not applicable				
Stakeholder engagement	The primary stakeholder for this report is the Trust Board of Directors. The secondary stakeholder is the Council of Governors. Contents of this report may be of interest to other stakeholders, including the public and strategic partners.				
Other standards affected	<p>This report relates to the Trust's compliance with:</p> <ul style="list-style-type: none"> • NHS Constitution, the Trusts FT Provider License, the FT Constitution, Standing Orders, Standing Financial Instructions, the Monitor FT Code of Governance, the Single Operating Framework, NHS Resolution (was NHSLA) and Care Quality Commission requirements. 				
Legal considerations	The Board of Directors and Council of Governors are required to have				

Company Secretary's Report

regard to the NHS Constitution and to discharge the duties set out in legislation to act in the interest of the Trust. The Board has an obligation to achieve demonstrable, evidenced compliance with the standards set out above.

There is no assessed negative impact resulting from this report on any inclusion, equality, or diversity matters related to race, religion, age, belief, gender, disability, or other protected characteristic.

DRAFT

1. INTRODUCTION

1.1 This report is to brief the Council of Governors on the status of objectives and actions assigned to the Interim Company Secretary at the end of his interim tenure.

2. OBJECTIVES

2.1 The objectives agreed between the Chairman, Chief Executive, and Company Secretary were to:

- Conduct a high-level review of the Corporate Governance provisions in place at the Trust;
- Make recommendations to enhance the performance of the Board of Directors and the Council of Governors;
- Assess options for discharging the role and function of the Company Secretary and associated duties and resources;
- Provide governance advice regarding Torbay Pharmaceuticals (TP); and,
- Undertake all other duties of the Company Secretary.

2.2 Each of the objectives has been achieved, along with a broader set of actions and activities by the Interim Company Secretary. Where there are ongoing matters, these have been referred to the substantive Company Secretary designate to manage through to completion.

3. SAMPLE OF ACTIONS

3.1 The following table sets out a sample of the actions and revisions arising for the high-level review of governance conducted. It is not exhaustive but serves to demonstrate the breadth and volume of matters addressed through the high-level review.

#	Item	Category	Status
1	Issue formal guidance on Remuneration and Terms of Service for Chairman and Non-executive Directors	Corporate Governance	Adopted
2	Review and revise Terms of Reference for the Audit Committee	Corporate Governance	Adopted
3	Review and revise Terms of Reference for Nominations and Remuneration Committee of NEDs	Corporate Governance	Adopted
4	Provide commercial and governance advice regarding Torbay Pharmaceuticals	Corporate Governance	Ongoing
5	Issue formal guidance on Appraisal of Chairman and Non-executive Directors	Corporate Governance	Adopted
6	Develop and introduce Log of Governors' Communications	Corporate Governance	Adopted
7	Revise CoG Nominations and Remuneration Committees. Amalgamate and rewrite Terms of Reference, reconstitute	Corporate Governance	Adopted
8	Amend FT Constitution to reflect revised Committee arrangements	Corporate Governance	Adopted
9	Review and refresh Board and Committee cover sheet design in accordance with revised BAF	Corporate Governance	Adopted

Company Secretary's Report - December 2018

#	Item	Category	Status
10	Formulate Chairman's Objectives	Corporate Governance	Adopted
11	Review Chairman and NED remuneration	Corporate Governance	Adopted
12	Brief the CQC on governance and compliance arrangements during CQC Well-led inspection	Corporate Governance	Completed
13	Liaise with NHSE and NHSI on legal matters	Corporate Governance	Completed
14	Manage CQC notifications, absence and change of Nominated Individual	Corporate Governance	Adopted
15	Project manage compilation of the Annual Report and Accounts 2017/2018	Corporate Governance	Completed
16	Compile and edit the Annual Report and Accounts 2017/2018	Corporate Governance	Completed
17	Conduct high-level retrospective assessment of compliance with Monitor NHS Foundation Trust Code of Governance	Corporate Governance	Completed
18	Provide advice and guidance on the governance of the Trust's commercial activities, and establishing the Commercial Committee	Corporate Governance	Completed
19	Facilitate Council of Governors' Annual Self-assessment	Corporate Governance	Completed
20	Facilitate Board of Directors' Annual Self-assessment	Corporate Governance	Completed
21	Review and revise Terms of Reference of the Quality Assurance Committee	Corporate Governance	Completed
22	Review and revise Risk Management Strategy	Corporate Governance	Completed
23	Review and revise CoG Code of Conduct	Corporate Governance	Completed
24	Review and revise Member Recruitment flyer and forms	Corporate Governance	Completed
25	Assess and recommend options for discharging the role and function of the Corporate Secretariat - Options Appraisal	Corporate Governance	Completed
26	Write Job Description and Person Specification for permanent Company Secretary to include: Secretariat Services, Corporate Governance, Risk Oversight, Internal Audit, Data Compliance, Communications, Membership Office, Legal Services. Provide Roles, Function, Responsibilities, JDs.	Corporate Governance	Completed

Company Secretary's Report - December 2018

#	Item	Category	Status
27	Draw Schematic explanation of the system of governance and assurance for Executive Team, Audit Committee and CQC	Corporate Governance	Completed
28	Manage Related Party Disclosures	Corporate Governance	Completed
29	Scope and cost digital systems for Membership, Declarations of Interest, etc for options appraisal	Corporate Governance	Completed
30	Complete Board Self-certifications	Corporate Governance	Completed
31	Review and revise CNST certification report	Corporate Governance	Completed
32	Liase with Parliamentary Office	Corporate Governance	Completed
33	Letter to governors RE Minutes of Meetings held in Private	Corporate Governance	Completed
34	Letter to Governors WRT Code of Conduct	Corporate Governance	Completed
35	Provide Minute taking Course for 25 Administrative staff, Pas, et al	Corporate Governance	Completed
36	Write Company Secretary Advert	Corporate Governance	Completed
37	Detailed review and revision of CYP governance proposal	Corporate Governance	Completed
38	Facilitate Annual Members' Meeting	Corporate Governance	Completed
39	Review of Conflicts of Interest	Corporate Governance	Ongoing
40	Procure DECLARE Interest logging system for Counter Fraud compliance	Corporate Governance	Ongoing
41	Procure Membership Database system	Corporate Governance	Initiated and Ongoing
42	Appoint Membership Manager (Band 5)	Corporate Governance	Initiated and Ongoing
43	Review Remuneration and Terms of Service for Chairman and Non-executive Directors	Corporate Governance	Reviewed and revised
44	Review and conduct Appraisal of Chairman and Non-executive Directors	Corporate Governance	Reviewed and revised
45	Restructure Board Assurance Framework Document to emphasise trends and highlight pertinent risks	Risk & Internal Control	Adopted
46	Prioritise of Risk Register and Board Assurance Framework for determining Board agenda	Risk & Internal Control	Initiated and Ongoing

Company Secretary's Report - December 2018

#	Item	Category	Status
47	Refocus Risk Group to raise profile and emphasise benefits of executive engagement in risk reporting and assessment	Risk & Internal Control	Initiated and Ongoing
48	Provide advice and guidance on governance in new SDU operational management structure is to be introduced by COO	Risk & Internal Control	Initiated and Ongoing
49	Identify and engage an election partner to manage the January 2019 Governor Elections	Corporate Governance	Complete
50	Provide a guide and assessment matrix to allow governors to maintain factual evidence to be used when feeding into the appraisal of the NEDs and Chairman.	Corporate Governance	Complete

DRAFT

Council of Governors
Wednesday 12 December 2018

Agenda Item:	8
Report Title:	Governors' Communications Log
Report By:	Corporate Governance Manager
Open or Closed:	Public
1. Summary of Report	
1.1	The attached version of the Governors' Communications Log is attached as Appendix 1 for approval by the CoG.
2. Main Report	
2.1	The Council of Governors continue to be actively engaged with supporting the Trust and members, as demonstrated by the variety of questions presented.
2.2	Governors are required to close questions which have been answered to their satisfaction or to the extent possible by the Trust. Governors requested to note that the Corporate Governance Manager continues to respond to questions raised by governors, between CoG meetings, to avoid delay.
2.3	Governors must address all questions to the FT office to be recorded in the Communications Log and dealt with expediently. Email to individual officers of the Trust cannot be processed and will not be tracked.
2.4	The FT office expects to process (triage) questions in three categories: <ul style="list-style-type: none"> a. Day-to-day queries needing clarification such as details of the meeting, planned actions, explanation on policy or procedure; b. Governors seeking clarity and assurances about matters of business, specifically regarding the performance of the Trust Board's duties and responsibilities and the Board's objectives in the context of the Trust's FT Licence; and, c. Explicit concerns about actual or potential breaches of the Trust's FT Licence that have not been fully clarified in previous enquiries. These are serious concerns that in the past would have been referred on the advice of the CoG to Monitor's now-defunct Governors' Panel.
3. Recommendations	
3.1	The CoG is recommended to address the status of each open matter on the Log, closing those which have been answered.

3.2 Governors are to note and adopt the process for the use of the Log described in Section Two above.

4. Attached to this Report

Attachment one – Governors’ Communications Log 5 December 2018.

ID	Date Requested	Governor	Constituency	Summary Description	Executive Lead	Response Date	Summary Response	Status
1	Weds 04/04/18	Peter Coates	South Hams	(via LG and NED FPIC Chair) The original plan (budget) for the year was to spend £29.58 m capital. Revised forecast is now £8.2m & the actual spend to March (M11) £4.84m. Could you please list all planned (budgeted) items ie. £21.38 mnot in this year's forecast and specify a timeline when these are planned to be spent. Can you meanwhile please give us assurance that they are not holding back the efficiency of the hospital and also not in any way affecting patient care.	P Cooper – DoF	Tue 24/04/2018	Interim response @ 24/04/18 FPIC.	Closed
1	Weds 04/04/18	Peter Coates	South Hams	(via LG and NED FPIC Chair) The original plan (budget) for the year was to spend £29.58 m capital. Revised forecast is now £8.2m & the actual spend to March (M11) £4.84m. Could you please list all planned (budgeted) items ie. £21.38 mnot in this year's forecast and specify a timeline when these are planned to be spent. Can you meanwhile please give us assurance that they are not holding back the efficiency of the hospital and also not in any way affecting patient care.	P Cooper – DoF	24/04/18 & 22/05/18	Covered in detail through Capital presentation at 22 May FPIC	Closed
2	Weds 02/05/18	Peter Coates	South Hams	Mr Coates asked if it would be possible to include numbers as well as percentage data in performance reports. The Interim Chief Operating Officer noted that the information was contained in the report but would be reviewed to ensure visibility.	J Harrison - Interim COO	Weds 02/05/18	This information is in report but would be reviewed to ensure more visible	Closed
3	Mon 21/05/18	Wendy Marshfield	Torbay	Following May Board development session, 5 strategic priorities were proposed for the next 12 months and beyond. What assurance can the Trust provide that governors will be fully briefed and engaged in timely manner & what mechanism will be used to support this engagement given governors' responsibility to engage with constituencies and be fully briefed in advance of any public engagement process.	A Wagner - DSI	Weds 23/05/18	DSI confirmed governors would be fully involved with process. DWFOD would co-ordinate e process to include staff governors & DSI would lead on public engagement inc. public governors. CE & MD would lead on STP engagement. Planning was on-going & governors would be invited to contribute Their viewed on areas to focus on would be invaluable & hel to develop partnership approach to ensure the Quality and Safety of services provided by the Trust.	Closed
4	Mon 21/05/18	Wendy Marshfield	Torbay	Recent guidance from NHSE England regarding zero tolerance on patients who have confirmed cancer and receive treatment after 104 days. At end April Trust had 17 patients still awaiting treatment. What assurance can Board provide on treatment and timelines to achieve required standard	J Harrison - Interim COO	Weds 23/05/18	Measures in place to assess any patient risk & review taking place to ascertain how many waiters >104 days. Patients in breach of any cancer targets are regularly reviewed & full breach analysis conducted & signed off by Clinical Lead to ensure appropriate pathway for each patient. If any patient harm, captured on Datix. Timeline is being worked on to reduce no. patients waiting >104 days to 0 and to eliminate any 62 day breaches by end July – additional capacity would be required together with review of suitable pathways for each patient, recognising that some patients choose to delay their appointment, impacting on wait times	Closed

5	Tues 22/05/18	Wendy Marshfield		For Staff Governor: In the community I hear staff talking about the Trust's organisational "re-structuring". What is the latest as it was meant to have been published by now? Would it be possible to gain assurance that this will be available soon and by what date?	J Harrison - Interim COO		Interim COO advised that feedback provided to staff through weekly Staff Bulletin and following staff consultation with those affected, recruitment is being finalised for the 2 system delivery teams on 9/10 October. Following this, work will be ongoing with the System delivery teams to ensure that all 5 localities are fully established.	Closed
6	Weds 13/06/18	Craig Davidson	South Hams	At QACC CD reported that he felt it useful to have people understand non-invasive ventilation. At June QIG he was concerned that 7 out of 10 requirements not being met. It was agreed CD could approach MD direct for assurance – CD to report back to CGM that appropriate assurance was available.	R Dyer – MD		Discussed in detail at August QIG. Non Invasive Ventilation action plan to be brought to future QIG meeting	Closed
7	Thu 28/06/2018	Peter Coates	South Hams	Assurance that current delays in capital equipment spending is not impacting on prospective consultants refusing posts with Trust due to inadequacy/lack of investment in specialist equipment.	R Dyer – MD	Thu 28/06/2018	email response advising managed through Med. Equip. prioritisation group. MD unaware of any resignation or non-appointment owing to equipment inadequacy although this may have contributed to histopathology recruitment difficulties.	Closed
8	Wed 04/07/2018	Craig Davidson	South Hams	In light of the increase in medical readmissions recently reported by Nuffield Foundation, partly blamed on closure of community hospital beds, assurance sought that this has not occurred locally. Could comparative figures for recent years on readmissions for pneumonia, PTE and pressure sores in Torbay be examined?	J Harrison - Interim COO		QAC conducting deep dive into readmissions. Responded to at July board.	Closed
9	Wed 04/07/2018	Craig Davidson	South Hams	Who has clinical responsibility for Dartmouth IC patients	L Davenport – CE	Mon 16/07/2018	Rests with GP @ DMP. IC planning starts on admission & explained to patient on discharge.	Closed
10	Wed 04/07/2018	Craig Davidson	South Hams	Clinical data on outcomes for Dartmouth IC patients	L Davenport – CE	Mon 16/07/2018	LDv to ask D Butler to forward Dartmouth IC info to CD. L Baxter provided verbal response to CD at meeting on 5 July.	Closed
11	Wed 04/07/2018	Craig Davidson	South Hams	what has been agreed re cuts and bruises service with DMP?	L Davenport – CE	Mon 16/07/2018	Meeting 13/7. Joint working group to be set up. Minor injury Nurses at DMP funded by Trust - need to publicise	Closed
12	Wed 04/07/2018	Peter Coates	South Hams	(Via Lead Governor) Income from sale of Dartmouth Hospital	L Darke – DECD	Wed 01/08/2018	To inc response in Aug Board report. Response included in SEP report by DECD at July FPIC	Closed
13	Wed 04/07/2018	Peter Coates	South Hams	(Via Lead Governor) Funding for H&WB centres esp. Dartmouth	L Darke – DECD	Wed 01/08/2018	To present at 15 Aug B2CoG	Closed
14	Wed 01/08/2018	Craig Davidson	South Hams	(via LG) Removal of Signage in respect of Dartmouth Hospital	L Darke – DECD	Wed 01/08/2018	Reply received at August Board	Closed
15	Tue 25/09/2018	Peter Coates	South Hams	Customer base contributing to Torbay Pharmaceuticals revenue	L Davenport – CE	Wed 03/10/2018	Reply sent to P Coates	Closed
16	Tue 02/10/2018	Wendy Marshfield	Torbay	Capacity issues - Opel 3/4 - how are these being dealt with and are regulators aware?	J Harrison - Interim COO	Weds 3/10/2018	Reply received at October Board	Closed
17	Fri 02/11/2018	Barbara Inger	Teignbridge	From 31/10 constituency meeting: why can't governors have access to ICON	L Davenport – CE	Fri 16/11/2018	Email response sent - system for staff - Data Protection issues - still try to ensure governors receive all information they need	Responded
18	Fri 02/11/2018	Barbara Inger	Teignbridge	From 31/10 constituency meeting: Media releases received late	A Wagner - DSI	Fri 16/11/2018	Email response sent - please provides specific examples so that we can investigate further. (none received as at 29/11)	Responded

19	Fri 02/11/2018	Barbara Inger	Teignbridge	From 31/10 constituency meeting: emails to Trust staff not being responded to	L Davenport – CE	Fri 16/11/2018	Email response sent - emails to FT mailbox are responded to in timely manner. This should be single point of contact for all governor enquiries so that they can be entered on the Comms Log and , directed appropriately.	Responded
20	Mon 05/11/2018	Craig Davidson	South Hams	What smoking cessation services does the Trust offer (question follows British Thoracic Society report)	R Dyer – MD			Assigned
21	Mon 05/11/2018	Wendy Marshfield	South Hams	(on behalf of a S Hams governor) Loss of car parking spaces owing to H& Wellbeing centre, why are Estates works taking place at Dartmouth clinic	L Davenport – CE	Wed 07/11/2018	Reply received at November Board	Responded
22	Mon 05/11/2018	Wendy Marshfield	CoG	Intermediate care in Torbay & S Devon - provision/referral/cost	J Harrison - Interim COO	Wed 12/12/2018	Presentation at 12 December CoG	Assigned
23	Tue 06/11/2018	Wendy Marshfield	Torbay	Assurance around 52 week wait position - will trajectory be achieved and has alternative provision been considered	J Harrison - Interim COO	Wed 07/11/2018	Reply received at November Board	Responded
24	Fri 16/11/2018	Elizabeth Welch	Torbay	LOLER certificates for hoists - issue identified at CIEG as unsupported. Impact on patients and staff and financial implications.	L Darke – DECD			Assigned
25	Thu 22/11/2018	Peter Coates	South Hams	(Via Lead Governor) Financial commitment of Dartmouth GPs to H&wellbeing centre development	L Davenport – CE	Mon 26/11/2018	Reply sent to P Coates. GPs have given public commitment to scheme	Responded
26	Tue 27/11/2018	Bob Bryant	Torbay	(Via Lead Governor) Domiciliary care - gender of carers	J Harrison - Interim COO			Assigned
27	Tue 27/11/2018	Bob Bryant	Torbay	(Via Lead Governor) Domiciliary care - support being provided by Trust staff - impact on their normal work and financial impact on Trust	J Harrison - Interim COO			Assigned
28	Wed 05/12/2018	Craig Davidson	South Hams	When created my understanding was that DCC did not wish to share adult social care with the ICO. > Is it expected that the advantages that have flowed from having the ICO for Torbay might be extended to the rest of South Devon (and is this an aim for STP1)?	A Wagner - DSI			Assigned

**Report of Quality Assurance Committee Chair
to TSDFT Board of Directors**

Meeting dates:	10 October 2018
Report by + date:	Sally Taylor 23 October 2018
This report is for:	Information <input checked="" type="checkbox"/> Decision <input type="checkbox"/>
Link to the Trust's strategic objectives: <i>(please select one or more boxes as appropriate)</i>	1: Safe, quality care and best experience <input checked="" type="checkbox"/> 2: Improved wellbeing through partnership <input type="checkbox"/> 3: Valuing our workforce <input type="checkbox"/> 4: Well led <input checked="" type="checkbox"/>
Public or Private <i>(please select one box)</i>	Public <input checked="" type="checkbox"/> or Private <input type="checkbox"/> + Freedom of Information Act exemption [<i>insert exemption if private box used</i>]

Key issue(s) to highlight to the Board:

1. The committee received assurance that despite the continued concern about 52 week waits, quality and safety are being closely monitored.
2. QAC noted that the 4 hour target has not been achieved. Healthwatch have recently undertaken 200 interviews with patients in ED which did not highlight user dissatisfaction.
3. VVTE targets are not being achieved but progress is being made in improving recording to fully understand the reasons.
4. It was noted that there had been one Never event. There was no patient harm and the event has been thoroughly investigated.
5. The recent OPEL 3 and Opel 4 status has impacted on ambulance waits and SWAST have raised a critical incident. The Trust will participate in the investigation.
6. QAC received assurance on the weekly meetings focussing on national targets including 4- hour waits, cancer and RTT targets. Detailed reviews are carried out and there is expert clinical involvement.
7. It was reported that ward staff feel that there is continued pressure regardless of OPEL levels. There is no time to 'step off the hamster wheel'. Staff wellbeing is a priority this year but staff continue to report stress and fatigue.
8. The QIG report included reference to the national cardiac arrest audit which indicated that overall our incidence is below average except in the 65 to 74 age group. The use of TEPs and ACPs is therefore under review.
9. The QIG were informed of a recent incident where a patient was incorrectly identified on PAS, e.g. same / similar name. This is under review.
10. The SAE group reported that the MD is reviewing the process of how ED patients are referred to other consultants. SAE also noted a new coroner referral form and a useful BCH report on sepsis treatment.
11. Following concerns about a patient being admitted as an emergency to Torbay when their previous treatment, and medical records had been at Derriford, the MD is to write to SWAST to clarify the pathway.
12. The committee received the report from the Workforce and OD group chair and noted that achievement reviews are not yet at target level but that the improved

process is resulting in staff seeking their reviews, as they perceive them as positive, and Agenda for Change amendments mean that reviews are important for scale progression.

- 13. Mandatory training is now achieving target.
- 14. The Committee received a presentation on the Trust's whole person approach to a Health and Wellbeing strategy. The success of the HOPE programme was welcomed. There is concern on how we can support staff to participate in activities, given our work pressures. It is hoped that technology improvements could help.
- 15. The CQC action plan update was received and it was noted that the only major actions not completed relate to the fracture clinic improvements. A further CQC visit to review maternity, mortuary and fracture clinic is scheduled for early November.
- 16. Deep dives were carried out on two BAF risks.
- 17. It was reported that a Medical Workforce programme board has been set up and some HEE support has been made available for workforce planning.

Key Decision(s) Made:

The committee had asked for deep dive reports to be brought to a future meeting to provide assurance on various audits which had taken place. The deferred report on progress with care model implementation was requested to be brought to a future meeting.

Recommendation(s):

- 1. To note this report and its key actions and decisions

Name: Sally Taylor - Chair

**Report of Audit Committee Chair to TSDFT
Board of Directors**

Meeting date:	19 October 2018
Report by + date:	Sally Taylor, 23 October 2018
This report is for: <i>(please select one box)</i>	Information <input checked="" type="checkbox"/> Decision <input type="checkbox"/>
Link to the Trust's strategic objectives: <i>(please select one or more boxes as appropriate)</i>	1: Safe, quality care and best experience <input checked="" type="checkbox"/> 2: Improved wellbeing through partnership <input type="checkbox"/> 3: Valuing our workforce <input type="checkbox"/> 4: Well led <input checked="" type="checkbox"/>
Public or Private <i>(please select one box)</i>	Public <input checked="" type="checkbox"/> or Private <input type="checkbox"/> + Freedom of Information Act exemption [S43 – commercial interests]

Key issue(s) to highlight to the Board:-

1. The Committee received the Internal Audit report. Following an earlier report on Visa control, the Committee received assurance that appropriate training has now been put in place for the recruitment team. There had been limited assurance from an HR audit on temporary staffing and it was noted that checks on agencies need to be strengthened. The Trust's Recruitment and Selection policy is due to be renewed. The Committee welcomed the suggestion that Internal Audit should look at operation of the Working Time Directive.
2. Internal Audit had looked at AHP agency booking and made a number of recommendations, particularly on the process of approving requests, which are being implemented.
3. Assurance is being sought as we progress with the children's services bid where we are the Prime stakeholder and hence accountable for the whole service despite not being the main service provider. Risks are however shared across the C&YP Alliance.
4. It was noted that we need some audit work on readmissions - in particular, how we define them in our Trust and across Devon. There is also an intention to look at consultant job planning in next year's Audit programme.
5. It was noted that there were 14 outstanding recommendations from Internal Audit and these mainly related to the area of workforce. However, assurance was received that capacity issues have now been addressed and the new associate director will have the lead and oversight of this area.
6. The Committee had previously requested a review of how we are learning from complex HR cases. A report was received outlining the framework which has been developed for investigating what can be learned at all levels - team, department and organisation.
7. The Committee briefly discussed how best to triangulate their work with other committees to ensure completeness of Assurance without overlap. It was agreed that a full work programme would be developed for next year by the three Board committee chairs with the Company Secretary.
8. The Board Assurance Framework (BAF) was reviewed and it was agreed that it is now very helpful. However, it was noted that we still need to include external strategic risks and this will be discussed at the next Board development session.

Key Decision(s)/Recommendations Made:

The Board is asked to note the contents of this report

Name: Sally Taylor (Committee Chair)

**Report of Finance, Performance and Investment Committee Chair
to TSDFT Board of Directors**

Meeting date:	25 September 2018
Report by + date:	Sally Taylor, 27 September 2018
This report is for: <i>(please select one box)</i>	Information <input checked="" type="checkbox"/> Decision <input type="checkbox"/>
Link to the Trust's strategic objectives: <i>(please select one or more boxes as appropriate)</i>	1: Safe, quality care and best experience <input checked="" type="checkbox"/> 2: Improved wellbeing through partnership <input checked="" type="checkbox"/> 3: Valuing our workforce <input checked="" type="checkbox"/> 4: Well led <input checked="" type="checkbox"/>
Public or Private <i>(please select one box)</i>	Public <input checked="" type="checkbox"/> or Private <input type="checkbox"/>

Key issues to highlight to the Board (Month 5):

1. For assurance the committee reviewed the Month 5 integrated Finance and Performance report and noted that we are still not achieving several standards - notably the A&E 4 hour standard. The committee was assured that the 52 week wait trajectory should be achieved for October.

There is concern about the provision of domiciliary care in both Torbay and Devon which is resulting in unfilled packages of care and hand backs to the Trust.
2. The financial position for Month 5 is a £7.05m deficit, which is £0.44m behind the budgeted position, largely due to failure to achieve the thresholds for the sustainability fund. There remains a £6 million shortfall on CIP plans for the year.
3. NHSI self-certification for Month 5 was noted by the Committee.
4. The Committee received a presentation on the Community SDU financial situation. It is clear that despite achieving a good level of savings, there remains a shortfall of £2 million and in addition there are cost pressures resulting in a forecast overspend of £4 million. This is mainly due to price pressures for Torbay care clients and high cost placed persons.
5. The Committee noted the draft Care Model Balanced Scorecard and discussed how best to report performance to the Committee, to the Board and at SDU level, as good management information is required on a regular basis. Resources to prepare reports need to be used effectively and a suggested reporting cycle is to be presented for discussion.
6. A presentation was given re Torbay Pharmaceuticals. The revised forecast shows final outturn close to budget despite a slight shortfall in sales. Relationships with customers are being strengthened and action is being taken to reduce the number of failed batches.

Strategies are being considered to reduce reliance on just a few customers and products. This was a deep dive into a BAF risk (Risk 2209).

7. Business cases were formally approved in respect of AMU expansion and Upper GI staffing.

The committee noted the reallocation of the overseas nursing recruitment budget to change the model in order to work with HEE on recruitment in India.

8. The Committee approved the renewal of the working capital facility. This will enable the smoothing of cash flows to allow the capital expenditure programme to proceed.
9. The Committee received an update on the Allocate project and noted the delays in implementation which will cause delays in associated benefits.
10. Risk Share Agreement negotiations continue, with support by all parties for the philosophy. However commissioner funding challenges can be expected.
11. The Committee approved the proposed exception reporting process for capital expenditure variances.
12. The Committee noted the update on the Children and Young People's tender and members were pleased to note that preferred bidder basis had been achieved – appropriate governance arrangements would now be put in place.
13. The committee reviewed BAF Risk 1050 - Special Theatres Ventilation and noted that funding for this is a STP agreed priority. In the interim, maintenance is being prioritised.
14. The HIS report was considered. The funding of £1.2 million for community IT (building on the TPP pilot in Coastal) via the STP was noted.

There are still resourcing issues re mapping for GDPR compliance. A proposal on reviewed staff responsibilities will be brought to the relevant committees.

Key Decision(s)/Recommendations Made:

1. As above.

Name: Sally Taylor (Committee Chair)

Report of Finance, Performance and Investment Committee Chair to TSDFT Board of Directors

Meeting date:	30 October 2018
Report by + date:	Robin Sutton, 31 October 2018
This report is for: <i>(please select one box)</i>	Information <input checked="" type="checkbox"/> Decision <input type="checkbox"/>
Link to the Trust's strategic objectives: <i>(please select one or more boxes as appropriate)</i>	1: Safe, quality care and best experience <input checked="" type="checkbox"/> 2: Improved wellbeing through partnership <input checked="" type="checkbox"/> 3: Valuing our workforce <input checked="" type="checkbox"/> 4: Well led <input checked="" type="checkbox"/>
Public or Private <i>(please select one box)</i>	Public <input checked="" type="checkbox"/> or Private <input type="checkbox"/>

Key issues to highlight to the Board (Month 6):

1. For assurance the Committee reviewed the Month 6 Financial Performance, which remained broadly in line with plan after taking into account not earning the Q1 and Q2 PSF performance element (£650k). Given the current pressures on A&E it is thought likely that the Trust will miss the targets for earning Q3 PSF. Correspondence with Commissioners and NHSI was referenced by the Committee.
2. For assurance the Committee reviewed the Month 6 Performance Standards together with related management actions and mitigations. Discussion focused upon achieving planned trajectories for the year with particular focus on RTT and Cancer standard improvements.
3. NHSI self-certification for Month 6 was noted by the Committee.
4. The Committee was assured with respect to the slippage of £6.6m in the revised forecast capital expenditure for the year against plan. The Committee was assured by the Social Care Aged Debt and write off position, this will be revisited in due course.
5. The Committee discussed and reviewed the CIP gap of £5.9m, the launch of new initiatives and the impact of non-recurrent CIP on next year.
6. Torbay Pharmaceuticals financial performance for September 2018 was discussed by the Committee for assurance. The latest forecast shows sales slippage to plan, the bottom line remains in line with plan.
7. Updates to the Finance Risk Register were noted and Board Assurance Framework Risks Numbers 2183 (Financial Sustainability Risk Rating 2018/19) and 2185 (Failure to secure Fund Monies 2018/19) were noted.
8. IM&T report from 4 October 2018 was provided for information and assurance.
9. The business case for The Acute Care Model was reviewed and approved by the Committee. This business case will now be submitted to the Trust Board.
10. The LLP transaction documents for the Strategic Estates Partnership were approved by the Committee.
11. The planned review of the Committee's terms of reference was deferred to a future

meeting to facilitate consistency with other Committee's terms of reference.

12. The Committee approved the Costing Group terms of reference.
13. For information the Committee was updated with respect to the 2019/20 Business planning process, the next stage of the Risk Share Arrangement negotiations, progress on the draft 5 year plan, the latest position with Children and YP tender and the Orthopaedic Centre of Excellence.
14. The Committee undertook a deep dive into Agency Spend and was assured that the causes and controls were understood and appropriate.
15. The Committee undertook a deep dive into Surgery SDU financial performance and was assured by the presentation given.
16. CODAG and SBMT meetings for 12 October 2018 and 11 October 2018 were verbally referenced.

Key Decision(s)/Recommendations Made:

1. As above.

Name: Robin Sutton (Committee Chair)

**Report of Finance, Performance and Investment Committee Chair
to TSDFT Board of Directors**

Meeting date:	27 November 2018
Report by + date:	Robin Sutton, 28 November 2018
This report is for: <i>(please select one box)</i>	Information <input checked="" type="checkbox"/> Decision <input type="checkbox"/>
Link to the Trust's strategic objectives: <i>(please select one or more boxes as appropriate)</i>	1: Safe, quality care and best experience <input checked="" type="checkbox"/> 2: Improved wellbeing through partnership <input checked="" type="checkbox"/> 3: Valuing our workforce <input checked="" type="checkbox"/> 4: Well led <input checked="" type="checkbox"/>
Public or Private <i>(please select one box)</i>	Public <input checked="" type="checkbox"/> or Private <input type="checkbox"/>

Key issues to highlight to the Board (Month 7, October 2018):

1. For assurance the Committee reviewed the Month 7 Financial Performance, which remained broadly in line with plan after taking into account not earning the Q1 and Q2 PSF performance element. Given the current pressures on A&E it is thought likely that the Trust will miss the targets for earning Q3 PSF. It was highlighted that the financial performance for Month 8 was likely to deteriorate due to the impact of operating theatre closures and domiciliary care provision issues.
2. For assurance the Committee reviewed the Month 7 Performance Standards together with related management actions and mitigations. Performance standards for Month 8 are also likely to suffer from the impact of operating theatre closures and domiciliary care provision issues.
3. NHSI self-certification and narrative for Month 7 was approved by the Committee.
4. The Committee highlights to the Board that the combination of current operational pressures together with existing risks to the forecast will mean that the Q3 forecast is highly likely to show that the control total for the year will not be met and many of the performance standards will not be achieved by the end of the financial year.
5. Torbay Pharmaceuticals financial performance for October 2018 was discussed by the Committee for assurance. The Committee was pleased to note the strong business performance achieved during the month.
6. It was noted that the Finance Risk Register will need to be updated in light of issues with operating theatres, domiciliary care provision and social care funding, review of the Board Assurance Framework was deferred.
7. IM&T report for November 2018 was provided for information and assurance. The Committee requested an update on GDPR for January.
8. The business case for Torbay Pharmaceuticals Contract Manufacture was reviewed and approved by the Committee, this business case will now be submitted to the Trust Board for approval.
9. The business case for Replacement Defibrillators was reviewed and approved by the Committee, this business case will now be submitted to the Trust Board for approval.

10. The Community IT business case was reviewed and approved by the Committee, this business case will now be submitted to the Trust Board for approval.
11. The EPIC strategic outline business case was reviewed and approved by the Committee, this outline case will be submitted to the Trust Board for approval. .
12. For information the Committee reviewed the paper setting out Adult Social Care Fee setting for 2019/20, the Committee supported the recommendation contained in the paper.
13. The Committee undertook a deep dive into Procurement, due to timing it was agreed to circulate the presentation and take questions at the next FPIC meeting in December.
14. The Committee undertook a deep dive into the progress report from Meridien on resource load modelling in the areas of Community Nursing, Intermediate Care and Community Therapies, this work is ongoing and the savings evaluation will require approval.
15. The Committee was due to undertake a deep dive into Women's and Children's SDU financial performance, this was deferred to December due to operational pressures..
16. CODAG and SBMT meetings for 16 November 2018 and 15 November 2018 were verbally referenced.

Key Decision(s)/Recommendations Made:

1. As above.

Name: Robin Sutton (Committee Chair)

Council of Governors

Wednesday 12 December 2018

Agenda Item:	13
Report Title:	Lead Governor's Report
Report By:	Lead Governor
Open or Closed:	Open under the Freedom of Information Act
1. Summary of Report	
1.1	Topical areas of interest presented by the Lead Governor arising since the last Council of Governors meeting on 21 September 2018
2. Main Report	
2.1	The Council of Governors continue to be actively involved with supporting the Trust and members.
2.2	The Council of Governors participated in the appointment of the Chief Executive on 24 September 2018 – the successful candidate was Liz Davenport.
2.3	<p>As previously reported the Trust continues to be extremely challenged in achieving RTT and other key waiting time targets. Governors have requested regular updates on the Trust position, seeking assurance that all avenues possible are, and have been, investigated to address the position.</p> <p>This has now been further compounded by the failure of the air filtration systems in Theatres A and B. Governors have been fully briefed by the CEO who has declared an internal critical incident.</p> <p>The Trust is being supported by NHSI and NHSE and the local health care community in the logistical issues associated with reduced theatre capacity.</p> <p>Achieving the financial savings prior to the internal critical incident were already difficult but due to the requirement for further capital spend is now further compounded.</p>
2.4	<p>At the recent Nomination and Appointments Committee, it was agreed that a new template to support the annual assessment of the NEDs and Chairman would be developed by the Interim Company Secretary to reflect current national guidance.</p> <p>The template plus the process for its application will be circulated to all governors for completion, with collation of comments to take place at the Constituency meetings.</p>
2.5	The Governors' Communications Log is due for review and feedback from all governors would be helpful in ensuring that the log meets our requirements for the future.
2.6	The Strategy Focus Group has now developed the draft training and skills audit template which has been circulated to governors for comments.

The next priority for the Strategy Focus Group will be to review the Governor Observer role, including any update to the Governor Observer template and clarification of roles and responsibilities of the Governor Observer.

- 2.7 Following discussion between the Chair of the Membership Group, the Lead Governor and the Trust it has been agreed that a small working group will be established to develop a Membership Strategy for consideration by the Trust and the Council of Governors.
- 2.8 An updated version of the NEDs' Portfolio of Responsibilities has recently been circulated to the Council of Governors.
- 2.9 Key areas for future meetings include:
- SWAST presentation
 - Ongoing presentations from NED Committee Chairs and their personal profiles
 - Intermediate Care
 - Update on waiting list position
- 2.10 Governors continue to be very active with regard to developments within their constituencies, for example, attendance at various project groups with regard to the Dartmouth Health and Wellbeing Centre (South Hams) and the future of Teignmouth Hospital (Teignbridge).
- 2.11 Lead Governor has offered her support to the Trust with regard to the forthcoming governor elections and a meeting is to be held with potential governor candidates early in the new year, to ensure that any candidates are briefed on the role and responsibility of Foundation Trust governors before the elections take place.
- 2.12 As in previous years, governors are asked to attend a Quality Account Stakeholder Event, to help identify priorities for the forthcoming year. The Foundation Trust Office will ask for volunteers as soon as the meeting date has been confirmed.

3. Recommendations

- 3.1 As at section 2.5 could governors please feedback further changes which may be required to the Communications Log.
- 3.2 As at section 2.6 could governors please provide feedback on further changes which may be required to the training skills audit.

4. Decisions Needed to be Taken

- 4.1 Note and comment on the information outlined above/attached.
- 4.2 Approve the recommendations as at section 3.

5. Attached to this Report

Attachment one - Constituency reports from South Hams and Plymouth, and Torbay.

CONSTITUENCY REPORT

Constituency:	South Hams
Meeting date:	Tues 18/10/18
Governors present:	Craig Davidson (ACD) Vikki Mathews (VM) Peter Smerdon (PS)
Apologies:	Peter Coates Mary Lewis
Author of the report:	ACD

Agenda

1. Health & Wellbeing Centre, Dartmouth.

General discussion regarding lack of progress, the disruptive effect of the Health Action Gp and concern that no date yet arranged for a new stakeholders meeting at which decision on location and options for providing nursing beds might be settled. Still a section of the community who have not given up on the old hospital site being redeveloped and concern that inappropriate and factually incorrect banners have been erected outside the building. ACD expressed the view that the Trust/CCG needed to be honest with the community that it is not possible to provide 2-4 nursing beds 24/7 in Dartmouth and IC beds at Totnes, or elsewhere when full, was less desirable but not an unacceptable solution. The only issue was how non drivers could visit their relatives. This might need the extension of current voluntary sector provision of transport. ACD reported that signs to old hospital had been blacked out. He was not aware of any directions to the Medical practice being put up or of a “cuts and bruises” service at the practice.

2. Dartmouth Together

ACD handed out copies of a slide show illustrating the thinking behind establishing DT and described the discussions at the first meeting with the societies and clubs of Dartmouth. Plan to launch this social enterprise once more groups had committed. Possibly around Xmas. Swim4health

3. Social prescribing

Graham Ray had sent a short description of this and how it was been developed in Dartmouth and Buckfastleigh. ACD described what he had managed to find out is happening in Totnes & Kingsbridge. Seems most places struggling to develop with all the other things occupying time and energy. Acceptance that although traditionally SP tended to be driven by a GP there was no reason why it could not be by a nurse or physiotherapist. ACD agreed to investigate further. The topic clearly fits with some of what Dartmouth Together aims to achieve.

4. Contact with PPGs

ACD attended the Annual member’s meeting of the PPG meeting (on evening of 18/10) at which Liz

Davenport presented an update on HWC in Dartmouth. Some tedious disruption from members of the Health Action gp. No news except for dates for stakeholders meeting. DMP practice performance good overall but poor on ability to see same doctor (27% v 50% nationally). No GP or manager attended the meeting.

5. SWAST visit

Visit of governors to Exeter HQ in Sept had been useful and enabled us to understand the difficulties in always meeting national targets on response times in face of rising demand and falling resources.

6. Trust matters.

Ongoing concerns : estate planning, capital spend on equipment and balance of clinical and corporate costs, intermediate care quality performance, discharge information booklet and provision of Care Plan, non invasive ventilation service , an explanation of “care in the community”, recruitment of members and NHS staffing.

Date of next meeting. Week beginning 18/2/19 VM to provide possible dates 7 times

Draft minutes sent to Trust office 22/10/18

PUBLIC

Constituency:	Torbay
Meeting Date:	November 8 th , 2018; 4.30pm – 6pm Members Room Torbay Hospital
Governors present:	WM, KA, BB, EW, LH
Apologies:	PL, AP, JL, NA
Author of the report:	KA

Agenda

1. Welcome
2. Approval of Minutes of last meeting - 4th September 2018
3. Matters arising
4. Feedback from Governor observer roles.
5. Agenda Items for next Council of Governors.
6. Governor Vacancies (WM)
7. Communication with members of the public (WM)
8. Guest speakers (WM)
9. A.O.B.
10. Date and time of next meeting: 17th January 2019, 16:30 Members Room, Hengrave House

Minutes of Meeting:

1. KA welcomed all present
2. Minutes of last meeting – 4th September 2018 were approved with one minor amendment.
3. Matters Arising: a) WM reported that AP is tendering his resignation to the Trust in the next two weeks; b) The PPG meeting for November was cancelled – the PPG is considering how it will be formulated in the future, following the proposed merger of the CCG's; c) WM had attended the Healthwatch AGM the previous evening – there were 1900 responses from children and adults in the Bay to the consultation by Healthwatch – report due in December 2018. The Healthwatch contract with Torbay Council is due for renewal next year – a one-year extension has been agreed as an interim measure – the Council is looking at how they support Healthwatch in the future.
4. Feedback from Governor Observer Roles – WM reported that matters with the Quality and Compliance Committee have now improved; reports are being circulated to all Governors

to see them – though BB said he had not received any Minutes from his Group – WM will follow up, the issue may be with Estates and their ability to keep up with their workload – there is a need to maintain consistency with messages in letters to patients about Clinic location – the letters need standardising about where patients report, etc – this issue to go on the Communications Log.

5. Agenda items 5 and 7: Agenda items for next CoG Meeting: The Question is: How do we/should we communicate with our members and how do we gain more members? An Action Plan is needed for Engagement with the Public in 2019 – for implementation both by the CoG and individual Constituency Groups; we also need support for communications with members (WM/LizD) – and a Membership Strategy for the Trust – need to write draft outline using Monitor and NHS I documents as a basis – topics: Membership and the Public, Strategy, Promotion, Action Plans; Membership database, Governors, promotion to get new members, resources required, etc. This needs a budget and person (s) to administer member communications – office space, communications, etc.
6. There are 7 Governor Vacancies for 2019, with 5 existing Governors potentially up for re-election – a good number of members have declared an interest in becoming a Governor.
7. See 5 above.
8. Guest speakers – a good idea but we need to give it more consideration and possibly bring time of meetings forward to 2 – 4pm.
9. AOB: a) Lynn gave her apologies for the next meeting; b) meetings with GP/Health Practices – Lynn has had some success at Croft Hall; KAA likewise with Chelston; noted that some food shops are sending spare food to surgeries for free distribution to needy patients; Liz W reported that her practice is growing and employing paramedics and nurses; c) WM to arrange visit to modified AMU when complete; d) the new on-site Pharmacy needs to review opening hours of main street pharmacies and our clinic times, especially with regard to evening and weekend opening times >Communications Log; e) ICON access by Governors from their NHS email addresses and home is an issue – needs resolving (>COMMS LOG).
10. Date/Time of next Meeting: Dates for next meetings are as follows: 17th January, 12th March, 14th May, 23rd July, 17th September – all at 4.30pm to 6pm, Members room, Hengrave House

Agenda items for Council of Governors, Board to Council Meetings

Theme

Membership recruitment and retention; Resources; Development of marketing communications materials for members; regular newsletters; events, budgets, etc.

Source e.g. Governor direct Constituency meeting or Constituency member

Matters requiring immediate attention – SEE ABOVE

Topics of interest/agenda items for next constituency meeting

1. Follow up on external communications ideas/concepts

DRAFT Minutes dated8th November 2018..... Circulated to Trust office, Lead Governor and all other Governors.

Yes

No

PUBLIC / PRIVATE (delete as appropriate – if PRIVATE, please use NHS to NHS email addresses)

Council of Governors

Wednesday 12 December 2018

Agenda Item:	14
Report Title:	Quality and Compliance Committee Report
Report By:	Wendy Marshfield
Open or Closed:	Open under the Freedom of Information Act
1. Summary of Report	
1.1	Update report of the Quality and Compliance Committee (Q&CC) following their most recent meeting on 14 November 2018.
1.2	The draft notes of the September and November meetings are attached to this report.
1.3	A number of points are for noting: <ul style="list-style-type: none"> • The Committee reviewed their Terms of Reference. • Members agreed the Committee’s annual workplan. • Members conducted a verbal review of Committee effectiveness. • A report was tabled from Healthwatch as their representative was unable to attend, and this was discussed at the meeting. • The Committee received a very informative Quality Update from the Trust’s Quality Lead. • Members discussed the Governor Observer reports which had been received and noted that the governors’ Strategy Focus Group will be looking at the role of Governor Observer and the templates used for the reports in the New Year.
2. Recommendations	
2.1	Council of Governors receives the draft notes as at attachment one and supports the current work of the Quality and Compliance Committee.
3. Decisions Needed to be Taken	
3.1	Note and comment on the information above/attached.
3.2	Approve the recommendations as at section two.
4. Attached to this report	
Attachment one – Notes of the September Q&CC meeting and draft notes of the November Q&CC meeting.	

MINUTES OF THE QUALITY AND COMPLIANCE COMMITTEE MEETING

HELD IN TUTORIAL ROOM 2, HORIZON CENTRE, TORBAY HOSPITAL

AT 12PM ON WEDNESDAY 19 SEPTEMBER 2018

Peter Coates (PC)	* Lynne Hookings (LH)
Craig Davidson (CD)	Paul Lilley (PL)
* Carol Day (CDy)	* Wendy Marshfield (WM) – Chair
* Annie Hall (AH)	* Anna Pryor (AP)
* Pat Harris (PH)	Elizabeth Welch (EW)

*Denotes member present

In attendance

Claire Burton, Quality and Compliance Manager (QCM)

Monica Trist, Corporate Governance Manager (CGM)

Jenness Barber, note taker (JB)

1. Apologies

Paul Lilley, Susan Martin (Quality Lead), Elizabeth Welch.

2. Minutes of the last meeting

The minutes of the last meeting dated 13 June 2018 were **agreed** as accurate.

3. Matters arising

- **Ref agenda item 5**

The Terms of Reference for this Committee were handed out and the completed amendments were noted.

2.1: The Terms of Reference (ToR) have been amended to reflect changes to membership. Any comments to CGM by end of the month, otherwise they will be taken as approved.

11.1: 'Review committee effectiveness' to be put on 14 November Q&CC agenda, ToR to be included.

The Protocol for governor observers was also handed out and the completed amendments were noted.

4. CQC update

WM introduced Claire Burton, Quality and Compliance Manager for the Trust, (QCM).

QCM gave the following update:

Action

TSDFT CQC Inspection: Inspection visits of five core services and “Well-Led”, February and March 2018

Requirement Notice actions

The CQC’s Final Inspection Report stated ten Requirement Notices, across the CQC-defined Core Services as follows:

- 5 in Maternity;
- 1 in Acute End of Life;
- 3 in Outpatients;
- 1 in Community End of Life; and
- 0 in Community Children and Young People.

Action plan with 34 actions to address these Notices was submitted to the CQC in June and accepted without comments.

The progress towards completion is being reviewed at SDU Governance Board meetings and Quality Performance Review meetings, and monitored through the monthly CQC Assurance Group meeting.

The Final Requirement Notices Action Plan has been included on meeting agendas for the:

- Quality and Compliance Committee;
- Quality Assurance Committee; and
- Quality Improvement Group.

Overall, the status of the 34 actions as at today is:

- 23 are complete;
- 2 are delayed from the planned completion date with a plan in place for completion (amber in the “on track RAG analysis”); both concern the fracture clinic renovations, which are due to complete this Friday and staff to move back in on Monday; and
- 9 are on track for completion by the planned date (green in the “on track RAG analysis”), of which the latest planned completion is end of Q4 (Mar-19).

Should Do Actions

The CQC’s Final Inspection Report stated 47 actions the Trust SHOULD take to improve, across the CQC-defined Core Services as follows:

- 9 Overall Trust;
- 12 in Acute Maternity;
- 10 in Acute End of Life;
- 5 in Outpatients;
- 6 in Community End of Life; and
- 5 in Community Children and Young People.

With the greater degree of flexibility for the level to which the “should do improvements” can be addressed, a different approach is being used to manage these than with the Requirement Notice actions. The majority of the actions are already being managed through existing workstreams. Therefore, it was decided that the role of the CQC Assurance Group would be to propose and document for Executive Director approval, whether each action would be completed in this financial year, after 1st April 2019 or no action to be taken, and to ensure/assign an existing workstream to manage the action.

Audit South West

As part of the 2018/19 Internal Audit Plan, approved by the Audit and Assurance

Committee, Audit South West is undertaking a review to confirm whether the systems in place within TSDFT to monitor compliance against the CQC regulations, provide sufficient ongoing awareness and assurance.

The overarching objective is to assess TSDFT's response to the CQC's Inspection report published in May 2018 following its inspection in February and March 2018. As done in previous years Audit South West will be looking to establish the status of actions for implementation. The primary focus of this review is to identify the implementation status of a sample of 'must do' and 'should do' recommendations taken from the CQC Inspection Report. In order to confirm the effectiveness of these, Audit South West will include confirmation that actions identified in response to the CQC findings and that there is effective and ongoing performance monitoring being undertaken.

Due to report out by the end of Sep 2018. [*Post-meeting note: the draft report is now expected mid-Oct 2018 for TSDFT review.*]

WM asked if governors could have sight of this, QCM said she would check with Jane Viner, Chief Nurse.

QCM

CQC Engagement Meetings

- Continuing previous local relationship meetings between the CQC and key Trust contacts, the CQC have extended the format to a more prescribed agenda, now termed Engagement Meetings, held quarterly.
- These meetings form part of the ongoing monitoring of the Trust.
- The CQC set the agenda, and invited participants. The agenda may include the request for drop-in focus groups.
- Service leads of CAMHS, and the Drug and Alcohol services met with the inspectors during the meeting on 3rd July 2018.
- The next meeting is scheduled for 1st November 2018 when meetings with Maternity, Fracture Clinic and Mortuary are scheduled.

Change of CQC Inspection Manager

CQC have made regional personnel changes, with Dan Thorogood moving from Inspector Manager for Devon to Inspector Manager for Cornwall, and Mandy Williams, a registered midwife, becoming Inspector Manager for Devon. Sharon Hayward-Wright remains TSDFT's local Inspector.

Well-led self-assessment

The last TSDFT Board self-assessment against the NHSI/CQC well-led framework was conducted in November 2017 and reported in the February 2018 Board meeting.

As the recommendation is to perform the review annually the intention is for the Board to initiate the next self-assessment in November / December 2018.

WM brought a CQC paper to the meeting titled 'Quality improvement in hospital trusts' issued September 2018 and said she would be interested in how the Trust takes this forward. QCM will be reviewing the paper on behalf of the Trust.

WM thanked QCM for her report.

5. Quality update

The Quality Lead could not be present at this meeting due to annual leave and no update had been received.

(*Post meeting note: WM has now met with QL and agreed report will be provided for future meetings.*)

6. Healthwatch

PH reported that there is going to be new guidance in October which she will share at the November meeting of this Committee.

PH has been working with Paignton Health and Wellbeing Centre and explained that there is some discontent in the community around the uncertainty of future plans. WM mentioned the System Director posts had been advertised and that this will help when the positions are filled.

CGM stated that any questions from the public are directed to the relevant Lead and the Communications Team will produce a statement.

WM commented the CCG have the vision and money and the Trust has the ability to put into action.

CGM said that communication to the public is via the stakeholder newsletters.

PH said that she meets monthly with the CCG.

CGM/WM to raise question on the Governor Communications Log.

PH said she is working with A&E and ICE Creates. She is also working with Children and Young People which is going well and Mental Health nationally as she wants to make sure Torbay gets a voice.

Health checks – Digital Inclusion Project 2018.

CGM/WM

7. Committee self-assessment

This item was discussed at agenda item 3 – Matters arising.

8. Agree annual workplan

WM will review the workplan with CGM after this meeting.

CGM/WM

9. Feedback from governor observers

9.1 Safeguarding/Inclusion Group

Reports were noted for 11 June and 6 September. AH identified three areas which she was concerned about and will report back at the February meeting of this Committee.

9.2 Quality Improvement Group

CD was not present at this meeting and the Committee noted the reports for 12 June, 10 July and 14 August.

9.3 Workforce and Organisational Development Group

12 July meeting was cancelled and 13 September meeting has been rearranged for 26 September therefore no reports expected at this meeting.

9.4 Capital Infrastructure and Environment Group

EW was not present at this meeting and the Committee noted the reports for 20 June and 18 July, 22 August meeting was cancelled.

WM stated that Lesley Darke presented an update on SEP at the last Council of Governors' meeting and asked if CGM would add 'patient hoists' to the Governor Communications Log.

CGM

9.5 Finance, Performance and Investment Committee

PC was not present at this meeting and the Committee noted the reports for 26

June, 24 July and 28 August.
WM had spoken with PC this week and reported that PC was concerned with Referral to Treatment Times (RTT), first appointments and cancer appointments. PC had met with Robin Sutton (chair of Finance, Performance and Investment Committee (FPIC)), Paul Cooper and Rod Muskett regarding the way of reporting at FPIC.

WM proposed a number of governors meet with Robin Sutton to gain a better understanding of how the system works and is financed.

9.6 Quality Assurance Committee

The Committee noted the reports for 15 June and 8 August. WM asked that an update on waiting times be added to December's Council of Governors' meeting.

CGM

9.7 Audit Committee

The Committee noted the report for 27 July. WM reported that this is a very well chaired Committee which provides a lot of assurance and suggested that other governors attend this Committee. CGM said she would speak to the chair to find out if this would be possible and if so, add to the December Council of Governors' agenda.

CGM

9.8 Information Management and IT Group

The Committee noted the reports for 7 June, 5 July, 2 August and 6 September. CDy discussed her reports with Committee members and reported that IT are working under extreme pressure. She is concerned regarding the level of risk the Trust is exposed to. CGM said that high level risks are discussed at monthly Risk Group meetings and are included in the Board Assurance Framework (BAF). It was agreed to write to Paul Cooper who is the Senior Independent Risk Officer for the Trust. CGM/WM to discuss.

CGM/WM

10. Reports from Non-Members

10.1 Infection Prevention and Control Group

The Committee noted the report for 21 June. CDy reported that Selina Hoque is managing all Infection Control issues very effectively. WM requested that JB find out if governors can have the flu vaccine at Torbay Hospital.

JB

10.2 Disability Awareness Action Group

There have been no reports for this Group. CGM referred to the Governor Observer Protocol in which it states:

'Governor observers attending the Charitable Funds Committee, Torbay Pharmaceuticals Board, Joint Equalities Cooperative, Disability and Awareness Action Group and Infection Prevention and Control meeting are not required to submit a report after every meeting, but will be expected to provide a six-monthly written report to Q&CC. A different report is required for these meetings because these governor observers are not members of Q&CC.'

It was **agreed** to ask the Governor Observer on this Group to submit a report covering the meetings held in 2018 to the next Q&CC meeting in November.

CGM

11. Decide whether to invite speaker(s) to the next meeting

It was suggested to ask Jane Viner, Chief Nurse, to the next meeting to talk about new clinical roles.

CGM/JB

Details of future meetings

Wednesday 14 November 2018

10am – 12pm

Executive Meeting Room, Hengrave House, Torbay Hospital.

2019

All Wednesdays 2pm – 4pm in the Boardroom

13 March

12 June

4 September

13 November

MINUTES OF THE QUALITY AND COMPLIANCE COMMITTEE MEETING

HELD IN THE EXECUTIVE MEETING ROOM, HENGRAVE HOUSE, TORBAY HOSPITAL

AT 10AM ON WEDNESDAY 14 NOVEMBER 2018

Peter Coates (PC)	* Lynne Hookings (LH)
Craig Davidson (CD)	* Paul Lilley (PL)
* Carol Day (CDy)	* Wendy Marshfield (WM) – Chair
Annie Hall (AH)	* David Hickman (DH)
Pat Harris (PH)	* Elizabeth Welch (EW)

*Denotes member present

In attendance

Susan Martin, Quality Lead (QL)
 Monica Trist, Corporate Governance Manager (CGM)
 Jenness Barber, note taker (JB)

1. Apologies

Claire Burton (Quality and Compliance Manager), Peter Coates, Craig Davidson, Annie Hall, Pat Harris.

2. Minutes of the last meeting

The minutes of the last meeting dated 19 September 2018 were **agreed** as accurate.

3. Matters arising

- **Ref agenda item 4**
 CQC Inspection Report – CGM to check with Jane Viner, Chief Nurse, if this can go to December CoG. WM asked that the CQC Well-led inspection report could go to March CoG and would also like the new Trust Structure to go to CoG as well. CGM
- **Ref agenda item 6**
 WM mentioned that some governors have been asking if the Governors' Comms Log could be sent to governors on a monthly basis. CGM said this would prove very difficult as questions can sometimes take longer than this to resolve. PL stated that it was agreed at a Council of Governors meeting that it is sent on a quarterly basis to governors and this timescale should be maintained. WM said she would feed this back to the governors concerned. WM

There was discussion regarding governors' access to ICON. CGM said she would be sending the agreed response to questions raised by governors after this meeting. CGM

Action

CGM

WM

CGM

- **Ref agenda item 8**
This is on today's agenda.
- **Ref agenda item 9.4**
CGM has added the question on 'patient hoists' to the Comms Log.
- **Ref agenda item 9.6**
Neal Foster has been invited to December CoG to talk about waiting times.
- **Ref agenda item 9.7**
CGM has spoken to Sally Taylor, chair of Audit Committee, regarding other governors attending Audit Committee as observers on a one-off basis. Sally agreed this would be ok and to let her know in advance of any meeting which extra governor would be in attendance.

There was discussion regarding the recent closure of theatres.

- **Ref agenda item 10.2**
WM reported that she had spoken to the Governor Observer for DAAG and asked why there had been no reports. WM was informed that some of the information would be taken from the minutes and that the minutes are not received in a timely fashion. CGM to ask for a summary report for the next Quality and Compliance Committee meeting and to also enquire as to the timeliness of the minutes being sent to the Governor Observer.
- **Ref agenda item 11**
Jane Viner's diary has not permitted her to be present at today's meeting but she has been invited to the next meeting in March.

CGM
CGM

4. **CQC update**

JB handed out paper copies of the CQC update from QCM.

Some members of this Committee felt that the readmissions figures are higher than those reported in the Board Assurance Framework. WM commented that an audit had been done but she has not seen anything since. CGM will ask Jane Viner and Jacqui Lyttle about a presentation for the next Quality Assurance Committee meeting.

CGM

John Harrison, Interim Chief Operating Officer, will be giving a presentation on Intermediate Care – CGM to email governors prior to December CoG drawing governors' attention to this item on the agenda.

CGM

QCM's update was as follows:

CQC-Provider Engagement Meeting

These one-day, quarterly meetings, form part of the ongoing monitoring by the CQC of the Trust, in-line with the CQC's strategy. The CQC set the agenda.

01-Nov-18 meeting:

- Attended by Mandy Williams (CQC Inspection Manager) and Sharon Hayward-Wright (CQC Inspector)
- Liz Davenport joined the Business as Usual meeting for initial introductions with the new Inspection Manager and a general update on the TSDFT.
- Three TSDFT services were visited at the CQC's request, and with prior notice, each following recent inspection findings and improvement activity: Maternity, Fracture Clinic and the Mortuary. A very positive opportunity well-taken by all

service leads to demonstrate the improvements made.

Next meeting:

- Approximately Mar-19.
- Focus will be on Community

Well-led self-assessments

- At the TSDFT Board Development session on 07-Nov-18, the Board discussed their self-assessment against the Well-led KLOEs from the shared CQC and NHSI framework. This is an approximately annual review, last performed in Nov-17. The discussion will be written into one self-assessment and submitted to the Board in Jan/Feb-19.
- In the Oct-18 CQC Assurance Group meeting, the SDU leadership teams agreed to undertake their Well-led self-assessments.

Audit South West's audit of TSDFT's response to CQC findings

The focus of the review was to identify the implementation status of a sample of 'must do' and 'should do' recommendations from the 2018 inspection, and from previous inspections in 2017 and 2016, whilst considering the Trust's monitoring and governance arrangements in respect of the CQC Action Plan.

The final report was issued by Audit South West on 07-Nov-18. The overall assurance opinion on the design and operation of controls for the CQC Action Plan process was Satisfactory.

TSDFT's CQC Inspection, report published May 2018

- Work towards completion of the Requirement Notice action plan continues and is reviewed at CQC Assurance Group meetings. The last planned completion date for an action is 31-Mar-19.
- Additions to the proposed Should Do Improvement Management Plan are being made following feedback from the TSDFT Board and the Audit South West's audit report. The intention is to gain approval for the plan in early Dec-18.

5. Quality update

Susan provided an update of the CQUINs and Quality Accounts. The Quarter 2 CQUINs had been presented to Quality Improvement Group (QIG) and treatment of sepsis in ED (failed target) had been highlighted. The ED team had been contacted to undertake a review to understand the issues and potential improvements. The flu target was running at about 42%, in line with other local trusts. A suggestion had been made at QIG about using roving vaccinators and Susan had taken an action to go back to Jane Viner and Judy Falcão to explore. Susan noted this was something the RD&E had done and which had contributed to their 80% vaccination rate.

Jane Viner had provided an update to the Board on the Q1 and Q2 quality accounts. NHS Quicker had been shortlisted for HSJ awards and Times Higher Education Awards (the Oscars of academia) for tech innovation of the year. Team were produced to have been nominated across 2 sectors. NHS Quicker is due to go live in Somerset in the next month.

Devon County Council have invited QL to give Quality update.

6. Healthwatch

Printed copies of the update from Pat Harris were handed out as she had sent her apologies.

WM reported that she had attended the Healthwatch AGM last week. The Children and Young Persons Audit will be published in December and the police have asked for a copy of this report to support them in developing services for young people in the Bay. CGM to ask Liz Davenport for the report from when Healthwatch came into ED.

CGM

QL asked about communications between Devon Healthwatch and Torbay Healthwatch. WM advised that there doesn't seem to be a formal process for communication between Devon and Torbay and they seem to work separately. WM explained that herself, CDy and LH attended a meeting with PH a few months ago and PH advised that the current funding situation was giving cause for concern.

QL said she would look in to Devon Healthwatch when doing the next Quality Account.

7. Review Committee effectiveness

This was discussed at the last meeting and the Committee approved the Terms of Reference. Members felt that the Committee was operating effectively and in accordance with its Terms of Reference.

8. Agree annual workplan

QL suggested the addition of the governance structure with tbc date. It was **agreed** CGM would update the workplan.

CGM

9. Feedback from governor observers

9.1 Safeguarding/Inclusion Group

There have been no meetings since the last Quality and Compliance Committee meeting.

WM informed the Committee that AH had attended the Torbay Safeguarding Forum County Lines on 17 October and provided a copy of the presentation from this event. WM asked if this could be circulated to all governors. CGM said she would check with the organisers.

CGM

9.2 Quality Improvement Group

Ken Allen attended 11 September meeting and the Committee noted his report.

The Committee asked if the new Company Secretary could present to CoG regarding the Governor Observer role and how it should be reported.

9 October report was discussed. DH raised the issue of taking pictures of patients' ulcers and will take this forward as a quality issue as risk to patients. QL said there is a difference in supply of pressure relieving equipment in the community and the acute.

DH
CGM

LH attended 13 November meeting and commented on the timings of the agenda items in that it was a very long meeting and not enough time on the agenda to cover all the items. LH read out the rest of her report and said she would forward it to the FT office.

9.3 Workforce and Organisational Development Group

PL reported that it was a packed agenda at the last meeting and could possibly have been managed better. PL went through his report saying there were some good challenges. PL to feed back at next Q&CC meeting regarding exceptions raised. Discussion followed regarding non-clinical staff members helping out on wards.

9.4 Capital Infrastructure and Environment Group

EW reported that this Group has a huge area to cover and that Lesley Darke controls the meetings very well, the meetings run on time and people have prepared in advance of the meetings. EW then went through her reports. WM asked if CoG can have an update on the SEP appointment.

9.5 Finance, Performance and Investment Committee

Apologies from PC as no report for 25 September meeting. The Committee noted 30 October report.

9.6 Quality Assurance Committee

The Committee noted the report. WM reminded the Committee that Neal Foster, DGM for Surgical SDU, provided a quality assurance report at the August Board to CoG meeting, with particular reference to management of patients on waiting lists and a further update will be brought to December CoG.

9.7 Audit Committee

CDy attended 19 October meeting. This report links to the IM and IT Group report.

9.8 Information Management and IT Group

The reports were noted.

10. Reports from Non-Members

10.1 Infection Prevention and Control Group

CDy reported that the IPC policy is being updated and that she will complete her report once this has been done.

10.2 Disability Awareness Action Group

See agenda item 3 Matters arising – Ref agenda item 10.2.

11. Prepare / discuss report to Council of Governors 12 December 2018

Not discussed.

12. Decide which governor(s) attends the Quality Account stakeholder meeting

Not discussed.

13. Decide whether to invite speaker(s) to the next meeting

See agenda item 3 Matters arising – Ref agenda item 11.

CGM

Details of future meetings

All Wednesdays 2pm – 4pm in the Boardroom

13 March

12 June

4 September

13 November

DRAFT

NOTES OF THE MEMBERSHIP GROUP MEETING

HELD AT 2PM ON TUESDAY 7 AUGUST 2018

IN THE BOARDROOM, HENGRAVE HOUSE, TORBAY HOSPITAL

Bob Bryant (BB) * Barbara Inger (BI)
* Lynne Hookings (LH) Mary Lewis (ML)
* Annie Hall (AH) * Anna Pryor, Staff Governor (AP)

* Denotes member present

In attendance

Jacqui Gratton, Head of Strategic Communications (JG)
Claire Rowe, Digital Communications (CR)
Monica Trist, Corporate Governance Manager (CGM)
Jenness Barber, note taker (JB)

1 Apologies

Apologies were received from Charlie Helps (Interim Company Secretary), Mary Lewis.

2 Minutes of the last meeting and action tracker

The notes of the last meeting held on 8 May 2018 were confirmed as accurate.

See separate action tracker – the Group went through the action tracker.

3 Matters arising

- LH informed the Group that the 1st June Volunteers Tea Party was very successful. CR added that 28 new member application forms were completed on the day.
- Contact with schools: AH asked how schools are targeted and LH reminded the Group that schools have previously been targeted by a letter from the Chairman and visits to schools by CGM which was not very successful. It was suggested that South Devon College is visited again as this was successful last time.
- There was discussion regarding an action from 8 May meeting about how much money is left in the Membership Group kitty. BI questioned that if membership is a requirement of the Trust shouldn't funds be readily available to progress this? BI also mentioned that she feels there ought to be a designated membership role in the Trust. CGM pointed out that CH had proposed this in his report to the last CoG.
- It was noted that 'Have your say' cards will need the new NHS logo when reprinted.

ACTION

AP

CGM/JB

4 **DSI/Comms briefing**

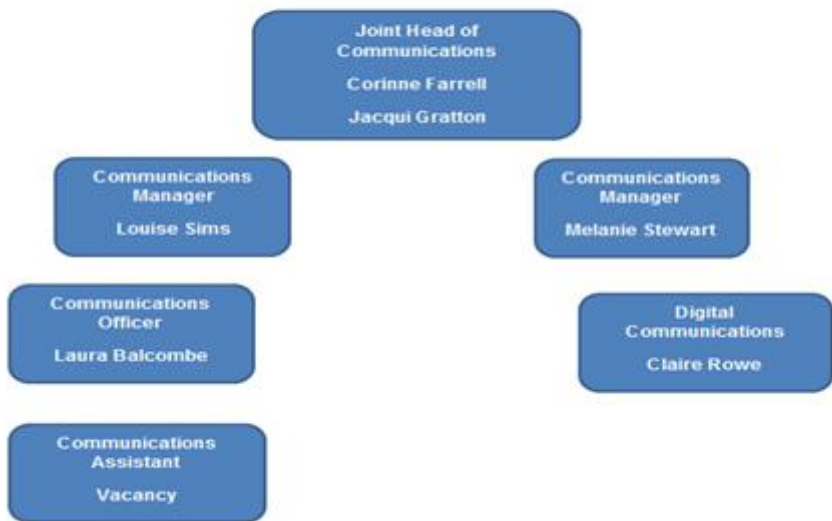
LH welcomed Jacqui Gratton (JG). JG introduced herself and informed the Group that she job shares with Corinne Farrell and that most of the Comms Team work part-time there is only one full-time member of staff.

JG presented the following presentation:



Communications

Jacqui Gratton
Head of Strategic Communications



What we do

- Communications Strategy
- Media Relations
- Internal Communications
- Web and Intranet
- Social Media
- Briefings
- Stakeholder Comms inc newsletter
- CX Report
- Communication planning
- Supporting localities

Our vision

- Wording and leaflet
- Workshops with stakeholders
- Our Journey poster and video
- Initially for staff
- Development of stakeholders
- Plan to ensure it is everywhere!

Localities

- Each locality has a communications lead
- Support the locality
- Each locality has different needs
- Coastal – Teignmouth engagement
- Moor to Sea – Dartmouth

Contact Us

- Jacqui Gratton 01803 210511
- Claire Rowe 01803 217399
- General 01803 217398

- Communications.tsdf@nhs.net

Questions?

It was suggested having a Membership Stand at the September open day in Dartmouth. JG will speak to Corinne Farrell who looks after Moor-to-Sea and will let CGM know details.

JG/CGM

LH thanked JG.

5 **Comms update/report**

CR gave a handout of new members' figures from September 2017 to April 2018.

Apprenticeship open day	38
Open days	4
Membership stand	17
Contact cards	15
Social media	41
Torbay Hospital	4
Friends	17
MP	2
Ex-employees	1
Online	5
PPG member	1
Previously a governor at another Trust	1
	146

CR stated that the most popular member generators are face to face with 59 new members followed by social media 41 new members.

JG encouraged the Group to talk to people and to be aware of the benefits of membership which can be found on the membership page of the public website www.torbayandsouthdevon.nhs.uk

LH offered to put a case forward for membership recruitment events.

CGM will send information to CR to advertise the 21st September Annual Members Meeting.

CGM/CR

CR talked through plans for the next three months August to end of October:

- Social media
 - General Membership messages
 - Number of members and what they get from being a member
 - Messages fortnightly about Annual Members Meeting
 - One paid advert suggest if funds still there late August
- Internal Comms
 - Quarterly request for staff to ask Friends and Family to become members – bulletin and screensaver
 - Annual Members Meeting general invite – bulletin, latest news, stakeholder, screensaver end of August and middle of September
 - Posters and leaflets around Main Entrance – including screens when running
 - GP tie in with CCG screen poster
- Face to face opportunities

LH felt that face to face is very successful.

LH thanked CR for her input.

6 Feedback and Engagement Team (Complaints & PALS/CLICC) report

CGM pointed out that the format of the report is the same as when Hayley Warrilow presented it at the last Membership Group meeting.

- CR and JG left the meeting at this point.

LH queried the paragraph just before Chart 2 on page 1, CGM offered to clarify with Hayley.

CGM

7 Update from the Working with Us Panel

The update from Cathy Bessent was noted.

BI said she had spoken to April Hopkins, Staff Governor, about adding a sentence regarding membership to patients' appointment letters. LH pointed out to the Group that this had already been investigated in the past and that it had been agreed that the Trust felt this was not an appropriate method of communicating regarding membership.

8 Membership recruitment

Youth Engagement

AP reported that she had met with Chris Matthews, from South Devon College, to explore the possibility of getting some student volunteers to help design a new poster to encourage Trust Membership. Chris has now provided AP with some examples of posters designed by level 3 Creative Media students. He explained that they did this as a short project just before end of term and offered to revisit this in the next academic year.

Following are the examples provided:

1

HAVE YOUR SAY

- Help improve local services.
- Access a range of exciting discounts.
- Access to information on jobs/apprenticeships.
- Receive invitations to special events and meetings.
- Receive a monthly newsletter with the latest 'Trust News'

BECOME A TRUST MEMBER AND MAKE A DIFFERENCE

www.torbayandsouthdevon.nhs.uk/members

Membership is free!
Sign up online today.

@TorbayAndSouthDevonFT
 @TorbaySDevonNHS
 Call: 01803 655705
 Email: foundation.trust.tsdf@nhs.net

2

HAVE YOUR SAY NHS

www.torbayandsouthdevon.nhs.uk/members

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MEMBERSHIP IS FREE
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Call: 01803 655705
 Email: foundationtrust.tsdf@nhs.net

Help improve local services
 Access a range of exciting discounts.
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 Receive invitations to special events and meetings.

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 Foundation Trust
 Torbay Hospital
 Lowes Bridge, Torquay TQ2 7AA

@TorbaySDevonNHS
 @TorbayAndSouthDevonFT

3

- Help improve local services.
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- Receive a monthly newsletter.
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HAVE YOUR SAY

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@TorbayAndSouthDevonFT
 @TorbaySDevonNHS

BECOME A TRUST MEMBER AND MAKE A DIFFERENCE!

HELP SHAPE THE FUTURE OF LOCAL NHS

4

NHS
 @NHSEngland

What we will do for you!

- Help to improve local services
- Access a range of exciting discounts
- Access to information on jobs/ apprenticeships
- Receive a monthly newsletter with the latest trust news
- Receive invitations to special events and meetings

Sign up today with free membership!
www.torbayandsouthdevon.nhs.uk/members

If you don't have access to a computer please write to:
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Foundation Trust
Torbay Hospital
Lowes Bridge, Torquay TQ2 7AA

5

Torbay and South Devon
NHS Foundation Trust

Here For You
 Today
 Tomorrow
 Forever

6

HAVE YOUR SAY.

@torbayandsouthdevonft
 @torbaySdevonNHS

7

Website: www.torbayandsouthdevon.nhs.uk/members
Tel: 01803 655705
Email: foundationtrust.tsdf@nhs.net
Facebook: @TorbayAndSouthDevonFT
Twitter: @TorbaySDDevonNHS

NHS
Torbay and South Devon
NHS Foundation Trust

HAVE YOUR SAY

Help improve local services
Access a range of exciting discounts
Access to information on jobs/apprenticeships

Receive a monthly newsletter - with the latest Trust news
Receive invitations to special events and meetings

Help shape the future of your local NHS **SIGN UP TODAY!**
TRUST MEMBERSHIP

8

Join NOW!

Trust Membership

HAVE YOUR SAY!
Help shape the future of your local NHS

Help improve local services
Access a range of exciting discounts
Access to information on jobs/apprenticeships

Receive a monthly newsletter - with the latest Trust news
Receive invitations to special events and meetings

9

HAVE YOUR SAY

Help improve local services
Access a range of exciting discounts
Access to information on jobs/apprenticeships

Receive a monthly newsletter with the latest Trust news
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SIGN UP TODAY!
Membership is free!

Help shape the future of your local NHS

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NHS

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**BECOME A TRUST MEMBER
AND MAKE A DIFFERENCE**

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If you don't have access to a computer please write to:
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Foundation Trust
Torbay Hospital
Lowes Bridge, Torquay TQ2 7AA

f NHS **t** @NHSengland

11

NHS

HAVE YOUR SAY!

Age
Public Health
England

The Group discussed the poster designs and it was agreed to go back to the College when the students return in September to hopefully refine the designs and make a definite choice. The favourites were 6, 7 and 10.

It was **agreed** that LH will write to the Chairman about 'formalising' the Membership Group's involvement with the College and their wish to address the students during the next term in respect of Trust Membership/Health issues etc (ie a mini Medicine for Members specifically for the students).

LH

The Group suggested a reward for the student who designs the chosen poster.

AP wondered if there could be a Medicine for Members for young people. LH said she would be happy to take this forward.

LH

9 Discuss material for 21 September 2018 Annual Members Meeting (AMM)

CGM reported that three presentations will be taking place:

A medical item – Breast Care
Governors – Lynne Hookings
Dementia – Norms McNamara

These will be on the agenda together with the required statutory items from the Chairman, Interim Chief Executive and Lead Governor.

10 Review of agenda for 15 August 2018 Board-to-CoG meeting

CGM ran through the agenda items.

11 Healthwatch

LH advised that members can access information on the Healthwatch website.

12 Any Other Business

None.

Details of future meetings

Tuesdays 2pm – 4pm in the Boardroom, Hengrave House

2018

6 November

2019

5 February

7 May

6 August

5 November

NOTES OF THE MEMBERSHIP GROUP MEETING

HELD AT 2PM ON TUESDAY 6 NOVEMBER 2018

IN THE BOARDROOM, HENGRAVE HOUSE, TORBAY HOSPITAL

Members

- * Bob Bryant (BB)
- * Lynne Hookings (LH)
- * Annie Hall (AH)
- * Barbara Inger (BI)
- * Mary Lewis (ML)
- * Anna Pryor, Staff Governor (AP)

* Denotes member present

In attendance

Cathy Bessent, Deputy Chief Nurse (CB)
Dawn Butler, Deputy Director of Strategy, Performance and Planning (DB)
Monica Trist, Corporate Governance Manager (CGM)
Jenness Barber, note taker (JB)

ACTION

1 Apologies

Apologies were noted from Claire Rowe.

2 Minutes of the last meeting and action tracker

The notes of the last meeting held on 7 August 2018 were confirmed as accurate.

See separate action tracker – the Group went through the action tracker.

3 Matters arising

- The Group discussed having access to the staff intranet ICONetwork.

4 Patient Experience Collaborative and how it operates

LH welcomed Cathy Bessent, Deputy Chief Nurse.

CB presented the following presentation: Patient Experience Network

Patient Experience Network

October 2018

Measuring Patient Experience In TSDFT

Traditional approaches

- Friends and Family Tests
- National Surveys
- Patient Stories
- Working with Us panel
- Compliments and Complaints

Limitations

- Not real time
- Potentially unrepresentative of wider experience
- Data not collected with improvement in mind

Patient Experience Collaborative

- Year long project funded by LoF
- One of 12 Trusts across Britain
- Facilitation and 5 Collaborative sessions during the year



The project

- 25 point questionnaire
- Administered by **paid** non clinical staff to patients each month
- 8 project wards -5 acute, 3 community
- Real time feedback
- Data presented to show trends
- Free text comments
- Wards undertake small improvement projects
- Share across the project areas and with project teams

(CB pointed out this was a 22 point questionnaire not 25 as it states in the slide)

The process

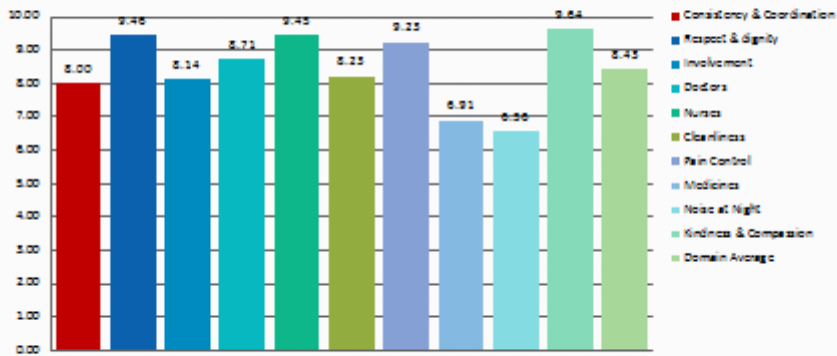
- 25 point questionnaire
- Grouped into themes
- Patients asked for any free text comments
- Results entered into a programme –data feedback
- *Consistency/coordination*
- *Involvement*
- *Doctors*
- *Nurses*
- *Cleanliness*
- *Pain control*
- *Medicines*
- *Noise at night*
- *Kindness/compassion*

(CB pointed out this was a 22 point questionnaire not 25 as it states in the slide)

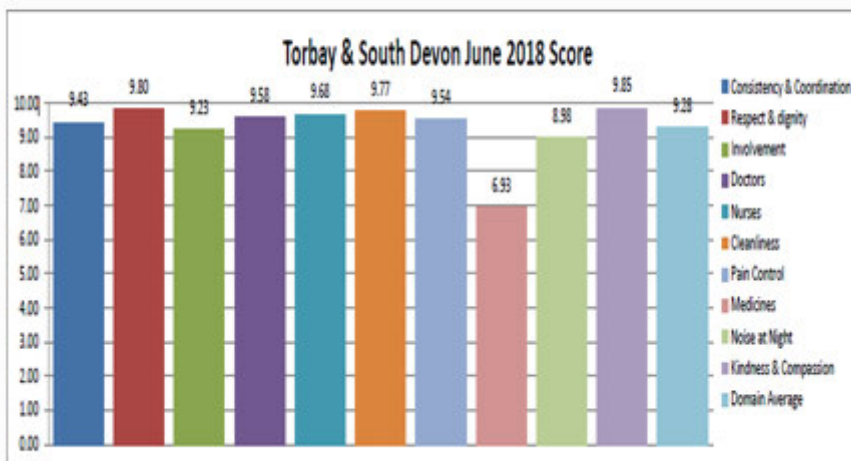
Feedback /actions

- Real time
- Displayed for staff and patients/ visitors
- Disseminate to all staff in the area
- Share and learn internally with project wards
- Assess for trends over time
- Data for improvement
- Small improvement projects
- Sharing and learning

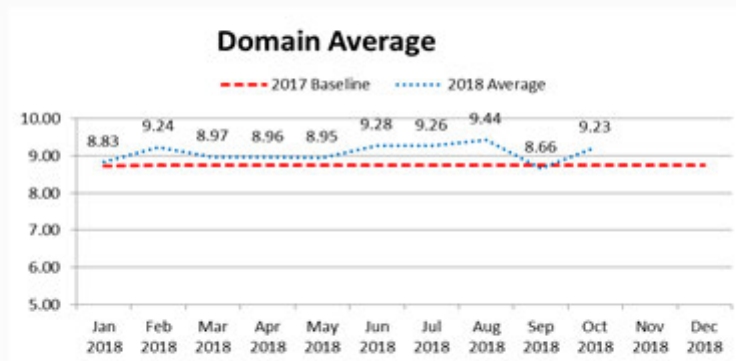
Baseline



Combined results



...and now



The doctor keeps me informed of my treatment but the nurse translates the doctor's information. I can't find fault anywhere in this ward. I'm on holiday but would I'd rather be here than in my local hospital in Worthing.

I had very good attention to my pain and all the staff washed their hands or had gloves on, so there was a barrier there.

The only improvement would be to suggest that there are more staff needed in my opinion they are very short staffed. Then I wouldn't have waited 45 minutes for pain relief.

This is a fantastic hospital, it is wonderful the best I have been in. The doctors are excellent they treat me very well. The nurses are kind really polite and very helpful. This is a "tip top place".



Strengths and limitations

Strengths

- Data collection /real time feedback
- Actions oriented
- Sharing good practice
- Project visibility
- Medical staff involvement
- Joy in work

Limitations

- Engagement at ward level
- Manpower (8-9hrs per ward)
- Delivering negative feedback
- Data collection tool
- Bed based applicability

What has gone well?

'In the midst of winter pressures and the challenges associated with this time of year, this project really rewards the staff who continue to do their best'



Next steps

- Widening the scope across the organisation
- Creating a resilient data collection process
- Mapping to our volunteer patient experience survey
- Building on joy in work – connecting the purpose of healthcare to those not in patient contact

LH thanked CB for her presentation.

5 **DSI update on directorate to include Annual Plan**

LH introduced Dawn Butler, Deputy Director of Strategy, Performance and Planning.

DB explained that she works with Ann Wagner, Director of Strategy and Improvement.

The Directorate includes the Quality Improvement Team, Performance and Planning, Communications and IT.

DB explained the support and planning role of the Strategy and Improvement Directorate and then went through the Quarterly Report of the Directorate of Strategy and Improvement that went to 3 October Trust Board (ref: this report was included with the meeting papers for today's meeting).

The Group then expressed their frustration at what they see as a lack of support from the directorate around communications and engagement. In particular they highlighted:

- Not sending mail/newsletters to members who don't access email eg very poor public members attendance at the Annual Members Meeting
- Lack of consistent attendance at their meetings by the Comms Team
- Outstanding actions dating back to April 2017 for Comms Team
- Not having a weekly Herald Express editorial from Liz as Mairead used to do
- Not having anything in the Dartmouth Chronicle about the HWBC plans in the last month

DB said she would discuss the Group's concerns with Ann Wagner.

LH thanked DB for attending the meeting.

6 Comms update/report

It was noted there was no update/report from the Comms Team.

7 Feedback and Engagement Team (Complaints & PALS/CLICC) report

The Group accepted the report.

8 Update from the Working With Us Panel

The Group noted the update from Cathy Bessent.

9 Membership recruitment

BI informed the Group that she had printed some information from the public TSDFT website regarding becoming a member, and also information on becoming a governor, which she handed out at the last Teignbridge Constituency meeting.

- Hospital Radio
BI brought a booklet to the meeting called 'Patients Guide Torbay Radio' which she came across in Torbay Hospital a couple of weeks ago and was wondering if it would be worthwhile asking Hospital Radio if they could broadcast something about becoming a member. LH said that although this avenue had been pursued before it had not yet yielded any success. To explain, LH had approached Hospital Radio when they were present at the Volunteers annual Tea Party. It was agreed BI would take this forward. BI
- Membership Stand at Newton Abbot and Dawlish leisure centres
CGM has made contact with the leisure centres and the offer of space in the reception areas for a table top stand has been accepted by LH. Dates to be agreed with the leisure centres. CGM to forward contact details to LH. LH
CGM
- 'Roadshow' at South Devon College
LH has arranged for a 'Roadshow' to be held at South Devon College in February

2019. The Group discussed young people wishing to become governors. 16 year old students would probably not be able to commit for the full 3 year term – CGM said she would discuss a student governor role with the Company Secretary. Hopefully before the end of November AP would attend South Devon College to present Membership of the Trust to all H&C students.

CGM

AP

The Carers centre on Kings Street, Brixham, which is run by Torbay and South Devon NHS Foundation Trust, is hosting a free event for unpaid carers. The event coincides with the Brixham Christmas market, fireworks and Christmas lights switch-on as part of the town's 'Lanterns, Lights and Luminations' celebrations. The Group thought this would be a good opportunity for engagement with Carers and it is also Carers Rights Day at the end of the month.

The Group would like a membership paragraph adding to the Health and Care Insights newsletters. CGM to discuss with Comms Team.

CGM

10 **Agree Governor Literature e.g. Handbook and recruitment leaflet**

The Group discussed the new membership leaflet. LH informed the Group of a contact she had made through the League of Friends and, with the Group's approval, she would ask him to redesign the leaflet. This would be free of charge. The Group agreed.

LH

LH reported that Lesley Darke has ordered 30 leaflet holders with business card pockets and has offered to look at the leaflet as well.

11 **Healthwatch**

It was noted the link to the Healthwatch Torbay website was on page 1 of the agenda.

12 **Any Other Business**

There was no other business.

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2019

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7 May

6 August

5 November