

**DRAFT Minutes of the Meeting of the Council of Governors held on
Tuesday 19 April 2022 at 6.00pm via MS Teams**

Present	Appointing Organisation / Constituency	
Sukhvinder Kaur-Stubbs	Chair	SKS
Cathy Maker	Elected Governor, Richmond (Lead Governor)	CM
Bonnie Green	Elected Governor, Richmond (Deputy Lead Governor)	BG
Susan Smith	Elected Governor, Richmond	SS
Isabella Donnelly	Elected Governor, Richmond	ID
Michelle Deans	Elected Governor, Kingston	MD
Raju Pandya	Elected Governor, Kingston	RP
Ash Neil-Gallacher	Elected Governor, Kingston	ANG
Anne Lewis-Lloyd	Elected Governor, Kingston	AL
Rebecca Wilkinson	Elected Governor, Kingston	RW
Catherine Gabela	Elected Governor, Kingston	CG
Catherine Okonkwo	Elected Governor, Rest of Surrey & Greater London	CO
CJ Kim	Elected Governor, Elmbridge	CJK
Jack Saltman	Elected Governor, Elmbridge	JS
Geoffrey Shorter	Elected Governor, Merton	GS
Felicity Merz	Elected governor, Wandsworth	FM
Olivia Arney	Associate Member for Young People	OA
Jennifer Bunn	Staff Governor, Management & Administrative Staff	JB
Alison Dicks	Staff Governor, AHP & Clinical Support	AD
Pravin Menezes	Staff Governor, Medical & Dental Practitioners	PM
Dr Julia Gale	Appointed Governor, Kingston University	JG
George Crivelli	Appointed Governor, Wandsworth Borough Council	GC
Margaret Thompson	Appointed Governor, Royal Borough of Kingston upon Thames	MT
Piers Allen	Appointed Governor, London Borough of Richmond	PA
Drew Heffernan	Appointed Governor, Sutton and Merton Borough Councils	DH
In Attendance		
Jo Farrar	Chief Executive	JF
Sam Armstrong	Director of Corporate Affairs & Trust Secretary	SA
Tara Ferguson-Jones	Director of Communications	TFJ
Dr Rita Harris	Non-Executive Director/Senior Independent Director	RH
Dr Nav Chana	Non-Executive Director	NC
Dame Cathy Warwick	Non-Executive Director	CW
Damien Régent	Non-Executive Director	DR
Sylvia Hamilton	Non-Executive Director	SH
Jonathan Guppy	Non-Executive Director	JG
Susan Wheeler	Corporate Governance Manager (minutes)	SW
Apologies		
Anne Blanche	Elected Governor, Kingston	AB
Bruce McDonald	Appointed Governor, Elmbridge Borough Council	BM
Rowena Bass	Appointed Governor, Royal Borough of Kingston upon Thames	RB
Diane Taboada	Staff Governor, Nursing & Midwifery	DT
Staff, Stakeholders or Public in Attendance		
Richard Allen	Member of the public	RA

1.	Apologies and Welcome	Action
1.1	SKS opened the meeting and welcomed all present and in attendance.	
1.2	Apologies were noted as above.	
2.	Declarations of Interest in Matters on the Agenda	
2.1	No interests were declared.	

STRATEGY		
3.	Chief Executive's Report	
3.1	JF presented highlights of his report, which was taken as read.	
	<ul style="list-style-type: none"> The Trust remained very busy, as was the case across the system. Maintaining patient flow remained a significant challenge. There were currently 73 Covid-positive patients in the hospital. The 'Home for Spring' initiative took place between 6-14 April 2022, which involved working alongside partners across the system to enable better patient flow. Outcomes of the event were being monitored, and good practice had been identified. Virtual wards continued and were being expanded as a measure to improve patient flow. JF was proud to announce Kingston Hospital's excellent results in the CQC National Maternity Survey 2021. The survey indicated that it was the best performing maternity service in London. JF thanked the Council of Governors for their input into setting the Trust's 2022-23 Quality Priorities. Progress continued in preparing for the new South West London Integrated Care System, working towards the new target date of 1 July 2022 for statutory arrangements to take effect and for Integrated Care Boards to be legally and operationally established. 	
3.2	<p>OA asked to what extent young people had been included as stakeholders in the development of the Mental Health Strategy for South West London.</p> <p>JF advised that the work was being led by South West London and St. George's Hospital, and he had been assured that children and young people were very much involved in the development of the strategy.</p>	
4.	Better Together Update	
4.1	<p>JF gave a presentation update on the KHFT / HRCH Better Together programme.</p> <p>ACTION: SW to share the Better Together update presentation with CoG.</p>	SW
5.	Q&A	
5.1	<p>JS asked how the Integrated Care System would work for patients in East Elmbridge.</p> <p>JF responded that the Trust continued to work closely with East Elmbridge, and that a very productive and effective relationship existed between both parties. JF stressed that geographical boundaries were not an obstacle to serving the hospital's local populations, and would ensure that future messaging would help reaffirm this.</p>	
5.2	<p>BG was involved in developing the Locality Model for Kingston and Richmond, and asked if she could share the Better Together update presentation with the Locality Working Group.</p> <p>JF agreed to BG sharing the Better Together update presentation with the Locality Working Group. JF also agreed to meet with the Locality Working Group to give a more detailed briefing. BG would feed this back to the Working Group.</p>	
6.	Partnership Working Film	
6.1	Salina Harvey-Porter, Consultant Physiotherapist, introduced a Partnership Working film. SHP chaired the Post-Covid Assessment Service (PCAS) and the associated MDT Steering Group - both set up to help in the recovery of patients with long Covid, and whose symptoms were complex and diverse. The service had been running for two years, and included a bi-weekly multi-disciplinary meeting with clinicians from across all of the local systems, enabling the very best of care to be provided to patients in the local community. Having listened to patient stories, SHP had used the opportunity to help identify the right services for patients with long Covid.	
6.2	The film told the story of local Councillor, Jim Millard, who suffered from long Covid. He described the debilitating effects of living with the condition. His experience was helping clinicians understand long Covid more fully, and helped inform how care was being tailored to meet his needs and aid his recovery. JM learned how to manage the small amount of energy he had and found his pace for recovery, including mental health management. Through his hospital visits, JM had met patients with similar symptoms, and he found that the peer support element was very powerful.	

	JM was optimistic about his long-term recovery and hoped that, with the knowledge being obtained through patient experiences such as his, a greater understanding of long Covid would help speed up recovery for other patients.	
6.3	SHP's work with long Covid had involved engagement with East Elmbridge from the beginning and the Post-Covid Assessment Service (PCAS) accepted referrals from all the local GP practices. She confirmed that PCAS continued its strong relationship with East Elmbridge.	
6.4	FM commented that she knew of several people with long Covid who had been referred to PCAS but had experienced long waiting times to be seen. SHP was surprised to hear this as referrals to Kingston Hospital were usually triaged within 24 hours, and patients had their first contact within 5 days. SHP met with community teams every other week and reported that waiting lists were not significant. FM agreed to share information on those patients experiencing long waiting times with SHP outside the meeting so that she could investigate where the delays were in the system.	
6.5	Regarding the peer group support, there was a comprehensive directorate of services which was updated every couple of months and shared widely with GPs across the whole of South West London. In addition, a dedicated email address had been set up at Kingston Hospital which had been shared with all clinicians.	
7.	Chair's Report	
7.1	<ul style="list-style-type: none"> As the Trust's new Chair, SKS was committed to connecting with all parts of the service, boroughs and communities that the Trust served. One of SKS's priorities was to connect with frontline staff. SKS observed that teamwork at the hospital was strong and exceptional. She was conscious that staff were tired, and that the pandemic had taken its toll. The Executive team were taking measures to ensure that staff felt adequately supported as they continued to provide a high level of patient care. SKS had met CM in person, and was impressed with how engaged the Governors were and their willingness to get involved. SKS looked forward to meeting the rest of the Council of Governors in person in due course. SKS was exploring having Non-Executive Directors in common across both Trusts. She would report back to CoG with updates and proposals in due course. SKS had started reaching out to system partners. She met with her peer at Croydon Hospital and chairs of the Integrated Care System, including South West and North West London regional representatives. SKS was very grateful to all at both Trusts for the very warm welcome she had received. 	
7.2	SKS invited the Governors to join her in formally congratulating JF who had been recognised in the Health Service Journal (HSJ) list of 'Top Chief Executives 2022'. This was a testament to the leadership he provided and also to the calibre of the people he had drawn around him.	
8.	Lead Governor's Report	
8.1	On behalf of the Council of Governors, CM welcomed SKS to her first meeting.	
8.2	<ul style="list-style-type: none"> CM had been working with TFJ and the Communications team to look at improving how hospital information was shared with Governors. This would be reviewed. CM, GS and MT had taken part in Kingston Hospital's Staff Awards. CM was hopeful that the Governor Engagement Sessions and Walkabouts would be reinstated over the coming weeks. She encouraged those who had not responded to the invite to take part to contact SW or SA, as it was very important that Governors had a visible presence in the hospital. Governor Feedback Forms had been circulated by BG and she would be collating these shortly. Volunteer Fair in Richmond, May 2022: it was hoped that the Governors would have a joint initiative at the fair with the Volunteer team from Kingston Hospital, which would provide an opportunity to recruit volunteers, members and, hopefully, potential future Governors. 	
9.	Minutes of Last Meeting held on 15 February 2022	
9.1	BG noted that item 9.3 should read "As part of the work of the Outpatient Transformation Board, BG was pleased to note that there was an emphasis on improving Admin and Clerical staff experience in the main Outpatient Department appointments process".	
9.2	As a matter arising, JS referred to item 14 regarding the matter of a GP from East Elmbridge representative being appointed to the Council of Governors being discussed outside the meeting.	

	SA referred to correspondence between he and JS, in which SA had tried to explain that the only possible appointment for this could come from the CCG, and that CCGs were being disbanded soon. As a result, it would be necessary to make a constitutional change to add new partners who may appoint representatives, however they would control whom they appoint. Although it was frustrating, the developments around the ICS/ICB needed to continue and a review into the constitution with proposed changes would need to occur in the future.	
9.3	SKS was happy to continue the conversation with JS outside the meeting. ACTION SKS and JS to discuss the matter further.	SKS/JS
9.4	RH referred to page 5 regarding the provision of breakout areas for staff in ED. This had since been discussed at the Quality Assurance Committee where RH was informed that the kitchenette area and staff room had been refurbished during Covid to enhance the environment and, in addition, a seminar room had been assigned to ED staff so that they could get away and have a proper break.	
9.5	Subject to BG's amend to item 9.3, the minutes of the meeting held on 15 February 2022 were approved as an accurate record of the meeting.	
9.6	The Action Log was noted.	
COMMITTEE REPORTS		
10.	Governors Quality Scrutiny Committee	
10.1	BG presented the Governors Quality Scrutiny Committee (GQSC) report from the meeting held on 13 April 2022.	
10.2	<ul style="list-style-type: none"> • GQSC received assurance from the Integrated Quality Operational Compliance Report, which was the same Report that went to the Board meeting on 30 March 2022. Matters discussed included ambulance waiting times and reassurance was received from WO regarding measures to address this. The Committee noted: <ul style="list-style-type: none"> - Post-partum haemorrhage rates had declined. - The Trust continued to meet its core cancer standards, although the performance against the 62 day standard was again lower than it had been for over a year. - The slight increase in complaints but acknowledged that much of this was Covid-related. It was also noted that currently it was not getting any data on the 25-day compliance response rate. • The Quality Assurance Committee Report noted the ED Survey Action Plan and awaited further information on this. Members of GQSC had raised some issues regarding patient experience in ED, and CW would be taking the matter up with the Chief Nurse, who was managing this plan. • GQSC supported the draft Governor response to the Quality Account 2021-22, which would be finalised and sent when ready as a formal response from the GQSC on behalf of the Council of Governors. • An update was received regarding the appointment of six Patient Safety Partners. The Committee was pleased to note that two Governors from GQSC, MD and SS, had been appointed as Patient Safety Partners. • BG's Patient Feedback Form had been sent to all Governors and she would send a reminder at the end of April to return these to her. • BG provided feedback on the Healthwatch Forum. • The Admin Management Change Programme was progressing well, with a number of elements looking at how the Trust could support Admin staff and improve patient experience in this area. BG was happy to provide more information on this for anyone who wanted it. • BG announced that she was standing down as Chair of the Governors Quality Scrutiny Committee. MD had been appointed as the new Chair, with ANG as Deputy Chair. 	
10.3	MD expressed her gratitude and appreciation for BG's outstanding efforts and commitment to her role as chair of the GQSC.	
10.4	SS reported that the Patient Safety Partners had had their first meeting and training session the previous week. It was highlighted that they needed to be integrated into all areas of the Trust so that they were not a stand-alone group.	

GOVERNANCE	
11.	Governor Training
11.1	<p>SA presented a paper on Governor Training, which was taken as read and noted.</p> <p>Following feedback from Governors, he proposed that a half-day of core training be made available, and facilitated by NHS Providers. For some, it would be new content and for others it would be a refresh. SA encouraged all Governors to attend, in part or in full, and he hoped that the training would be held in person and offsite, which would create a good opportunity for some social interaction following the session. SA envisaged that more bespoke training would be made available following the half-day session. The Governors supported the proposed half-day training.</p>
11.2	SS had attended a virtual NHS Providers Governors Workshop with MD, which had been a useful experience.
12.	NED Appointments
12.1	<p>SA reminded the Committee that, following a meeting of the Nominations and Remuneration Committee in March 2022, he had asked Governors via written resolution to agree to the extension of terms for NEDs Sylvia Hamilton, Nav Chana and Rita Harris. SA had received 23 affirmatives and no objections. The three NED terms had therefore been agreed and extended to 30 September 2022, which the Council of Governors ratified.</p> <p>Further updates on NED appointments would be brought back to CoG in due course.</p>
13.	Governor Engagement Sessions (formerly Governor Desks) and Ward Walkabouts
13.1	Following further delays in reinstating Governors Engagement Sessions and Walkabouts as a result of the Omicron variant, SA assured the Committee that progress had been made in setting up provisional dates.
14.	Council of Governors Register of Interests
14.1	The Governors Register of Interests was noted.
15.	Council of Governors Forward Plan
15.1	The Forward Plan was noted.
16.	Any Other Business
16.1	This was MT's last CoG meeting and, on behalf of CoG, CM expressed her gratitude and thanks for her contribution over the years, not only to Kingston Hospital, but also to the Kingston community.
17.	Questions from Members of the Public
17.1	Following the Board meeting on 30 March 2022, RA asked if there was any progress on improving patient discharge.
17.2	SA responded that the Trust had recently instigated an initiative which was very much focused on getting patients out efficiently through the system.
17.3	CW reported that a great deal of work was underway regarding improving patient discharge. It had emerged as an issue in both general and ED patient experience feedback. The Head of Patient Experience was leading a piece of work focusing on the whole issue of discharge. It was one of the Trust's Quality Priorities for 2022-23, and therefore very high on its agenda.
18.	Dates of Next Meetings
18.1	<p>Tuesday 5th July 2022</p> <p>Tuesday 18th October 2022</p>