

**Minutes of the Meeting of the Council of Governors (In Public)**  
**5 July 2022, 14:00 – 17:30**  
**Room 2.07, 2<sup>nd</sup> Floor, Hunter Wing, St Georges University**

<b>Name</b>	<b>Title</b>	<b>Initials</b>
<b>Members:</b>		
Gillian Norton	Chairman	Chairman
Afzal Ashraf	Public Governor, Wandsworth	AAs
Alfredo Benedicto	Appointed Governor, Merton Healthwatch	AB
John Hallmark	Public Governor, Wandsworth	JH
Hilary Harland	Public Governor, Merton	HH
Marlene Johnson	Staff Governor, Nursing & Midwifery	MJ
Richard Mycroft	Public Governor, South West Lambeth	RM
Alex Quayle	Staff Governor, Allied Health Professionals	AQ
Stephen Sambrook	Public Governor, Rest of England	SS
Khaled Simmons	Public Governor, Merton	KS
Sarah Forester	Appointed Governor, Healthwatch Wandsworth	SF
Sangeeta Patel	Appointed Governor, Merton & Wandsworth CCG	SP
Ataul Qadir Tahir	Public Governor, Wandsworth (up to 16.00)	AQT
<b>In Attendance:</b>		
Ann Beasley	Non-Executive Director	ABe
Pui-Ling Li	Associate Non-Executive Director	PLL
Tim Wright	Non-Executive Director	TW
Jacqueline Totterdell	Group Chief Executive Officer (up to 16:20)	GCEO
Andrew Ashbury	Director of Estates and Facilities (item 4.4)	DEF
Paul Da Gama	Group Chief People Officer (item 4.3)	GCPO
Andrew Grimshaw	Group Chief Finance Officer (item 4.1)	GCFO
Stephen Jones	Group Chief Corporate Affairs Officer	GCCAO
James Marsh	Group Deputy Chief Executive Officer	GDCEO
Kate Slemeck	Managing Director – St George's (item 4.2)	MD-SGUH
<b>Secretariat</b>		
Gurdeep Sehmi	Corporate Governance Officer (Minutes)	CGO
<b>Apologies:</b>		
Nasir Akhtar	Public Governor, Merton	NA
Adil Akram	Public Governor, Wandsworth	AAk
Mia Bayles	Public Governor, Rest of England	MB
Padraig Belton	Public Governor, Rest of England	PBe
Patrick Burns	Public Governor, Merton	PBu
Kathy Curtis	Appointed Governor, Kingston University	KC
Jenni Doman	Staff Governor, Non-clinical	JD
Sandhya Drew	Public Governor, Rest of England	SD
Shalu Kanal	Public Governor, Wandsworth	SK
Basheer Khan	Public Governor, Wandsworth	BK
Tunde Odutoye	Staff Governor, Medical and Dental	TO
Stephen Collier	Non-Executive Director, Senior Independent Director	SC
Jenny Higham	Non-Executive Director	JH
Peter Kane	Non-Executive Director	PKa
Parveen Kumar	Non-Executive Director	PKu

		Action
<b>1.0</b>	<b>OPENING ADMINISTRATION</b>	
<b>1.1</b>	<p><b>Welcome and Apologies</b></p> <p>The Chairman welcomed everyone to the meeting and noted the apologies as set out above.</p>	
<b>1.2</b>	<p><b>Declarations of Interest</b></p> <p>There were no new declarations of interest.</p>	
<b>1.3</b>	<p><b>Minutes of the meeting held on 30 May 2022</b></p> <p>The minutes of the meeting held on 30 May 2022 were approved as a true and accurate record, as were the minutes of the private meeting held on the same date. Richard Mycroft, Public Governor (South West Lambeth), asked about Governor attendance at Board's Audit Committee and the Chairman offered to discuss this with RM outside the meeting.</p>	
<b>1.4</b>	<p><b>Action Log and Matters Arising</b></p> <p>The Council of Governors noted the Action Log, and that both of the actions were due at the next meeting.</p>	
<b>2.0</b>	<b>TRUST UPDATES AND STRATEGY</b>	
<b>2.1</b>	<p><b>Chief Executive Officer's Report</b></p> <p>The GCEO presented her report, and provided the following updates:</p> <ul style="list-style-type: none"> <li>• Operational pressure on the hospital, particularly in the Emergency Department (ED), remained high, with Covid admissions increasing. As of 22 June 2022, there were 91 Covid patients in the hospital, but only 2 required ITU admission.</li> <li>• Mask wearing requirements had been changed in line with new national infection prevention and control guidance and the Government's Living with Covid-19 plan. These arrangements would be monitored and reviewed should the situation change.</li> <li>• There had been a rise in Monkeypox cases in recent weeks. SGUH hosted the regional Infectious Diseases Unit and was supporting the clinical diagnosis and management of cases across South West London. As at the end of June 2022, there was one inpatient at the Trust being treated for Monkeypox and a further 22 patients being treated at home on the new virtual ward.</li> <li>• The South West London (SWL) Integrated Care System (ICS) had taken on its new statutory form from the start of July 2022, and it had the following four purposes: <ul style="list-style-type: none"> <li>○ Improving outcomes in population health and healthcare;</li> <li>○ Tackling inequalities in outcomes, experience and access;</li> <li>○ Enhancing productivity and value for money; and</li> <li>○ Supporting broader social and economic development.</li> </ul> </li> <li>• The Boards of the St George's and Epsom and St Helier had agreed to develop a single Group Strategy by March 2023, building on existing Trust strategies. Governors would be engaged in its development.</li> <li>• The Secretary of State for Health, Sajid Javid MP, together with Stephane Bancel, Chief Executive of Moderna, visited the Trust's Vaccine Institute and Clinical Research Facility. The visit coincided with a Government</li> </ul>	

		Action
	<p>announcement of a £1 billion agreement with Moderna to build the country's first manufacturing centre for vaccines.</p> <ul style="list-style-type: none"> <li>• In relation to the Trust's financial position, NHS England had required all Trusts to achieve a breakeven financial position for 22/23. The Trust had developed a plan, but delivery of a breakeven position was expected to be extremely challenging.</li> <li>• The Trust celebrated the Platinum Jubilee weekend, and two staff members had attended the BBC's 'Platinum Party at the Palace' concert.</li> <li>• The St George's Charity had launched its new Children's appeal, <i>Time for Change</i>, which raised £286,000 on launch day.</li> <li>• Professor Indranil Chakravorty, consultant in acute and respiratory medicine, had received an MBE for his contribution to healthcare as part of the Queen's platinum jubilee honours.</li> </ul> <p>The following issues were raised and noted in discussion:</p> <ul style="list-style-type: none"> <li>• In response to a question regarding preparations for winter and seasonal influenza, the GCEO explained that due to the measures put in place to prevent transmission over Covid-19 over the past two winters the prevalence of other respiratory diseases had been much reduced and influenza had not had a significant operational impact on the hospital over the last two years. As a result, the coming winter was likely to present particular challenges in relation as a marked increase in the prevalence of influenza was anticipated. The Trust was making plans to respond to this likelihood and would be developing a detailed winter plan over the coming months which would be reviewed by the Board in early November.</li> <li>• A question was asked regarding the current impact of Covid-19 and the GCEO responded by explaining that while there had been a spike in the number of Covid positive patients at the Trust, the number of those requiring intensive care was reducing as was the number of patients requiring isolation. This had helped to improve flow through the hospital.</li> <li>• In relation to activity to promote vaccine take-up, it was noted that the Trust was working with partners across South West London, including local authorities, to encourage take-up. In relation to staff, there would be a focused campaign to encourage staff to have the new Covid and influenza vaccine from September.</li> <li>• In response to a question regarding the Trust's role in addressing health inequalities, the GCEO explained that the Trust was working with the South West London Integrated Care System to improve population health and address health inequalities. The Quality Committee of the Board had requested the Group Chief Medical Officer bring back proposals on how the Committee could review the Trust's contribution to this work in order to ensure appropriate assurance. The GCEO offered to provide Governors with further information on the work of the ICS at a future meeting.</li> <li>• In relation to the pressures in the ED, these pressures were ongoing and were very challenging for staff. Services were working differently to find solutions to help improve flow through the hospital and the Trust was working with its partners to facilitate discharge in a timely manner.</li> <li>• A Council of Governors briefing session on the development of the Group strategy would take place later in the year, and the Board was keen to engage Governors on this. Stakeholder sessions were planned for September and Governors were welcome to attend. The dedicated session for Governors would likely be scheduled for November, and this would be confirmed once work on the development of the strategy progressed.</li> </ul> <p>The Council noted the report.</p>	<p><b>GCEO</b></p>

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<b>3.0</b>	<b>ACCOUNTABILITY</b>	
<b>3.1</b>	<p><b>Questions to Non-Executive Directors</b></p> <p>The Chairman invited questions to Non-Executive Directors (NEDs).</p> <p>Khaled Simmons, Public Governor (Merton), asked why the Quality Committee did not receive performance information relating to the Faster Diagnostic Standard. Pui-Ling Li and Ann Beasley explained that operational performance, including diagnostic waiting times, were overseen by the Finance Committee rather than the Quality Committee. The Finance Committee had recently undertaken a deep dive on cancer performance. On the Faster Diagnostics Standard, the Trust was performing well. In the event that performance raised quality or safety concerns, the Quality Committee would review this through a patient safety lens. Marlene Johnson, Staff Governor (Nursing and Midwifery), added that Rapid Diagnostics Clinics are providing a seven-day oncology service to ensure patients receive their results quicker.</p> <p>Alfredo Benedicto asked about the new Committees-in-Common arrangements and whether the NEDs felt they were able to discharge their roles effectively given the size of meeting agendas. Pui-Ling Li explained that the arrangements had been in place for just three months and were still bedding in, but overall the benefits of working in partnership through these arrangements were clear. NEDs digested the information provided in reports in advance of meetings and sufficient time was given to areas of concern, enabling questions to be directed appropriately. She added that, in terms of learning from each other, it remained early days but there was real benefit in seeing how each organisation delivered its services. Tim Wright agreed that the Committees-in-Common had large agendas and were long meetings, but the challenge for the Committee Chairs was to focus discussion, be clear about the assurance needs of the Committee, and manage the meeting. Having reports from both Trusts alongside each other was very helpful in identifying gaps and areas for improvement. NEDs were assured by the information provided and discussions that take place about services being delivered effectively, efficiently, and safely.</p> <p>In response to a query from John Hallmark, Public Governor (Wandsworth) about the timeliness of papers for Committee meetings, Tim Wright commented that, in general, papers were received in a timely way, but acknowledged that some were provided late and this did present challenges.</p> <p>Sarah Forrester, Appointed Governor (Healthwatch Wandsworth) expressed concern that the Patient Partnership and Engagement Group (PPEG) had not met for several months and asked how the Quality Committee could take assurance on issues relating to patient engagement and experience when PPEG was not meeting. The GCCAO commented that the Quality Committee's forward plan included patient experience and the Committee was scheduled to receive a report on patient engagement and experience at its meetings in August and February, as well as separately reviewing the results of the national inpatients survey in November and February. A number of PPEG meetings had been cancelled recently, but were scheduled to re-start.</p> <p>In response to a question from Richard Mycroft regarding the Trust's response to HM Coroner's Prevention of Future Deaths (PFD) Report in relation to cardiac surgery, the GCCAO stated that the Coroner had extended the deadline for responding to 1 August 2022. The Trust was on course to deliver its response by this deadline. Under the Chief Coroner's PFD publication policy, it was for the Coroner to determine when a PFD response could be published. Once published, the Trust would make this available to the Governors and place a copy on the Trust website.</p>	<b>GCCAO</b>

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	<p>In response to a question about the Trust's digital strategy, Tim Wright explained that the Trust's IT team was working closely with their counterparts at Epsom and St Helier but there remained significant work to bring the two Trusts' digital strategies together.</p>	
<b>4.0</b>	<b>QUALITY, PERFORMANCE AND FINANCE</b>	
<b>4.1</b>	<p><b>Finance Update</b></p> <p>The GCFO presented the report, and the following points were highlighted:</p> <ul style="list-style-type: none"> <li>• The report illustrated the challenge of closing the gap that exists in the current financial position in order to get to a breakeven position in 2022/23.</li> <li>• An integrated improvement approach was being used and engagement with clinical and non-clinical teams was key to support delivery.</li> <li>• Actions were being identified to develop and implement Cost Improvement Plans (CIP), and this was being monitored by the Finance Committee. The right support was in place to oversee and monitor progress.</li> <li>• Quality Impact Assessments, led by the GCMO and GCNO, were also being developed, as it was important that any CIPs were reviewed with a quality and safety lens.</li> <li>• Communications with staff about the impact efficiencies would have on staff headcount were taking place. With 10-12% of vacancies currently being covered by temporary and bank staff and a Trust-wide turnover rate of 10%, the impact of CIPs on substantive headcount would be mitigated.</li> </ul> <p>In response to questions from the Council, the following responses were noted:</p> <ul style="list-style-type: none"> <li>• In respect of unidentified CIPs, the GCFO explained that 65% of expenditure was on salaries and there were opportunities to make savings, for example through reducing agency and bank spend.</li> <li>• Quality Impact Assessments were conducted by the GCMO and GCNO and there was a rigorous process to assess CIPs from a quality and safety perspective and to ensure safe staffing at all times.</li> <li>• 2022/23 was going to be a tough year and 2023/24 was expected to more challenging still. In this context, the opportunities to invest in were constrained. While there would be investment in essential estates and IT, capital funding was limited.</li> </ul> <p>The Council of Governors noted the report.</p>	
<b>4.2</b>	<p><b>Integrated Quality and Performance Report</b></p> <p>The MD-SGUH presented the report that was based on May 2022 data, and the following points were highlighted:</p> <ul style="list-style-type: none"> <li>• Performance in ED was at 73.9% against the four hour emergency standard, which was below the national 95% target. The challenges the Trust faced in meeting the standard could be seen in trusts across the country.</li> <li>• Patients presenting at ED were less well and required longer hospital stays than previously.</li> <li>• The Trust was working to open a new Urgent Treatment Centre to be opened in August and it was hoped that this would help to ease the pressures on the ED.</li> <li>• Cancer performance was not where the Trust wanted it to be but was improving. The Trust continued to deliver on the Faster Diagnostic Standard to provide patients with quicker results. The number of patients waiting over 62 days had continued to decrease and remained below trajectory.</li> <li>• Work continues to reduce follow-up appointments for outpatients.</li> </ul>	

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	<p>In response to a question about 52- and 72-week waits, the MD-SGUH stated that the Trust was making it easier for patients to contact the Trust and was working closely with GPs in improving communication in relation to waiting times, in order to support their patients. Wandsworth GPs received increased advice and support and have more access to information on people that are on waiting lists. In respect of measuring ED performance, the discharge to access pathways were being monitored closely.</p> <p>The Council of Governors noted the report.</p>	
<p><b>4.3</b></p>	<p><b>Culture Programme Update</b></p> <p>The GCPO presented this report and the following points were highlighted:</p> <ul style="list-style-type: none"> <li>• Organisational Development (OD) work across the Trust was progressing well. OD facilitators worked locally in units to resolve issues.</li> <li>• Work to help staff understand the Trust values and what they mean in practice was underway. After consultation with a large number of staff, a booklet explaining these was being produced and would be launched shortly.</li> <li>• The values would be used at each point of the employee cycle from recruitment, induction, appraisals, and leadership development.</li> <li>• The activity programme on the Big 5 themes arising from the NHS Staff Survey was being delivered throughout the year, with focus being given to one priority each month.</li> <li>• A management fundamentals programme was currently being constructed.</li> </ul> <p>In response to a question about releasing staff from pressured acute services to undertake management training, the GCPO explained that managers are asked to use the appraisal process to identify training requirements, as well as manage how this would be achieved.</p> <p>In response to questions about values from the Council of Governors, the GCPO explained that it was vital that the senior leadership modelled the Trust's values. Staff could be held to account on their behaviour through one-to-one meetings with their managers and through appraisals. Metrics would be incorporated after the roll-out. It was important that the Trust's values become embedded in everything we do.</p> <p>In respect of exit interviews, the GCPO confirmed that these were conducted independently at a local level by HR staff and by an external service provider.</p> <p>Khaled Simmons asked about support to staff who lack confidence in some management duties. The GCPO said that managers who are not confident in holding their staff to account will be supported, where possible.</p> <p>In response to question from Hilary Harland, Public Governor (Merton), about evidence of physical violence against staff by other members of staff, the GCPO stated that there had been no cases of this at the Trust but if this was to occur it would result in disciplinary action being taken.</p> <p>The Council of Governors noted the report.</p>	
<p><b>4.4</b></p>	<p><b>Estates Strategy and Sustainability Plan</b></p> <p>The Council received an overview of the implementation of the Trust's Green Plan and Estates Strategy from the DEF and the following points were highlighted:</p>	

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	<p><b><u>Green Plan</u></b></p> <ul style="list-style-type: none"> <li>• The Trust's Green Plan was seen as an exemplar plan with other trusts asking for assistance in developing their own plans.</li> <li>• The Trust had worked closely with South West London to assist with the production of an ICS Green Plan. The Trust's Green Plan would link to this.</li> <li>• The Trust was one of the largest contributors of carbon in South West London and was leading the way in developing a strategy that has clearly defined and tangible action plans with milestones to reduce carbon emissions.</li> <li>• A decarbonisation plan was being developed over the next three months. In the long term, delivery of substantial reductions in carbon emissions would require transformation of the estate.</li> </ul> <p>In response to a query from Khaled Simmons about setting baselines and targets, Tim Wright stated that national targets needed to be met and baselines were expressed in the best terms at this time. Going forward, the team would seek to develop measures in percentage terms to demonstrate progress and meet the Trust's contribution to the NHS-wide target of reducing the NHS carbon footprint by 80% by 2028-32. Ann Beasley added that investment for large infrastructure programmes, such as solar panels, would be a challenge at this time given the financial context but having estimated baselines and focusing on activity within the current financial situation would be a step forward in the right direction.</p> <p>The DEF offered to liaise with Khaled Simmons outside of the meeting to provide further information.</p> <p><b><u>Estates Strategy</u></b></p> <ul style="list-style-type: none"> <li>• The estates strategy had been approved in July 2021.</li> <li>• An Expression of Interest (EoI) with a proposed scheme for £620m to provide a new building had been submitted to the New Hospitals Programme (NHP) in September 2021. To date, there had not been any news but a strategic outline business case with a range of options was being developed.</li> </ul> <p>In response to questions from the Council, the following responses were noted:</p> <ul style="list-style-type: none"> <li>• 100% of queries received from the NHP have been responded to.</li> <li>• The scale of the building programme envisaged in the estates strategy was dependent on funding.</li> <li>• Modelling with clinical teams had shown that the planned new builds would become a better environment for supporting more patients.</li> </ul> <p>The Council of Governors noted the report.</p>	
5.0	<b>COUNCIL OF GOVERNORS - GOVERNANCE</b>	
5.1	<p><b>Annual Members Meeting 2022</b></p> <p>The GCCAO presented the report and the following points were highlighted:</p> <ul style="list-style-type: none"> <li>• The next Annual Meeting was scheduled to take place on 22 September 2022. The meeting would be in-person and would be held at the Trust.</li> <li>• Attendance at the 2021 Annual Meeting was significantly lower than meetings held prior to the pandemic.</li> <li>• The format of the 2022 event will be more accessible, engaging, and interactive, with the aim of boosting attendance.</li> <li>• Consideration was being given to methods to raise awareness and to begin to promote the event. Governors were asked to promote the benefits of engagement at any meetings/events they attend.</li> </ul>	

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	<p>In response to a query from Richard Mycroft about the Membership and Engagement Committee (MEC), the GCCAO noted that not having a Committee Chair and enough Governors to hold quorate meetings had presented challenges and had resulted in this Committee not meeting since March 2022. Plans are underway for a meeting to take place in early autumn.</p> <p>The Council of Governors agreed the plan for the 2022 Annual meeting.</p>	
<b>5.2</b>	<p><b>Elections to the Council of Governors 2022</b></p> <p>The GCCAO presented the report and the following points were noted:</p> <ul style="list-style-type: none"> <li>• A total of eight seats on the Council were open for election in 2022/23.</li> <li>• The plan for the election was similar to previous years with election activity starting in late September, with in-person and virtual awareness sessions taking place in the autumn.</li> <li>• The election itself will take place in late November/December with results being published by the end of the calendar year.</li> <li>• New Governors would undertake induction in January 2023.</li> <li>• A Returning Officer was currently being appointed.</li> <li>• In addition to the scheduled elections, there was a need to fill a forthcoming vacant seat which was due to a long-standing Public Governor stepping down later in the year. It was proposed that an election for this seat be wrapped into the wider elections.</li> </ul> <p>The Council of Governors noted the plan for holding elections during Q3 2022/23 and agreed that the forthcoming Public Governor seat on the Council be filled through the 2022/23 elections with the successful candidate appointed for the remainder of the existing term of office.</p>	
<b>6.0</b>	<b>CLOSING ADMINISTRATION</b>	
<b>6.1</b>	<p><b>Any other business</b></p> <p>The GCCAO informed the Council that recruitment consultants appointed to lead the search for the two Non-Executive Director appointments had advised starting the promotion of the roles from late August and moving the closing date to late September in order to secure the best possible field of candidates. The recruitment consultants had recently met the Chairman to discuss the process and would shortly meet the Lead Governor.</p>	
<b>6.2</b>	<p><b>Reflections on meeting</b></p> <p>The following reflections on the meeting were noted:</p> <ul style="list-style-type: none"> <li>• Meeting on site was appreciated and makes attendance by staff Governors and presenters easier, however the acoustics in the room was an issue.</li> <li>• There was a good level of discussion on the items presented.</li> </ul>	

Meeting ended: 17.00

**Date of next Meeting**  
**22 September 2022**