

Minutes of the Meeting of the Council of Governors (In Public)
10 December 2020, 16:00 – 18:00, via Microsoft Teams

Name	Title	Initials
Members:		
Gillian Norton	Trust Chairman	Chairman
Mia Bayles	Public Governor, Rest of England	MB
Alfredo Benedicto	Appointed Governor, Healthwatch Merton	AB
Anneke de Boer	Public Governor, Merton	ADB
Val Collington	Appointed Governor, Kingston University	VC
Jenni Doman	Staff Governor, Non-Clinical	JM
Sandhya Drew	Public Governor, Rest of England	SD
John Hallmark	Public Governor, Wandsworth	JH
Hilary Harland	Public Governor, Merton	HH
Nasir Javed Khan	Public Governor, Merton	NJK
Sarah McDermott	Appointed Governor, Wandsworth Council	SMD
Richard Mycroft	Public Governor, South West Lambeth (Lead Governor)	RM
Dr Sangeeta Patel	Appointed Governor, Merton & Wandsworth CCG	DSP
Stephen Sambrook	Public Governor, Rest of England	SS
Anup Sharma	Staff Governor, Medical & Dental	AS
Bassey Williams	Staff Governor, Allied Health Professionals	BW
In Attendance:		
Humaira Ashraf	Acting Chief People Officer – Culture (item 2.2 only)	ACPO-C
Ann Beasley	Non-Executive Director	AB-NED
Alison Benincasa	Director of Quality Governance & Compliance (item 3.1 only)	DQGC
Elizabeth Bishop	Non-Executive Director	EB-NED
Stephen Collier	Non-Executive Director	SC-NED
Parveen Kumar	Non-Executive Director	PK-NED
Simon Price	Culture Champion (item 2.2 only)	CC
Tim Wright	Non-Executive Director	TW-NED
Jacqueline Totterdell	Chief Executive Officer	CEO
Stephen Jones	Chief Corporate Affairs Officer	CCAO
Tamara Croud	Head of Corporate Governance/Board Secretary	HO CG-BS
Richard Coxon	Membership & Engagement Manager (Minutes)	MEM
Observing:		
Tunde Odutoye	Governor Elect, Medical and Dental Staff	TO
Apologies:		
Nasir Akhtar	Public Governor, Merton	NA
Afzal Ashraf	Public Governor, Wandsworth	AA
Nick de Bellaigue	Public Governor, Wandsworth	NDB
Frances Gibson	Appointed Governor, St George's University	FG
Marlene Johnson	Staff Governor, Nursing & Midwifery	MJ
Basheer Khan	Public Governor, Wandsworth	BK
Rebecca Lanning	Appointed Governor, Merton Council	RL
Pui-Ling Li	Associate Non-Executive Director	ANED
Doulla Manolas	Public Governor, Wandsworth	DM
Damian Quinn	Public Governor, Rest of England	DQ
Donald Roy	Appointed Governor, Healthwatch Wandsworth	DR
Ataul Qadir Tahir	Public Governor, Wandsworth	AQT

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1.0	OPENING ADMINISTRATION	
1.1	<p>Welcome and Apologies</p> <p>The Chairman welcomed everyone to the meeting and noted the apologies as set out above.</p>	
1.2	<p>Declarations of Interest</p> <p>There were no new declarations of interests reported.</p>	
1.3	<p>Minutes of the meeting held on 10 September 2020</p> <p>The minutes of the meeting held on 10 September 2020 were approved as a true and accurate record.</p>	
1.4	<p>Action Log and Matters Arising</p> <p>The Council received the action log and agreed that COG.09.07.20/03 (Care Quality Commission Update) could be closed as a paper responding to this was on the agenda (item 3.1). The only other action on the action log was not yet due.</p>	
2.0	KEY ISSUES	
2.1	<p>Chief Executive Officer's Report</p> <p>The Council of Governors received the report from Jacqueline Totterdell, Chief Executive Officer (CEO), who highlighted the following key points:</p> <ul style="list-style-type: none"> • The Trust continued with its flu vaccination programme with 76.5% staff having received the vaccine to date. This was less than the same period in the previous year but the Trust remained a strong performer in the update of flu vaccinations both across London and nationally. The Trust aimed to have provided more than 90% of staff with the flu vaccination by year-end. • The Trust had received £2.5m to drive improvements in its Emergency Department (ED). Building work was underway and the improvements would provide more space in cubicles to treat patients, an expanded waiting and check in area, and provide a covered walkway to enter the ED. Given the decision (by the Trust and local commissioners) to close the Urgent Care Centre at Queen Mary's Hospital (QMH) during the pandemic a new Enhanced Primary Care Hub had opened to provide important services to local people. • The Trust Board had appointed Paul de Gama as Chief People Officer and he would join the Trust on 8 February 2021. • The Trust's 2020 staff survey responses rate was currently 55.3%, though this would likely move upwards following validation of responses over the coming weeks. This was lower than in 2019 (59.5%) and was partly due to a 'broken' hyperlink sent to staff which was undiscovered for a couple of weeks. This was rectified and Picker, which was managing the survey, would validate the response rate and final results were expected to be published in late January 2021. • While managing the second surge in Covid-19 cases, the Trust continued to deliver emergency, urgent and elective care to patients. There were lower attendances (92%) in the emergency department but the acuity of these patients was high. The 	

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	<p>Trust was currently achieving 94.5% against the 4-hour standard in the emergency department. The Trust was also making good progress on clearing the diagnostics backlog.</p> <ul style="list-style-type: none"> • The number of Covid-19 patients at the Trust had risen significantly over the previous week. There were currently 21 Covid-19 patients in the Intensive Care Unit and 102 Covid patients on general and acute wards. Sadly, since March 2020, 329 patients had died at the Trust within 28 days of a positive Covid-19 test. • The Trust had been designated as one of the five Covid-19 vaccination hubs in London. People aged 80 or over, high risk or shielding patients, clinical and residential care staff, and high risk staff had been prioritised to receive the vaccine. In response to a question from a Governor, it was noted that the Covid-19 vaccination, as a controlled drug, was stored securely in an area that was monitored by the Pharmacy Department and had security cameras installed. • The Trust had made good progress on the Culture, Diversity and Inclusion programme. The Trust Board, in November 2020, heard directly from Speech and Language therapists about how they had used the race conversation toolkit which had been developed by the Trust to facilitate discussions within their team about race. They had developed actions to drive improvements within their teams which they were now sharing more widely across the Trust. The team was also working with external stakeholders to improving Black Asian and Minority Ethnic (BAME) representation in the profession. To date, the Trust had trained 102 BAME staff representatives to sit on interview panels at Band 8A and above. The intention was to apply this model to Band 7 and Band 6 recruitment over the coming months. • The Trust had recently appointed three Deputy Chief Medical Officer's (DCMOs) – James Uprichard, DCMO for Safety and Clinical Effectiveness, Carolyn Johnson, DCMO for Innovation and Improvement, and Lucinda Etheridge, DCMO for Workforce and Professional Standards and Responsible Officer. • South West London Integrated Care System (SWL ICS) had been held out to be one of the best performing integrated care systems across the NHS. The Trust's CEO had been appointed as Senior Responsible Officer for outpatients in London and she would be working closely with partners across the capital to improve performance in outpatient care and experience. • The Trust had in place contingency plans for the end of the transition period following the UK's departure from the European Union. James Friend, Chief Transformation Officer, was leading engagement with NHSE&I on behalf of the Trust. • The Government had published its Food Review Report in October 2020 and the Board had appointed Robert Bleasdale, Acting Chief Nurse and Director of Infection Prevention and Control to be the named Board member responsible for food quality. • Following discussions at the Council of Governors meeting in September 2020, the Board had approved the business case for delivering a joint Renal Service with Epsom and St Helier (ESTH) at its meeting in November 2020. The Board also agreed a set of proposed options for developing the model of paediatric oncology service in SWL in partnership with the Royal Marsden Hospital. The Trust was also progressing with the development of a single procurement function for South West London in collaboration with partners in the SWL Acute Provider Collaborative. <p>The following key points were raised and noted in discussion:</p>	

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<p>In response to a number of questions from Sandhya Drew (SD), it was reported that the Trust's staff survey response rate, to date, was 55.3%. This was above national average. It was expected that this response rate score would improve further following the completion of the validation process by Picker. The Board fully recognised the need for cultural change within the organisation to tackle some of the endemic issues identified in the staff survey. A focused programme of work was underway to strengthen the Trust's culture, which was based on the model developed by NHSE&I. During 2020, the Trust had progressed with the diagnostic phase of the culture programme supported by staff culture champions from all areas of the Trust. In responding to Covid-19, many staff had demonstrated strong leadership and the Trust would continue its work to develop leaders across the Trust. A bespoke training programme had been developed with the King's Fund. The Trust had retained many of the support infrastructures put in place in the first wave of Covid-19. These included support from psychologists and occupational health to assist all staff. The Trust had also continued to complete Covid-19 risk assessments of staff members and had put in place appropriate steps and measures to safeguard the most vulnerable staff. The Trust had an influx of new staff with junior doctors and new nurses which may impact on the risk assessment rates.</p> <ul style="list-style-type: none"> In response to a query raised by Sarah McDermott (SM) it was reported that while the Trust was currently conducting 200 Covid-19 vaccinations per day with a good take-up from residential and care home staff, the aim was to increase these to more than 400 in the coming weeks. There were a number of operational challenges with delivering the vaccine, including the need for storing the vaccine at minus 70 degrees Celsius and the need to clean stations after each vaccination as well as leaving 15 minutes between each patient. The Trust was currently using a manual booking system which was slowing down the process but work was underway to automate the booking system. Other challenges related to uptake and in particular convincing over 80s to come onto the hospital site to have the vaccination. Sangeeta Patel (SP) also reported that her GP practice in Balham would start running Covid-19 vaccination clinics from 14 December 2020. The Chairman commented that the national situation and information about vaccinations was changing quickly and noted that it was a credit to the Trust's teams that the vaccination hub had been established so quickly and effectively. In response to Hilary Harland's (HH) query it was noted that the two options to deliver Children's cancer services across South West London in partnership with the Royal Marsden included an integrated Children's Cancer Service located in Tooting and an adopted risk network model in which high risk services were delivered in Tooting with other services delivered by the Royal Marsden. It was reported that the Trust was currently managing Covid-19 patients and using the intensive care unit capacity in line with the Trust's Covid-19, Winter and Flu plan. However, it was expected that demand for ICU capacity would increase over the Christmas and New Year period and the Trust would enact the relevant plans, responding as appropriate to the acuity of patients. This may involve deviations from the agreed plan and where this was necessary these would be documented for the Board to ensure that the reasons for such changes were clearly evidenced. In response to a question from John Hallmark (JH) it was noted that the Trust had not seen any adverse impact or additional attendances at the Trust's emergency department as a result of the changes to the minor injuries unit at Queen Mary's Hospital (QMH). The Trust had robust infection prevention and control measures which had been implemented as appropriate across all the Trust's sites. <p>The Council of Governors noted the report.</p>	

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2.2	<p>Culture Champion</p> <p>Simon Price, Culture Champion (CC) and former Governor, joined the meeting and outlined the work of the champions to develop the culture programme. The Council also welcomed Humaira Ashraf, Acting Chief People Officer–Culture (ACPO(C)), to the meeting. The Council received and noted the presentation and Simon Price highlighted the following material points:</p> <ul style="list-style-type: none"> • The Trust had used the NHS Improvement ‘Culture and Leadership Programme’ framework to drive the culture change programme. This approach had been used successfully by more than 100 other NHS trusts. The programme had three phases, Discover, Design, and Deliver. • The ‘Discover’ phase had taken six months to complete which had been delayed by the Covid-19 pandemic. There were 30 ‘culture champions’ supporting the delivery of the work. The culture champions had been recruited through an application process and ensured maximum diversity of staff type, banding, and ethnic background. • As part of the Discover phase the champions had conducted and reviewed Board member interviews, staff survey data, family and friends test data, survey tools, online staff questionnaires and patient experience data. The work also focused on values, bullying and behaviours in a pressured environment, and safety measures. • The findings from the Discover phased had been sent to staff to pulse check that the findings reflected the feedback received in the discovery and diagnostic phase. <p>The following key points were raised and noted in discussion:</p> <ul style="list-style-type: none"> • In response to a question from SD, it was reported that 150 people had responded to the survey on findings. This feedback would support the Trust to prioritise key actions in the next phase as it developed an action plan. The ACPO(C) reported that the work to define the final actions and prioritisation work would be completed over the coming months. To effect the right culture change would take some time but the Trust had made good progress, particularly in light of the operational pressures it had faced since the launch of this work as a result of the Covid-19 pandemic. The Trust had also seen good examples of culture improvements in recent months as staff responded to the pandemic. The Trust was developing the implementation plan with the view that this would be completed early in 2021. The focus would be on prioritising the key actions which would have the most impact in the shortest timeframe. Any actions taken would be mapped and linked to the Information Technology and Estates strategies where appropriate, which were key areas of staff concern. • SD further queried the timescales and asked why the work to strengthen culture had not progressed more quickly and questioned why it appeared that timescales for delivery had slipped. It was noted that the culture change programme had started prior to the pandemic, but the timescales had been impacted by responding to the intense operational pressures the Trust had faced. Regardless of this, significant progress had been made and the diagnostics phase of the work had been undertaken with significant engagement with staff across the Trust. SD asked whether the Council could hold a meeting in January to discuss the action plan. The Chairman responded by commenting that it was important and appropriate that the Board had an opportunity to 	

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	<p>discuss and review the draft plan. The Workforce and Education Committee were scheduled to hold a discussion in early January and, subject to operational pressures, the Board hoped to consider an action plan at its meeting at the end of January.</p> <ul style="list-style-type: none"> Anup Sharma (AS) noted that only 10% of the workforce had been contacted for their views and asked how the Trust had sought the views of the remaining staff. It was reported that the culture programme had not relied on one source of information. Instead the Trust had built up intelligence from listening events, surveys, pulse checks, interviews and feedback from the representative champions and other data related to staff to inform the findings. HH it was noted that it was important that as the Trust progressed the culture programme measurable milestones and actions should be developed and the Trust should ensure that the vision, 'outstanding care every time' was at the forefront of any action plan. It was reported that the Trust planned to develop key metrics to monitor progress. It was also noted that more work would be conducted on developing and highlighting the Trust's values and vision. In response to a question raised by RM it was agreed that the Council of Governors meeting in February 2021 would include an item on the culture programme and that, subject to the Board's review of the plan, the action plan would be presented to the Council. <p>The Council of Governors received the report, thanked Simon Price and noted that the final version of the action plan would be shared with the Council of Governors.</p>	CEO
3.0	QUALITY	
3.1	<p>Care Quality Commission Actions Update</p> <p>Alison Benincasa, Director of Quality Governance and Compliance (DQGC), provided an update on the Care Quality Commissions (CQC) Action Plan following the 2019 inspection. The following key points were reported:</p> <ul style="list-style-type: none"> The 2019 CQC inspection had focused on five of the Trust's eight core services. The Trust continued to be rated as '<i>requires improvement</i>', and the CQC identified 46 improvement actions of which two were '<i>must dos</i>' and 44 were '<i>should dos</i>'. This was significant progress from the 2018 inspection where the Trust received 83 improvement actions of which 21 were '<i>must dos</i>' and 62 '<i>should dos</i>'. As a result of the improvements witnessed, the CQC had recommended to NHS England & NHS Improvement that the Trust be taken out of quality special measures and NHSE&I had taken the decision to do so in February 2020, with the formal announcement of the Trust's exit from quality special measures made in March 2020. The Trust had in place a comprehensive action plan to address both the must and should do actions identified by the CQC. Progress on implementing the actions had been impacted by the Covid-19 pandemic, however steady progress was being made across the organisation. Monthly progress reports were presented to the Patient Safety and Quality Group (PSQG) and the quarterly position was reported to the Quality and Safety Committee (QSC). The Trust also kept the CQC abreast of progress through regular engagement 	

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	<p>meetings.</p> <p>The following key points were raised in discussion:</p> <ul style="list-style-type: none"> In response to questions raised by HH it was reported that the Trust had embarked on a programme of auditing the recording of 'consent' across the various care groups. This audit would be completed in the coming months and reported to the relevant governance fora. Additional measures had also been put in place to support the secure storage of records. As well as purchasing additional lockable storage cabinets, regular checks were conducted by ward matrons and an additional check had been included in the 'Ward Accreditation Scheme'. In response to a question from Sarah McDermott (SM) it was reported that there was currently no fixed timeline for the CQC to undertake its next inspection of the Trust which would cover the three core services not covered by the 2019 inspection. The CQC had moved to a different inspection regime during the Covid-19 pandemic and at the present time it was not clear when the next inspection would take place. <p>The Council of Governors received the report.</p>	
4.0	GOVERNANCE	
4.1	<p>Membership Engagement Report</p> <p>Richard Mycroft (RM), Chair of Membership Engagement Committee (MEC), presented the update from the Committee meeting held on 18 November 2020:</p> <p>The Council of Governors:</p> <ul style="list-style-type: none"> Received and noted the update and membership and engagement plans for quarters three and four. Agreed to support the delivery of the engagement programme by providing local stakeholder contact details to the Corporate Governance team which would be used to develop a comprehensive stakeholder map; and Encouraged Governors to volunteer to record a video message which could be used on the Trust's social media platforms to promote the Trust, role of Governors and membership of the Trust. 	<p>CoG</p> <p>CoG</p>
4.2	<p>Governor Elections and Annual Member's Meeting Update</p> <p>Stephen Jones, Chief Corporate Affairs Officer (CCAO), introduced the report which covered the Annual Members' Meeting held on 10 September 2020 and results of the recent elections to the Council of Governors.</p> <p><u>The Annual Members' Meeting (AMM)</u> The Trust's AMM in 2020 had been held via MS Teams and had been live streamed on the Trust's YouTube platform. After overcoming initial technical issues, a total of 75 people had joined the meeting and there were a large number of questions from members and the public. Attendance figures and the number of questions were significantly higher than some other Trust had experienced during the pandemic. The recording of the meeting has since been viewed over 164 times which represented a good outreach. The Trust had undertaken a lessons learnt exercise which was presented in the report and this would be taken into account in the planning of the 2021 AMM, which was likely to be held virtually in light of the ongoing pandemic.</p> <p><u>Governor Elections</u></p>	

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	<p>Mia Bayles, Hilary Harland, John Hallmark and Richard Mycroft had been re-elected in the public constituencies. In the staff constituencies, Marlene Johnson (Nursing and Midwifery) was re-elected and Tunde Odutoye (Medical and Dental) was newly elected, however these constituencies were uncontested. Three new public governors would join the Council in February 2021 to serve a three year term, Shalu Kanal (Wandsworth), Padraig Belton (Rest of England) and Khaled Simmons (Merton). The induction session for new governors would take place on 15 December 2020.</p> <p>With no candidates putting themselves forward for the Allied Health Professional (AHP) staff constituency, the Trust was currently running a separate election for a staff AHP Governor. The Trust had received four nominations and the voting would close at 5pm on 18 December 2020.</p> <p>The Council would say goodbye to Governors Anneke de Boer, Nick de Bellaigue, Doulla Manolas, Damien Quinn, Anup Sharma and Basseyy Williams all of whom would come to their end on their terms on 31 January 2021. Donald Roy would be standing down as Appointed Governor for Healthwatch Wandsworth in January and would be replaced by Sarah Forester. Val Collington would also be standing down as Appointed Governor for Kingston University and waiting to hear who will take over from her.</p> <p>The Council of Governors noted the report and thanked outgoing Governors for their contribution to the Council and to the Trust in recent years.</p>	
5.0	ACCOUNTABILITY	
5.1	<p>Overview from Non-Executive Directors</p> <p>Ethics and Information Technology Tim Wright, Non-Executive Director (TW-NED), gave an overview of the work of the Clinical Ethics Committee, on which he sat as a representative of the Board, and provided an update information technology.</p> <p>The Clinical Ethics Committee was an advisory body for clinicians facing ethical decisions and was comprised of members from a wide range of professional and clinical backgrounds. There were two recurrent themes the Committee focused on; genetic testing and withdrawal of care, especially related to children. More recently, during the pandemic, the Committee had been focused on the ethical dimensions of providing care to extremely unwell Covid-19 patients.</p> <p>In relation to ICT, TW-NED explained that the Trust had been through a significant change in response to the Covid-19 pandemic. The demand on the remote access infrastructure to support more staff working from home had increased significantly as had the range and number of virtual patient consultations. The Trust's IT teams had responded effectively to these requirements. The Trust Board had approved the IT Strategy in January 2020 and the team had exceeded the year one plan core work on infrastructure and upgrade of the Virtual Desktop Infrastructure (VDI). Further upgrade work to the Cerner system which held the Trusts electronic patient records had been undertaken to bring additional functionality, including a patient portal which gave patients direct access to appointments and pre-assessments online.</p> <p>Quality and Safety Professor Dame Parveen Kumar (PK-NED), Chair of the Quality and Safety Committee, gave an overview of the work of the Committee. She highlighted the following:</p> <ul style="list-style-type: none"> • The Committee had received a number of deep dive reports focusing either on a core service or a key quality and safety issue. 	

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	<ul style="list-style-type: none"> • The Committee reviewed serious incidents regularly and interrogated any themes. There had been a number of incidents related to the use of the surgical safety check list and the Committee received reassurance that steps were taken to address these issues and sufficient action plans were in place, however it would continue to monitor how these actions were embedded to limit/eliminate further such incidents. • The Committee continued to monitor performance against lifesaving training targets. This was a key action from the 2018 Care Quality Commission inspection but despite actions to increase resources and change the format for delivering these training modules Covid-19 pressures had impacted on the take-up of the training recently. Similarly, Mental Capacity Act/Deprivation of Liberty Standards training was below the required performance target and proactive measures had been put in place to improve performance. Staff that were not compliant with these training modules were being targeted with letters sent from the Chief Nurse and Chief Medical Officer. • The Committee also welcomed the actions taken to reduce the number of times the Carmen maternity delivery suite was closed and this was due to the recent recruitment and appointment of 15 new midwives. The Committee was also monitoring the number of caesareans which had increased to 30% in recent months although this was still below the national average of 40%. • The Trust was the second best performing organisation in London in the NHS England National Cancer Patient Experience Survey and 37th in the national league table. This was a significant improvement from 2018 when the Trust was 124th nationally. 	
6.0	CLOSING ADMINISTRATION	
6.1	<p>Any other business</p> <p>The Chairman thanked everyone and wished them a happy Christmas and new year. She also reiterated the Council's thanks to outgoing Governors for their contribution to the Trust.</p>	
6.2	<p>Reflections on meeting</p> <p>There were no reflections of the meeting raised.</p>	
	<p>Date of next Meeting 16 February 2021, 14:00-17:00</p>	