

**MINUTES OF THE MEETING OF THE COUNCIL OF GOVERNORS IN PUBLIC
OF THE
ROYAL DEVON UNIVERISTY HEALTHCARE NHS FOUNDATION TRUST**

**Held on Wednesday 5 June 2024
Seminar Rooms 1 and 2, Centre for Women’s Health
Royal Devon and Exeter Hospital
Barrack Road
Exeter EX2 5DW**

Present

Shan Morgan, Trust Chair

Public Governors

Eastern:

Kay Foster
Rachel Noar
Nigel Richards

Northern:

Catherine Bearfield (up to and including minute 24.24)
Quentin Cox
Dale Hall
Carol McCormack-Hole
Sue Matthews
Avril Stone

Southern:

Richard Westlake (up to and including minute 24.24)

Staff Governors:

Naomi Hallett
Zoe Harris
Simon Leepile
Emily Partridge (from minute 25.24)
Clare Stevens

Appointed Governors:

Angela Shore, Appointed - University of Exeter (except for minutes 25.24 and 26.24)

Apologies

Maurice Dunster, Eastern
Gill Greenfield, Southern
Ian Hall, Appointed - Devon County Council
George Kempton, Northern
Tom Reynolds, Staff
Jayne Westcott, Staff

In Attendance:

Bernadette Coates, Governance Coordinator (minute taker)
Samantha Herbert, BSL Interpreter
Alice Higley, Communications Officer
Sam Higginson, Chief Executive Officer (up to and including minute 24.24)
Melanie Holley, Director of Governance
Emily Howlite, BSL Interpreter
Steve Kirby, Vice Chair
Tony Neal, Senior Independent Director (from minute 23.24)

Item	Minute		Action
1.	16.24	WELCOME AND APOLOGIES	
		Ms Morgan welcomed everyone to the meeting. She welcomed Mrs Noar’s BSL interpreters and reminded everyone to speak clearly to help with interpretation. Apologies were noted as above, with it further noted that Ms Partridge would join slightly later and Mr Westlake having to leave at the lunch break. The meeting was confirmed as quorate.	

2.	17.24	DECLARATIONS OF INTERESTS	
		<p>Mrs Holley said that the following new declarations had been received since the March 2024 meeting:</p> <p>Quentin Cox</p> <ul style="list-style-type: none"> • Member of the League of Friends of the Tyrrell Hospital in Ilfracombe <p>George Kempton</p> <ul style="list-style-type: none"> • No longer Chair or a Trustee of the NHS Retirement Fellowship <p>Mrs Holley reminded the Governors to let her know of any changes to declarations and to flag if any arise during the course of the meeting.</p> <p>The Council of Governors noted the Declarations of Interest.</p>	
3.	18.24	SECRETARY'S NOTES	
		<p>Mrs Holley reminded the CoG of forthcoming meeting dates:</p> <ul style="list-style-type: none"> • Joint Board and CoG Development Day on 10 July 2024. This would be at Petroc College Tiverton, more details on timings to follow. • The next routine CoG meeting was on 21 August 2024. The venue was the Centre for Women's Health; however, the Trust was exploring moving the meeting to Barnstaple and would keep Governors informed. <p>Mrs Holley reminded Governors to please submit any apologies for the meetings if they have not already done so.</p> <p>Mrs Holley gave a reminder of the Lead and Deputy Lead Governor election process that was currently underway. She proposed bringing forward the nomination deadline from 24 June 2024 to 19 June 2024. This was agreed by the Council. It was agreed that the nomination information would be recirculated to public Governors.</p> <p>ACTION: Information on the Lead and Deputy Lead Governor election, confirming the new nomination deadline of 19 June 2024, to be re-circulated to Governors.</p> <p>There being no comments or questions, the Secretary's Notes were noted by the CoG.</p> <p>The Council of Governors noted the Secretary's Notes.</p>	BC
4.	19.24	CHAIR'S REMARKS	
		<p>Ms Morgan remarked on the following:</p> <ul style="list-style-type: none"> • Pre-election guidance was in place and had been circulated. Governors were reminded to be aware of this. • The agenda had been reviewed and the NED discussion and feedback from communities session moved higher up. The feedback from communities session was focussed on MY CARE. • The confidential meeting would be attended by DI Daniel Massey from Devon and Cornwall Police to inform the CoG on reporting restrictions on criminal trials. • Six-monthly review meetings had been held with Governors elected in 2023. 	

		<ul style="list-style-type: none"> Ms Morgan had recently meet with the Leagues of Friends across the Trust and had discussed and considered their links with the Council. It was agreed to consider how to develop this. <p>ACTION: Linking the Council of Governors with the League of Friends across the Trust to be explored.</p> <p>The Council of Governors noted the Chair’s Remarks.</p>	C&ET
5.	20.24	APPROVAL OF THE 6 MARCH 2024 PUBLIC MEETING MINUTES	
		<p>The minutes of the 6 March 2024 public meeting were approved as an accurate record of the meeting. The action tracker was noted, with all the actions completed subject to the following:</p> <p>08.24 (1) and (2) <i>Acronym list in the Performance Report to be reviewed and updated and Glossary for frequently used terms to be added to the Performance Report.</i> It was noted that the Glossary was a work in progress and the Governors were encouraged to propose additions to it. It was agreed to circulated them as separate documents to the Council.</p> <p>ACTION: Acronym list and glossary to be circulated to all Governors.</p> <p>10.24 (1) <i>MY CARE leaflets to be shared with Governors for distributing in their communities.</i> It was noted that all Governors had been sent electronic links to signing up to MY CARE and that hard copies were available at the meeting for everyone to take away. The action was completed.</p> <p>10.24 (2) <i>Information on whether the Trust monitored the demographics of the patients signed up to MY CARE to be shared with the CoG.</i> Mr Higginson said there were just under 128k people signed up to MY CARE as at the end of May 2024. He confirmed that demographic information was available and was monitored by the Trust. He gave a high level overview and said the demographic make-up of MY CARE users broadly reflected the population. He said the high level data would be circulated.</p> <p>ACTION: MY CARE user demographic information as reference by Sam Higginson at the June 2024 CoG meeting to be circulated.</p> <p>Matters Arising</p> <p>Ms Morgan said that the Leagues of Friends had said how much they appreciated the Patient Story approach at public Board meetings and it had been agreed to do a Patient Story with the Leagues setting out what they do. Ms Morgan confirmed that all Patient Stories were published on the Trust website, alongside the papers for each Board meeting in public.</p> <p>There were no further matters arising.</p>	<p>BC</p> <p>BC</p>
6.		ACCOUNTABILITY AND ENGAGEMENT	
6.1	21.24	CHIEF EXECUTIVE’S PUBLIC REPORT	
		<p>Mr Higginson said that the report he gave to the May 2024 Board meeting in public would form the basis of his report to the CoG, adding that it was available on the Trust’s website. He noted that the Trust was bound by pre-election guidance, which provide constraints on media activity and what could be said in public.</p>	

		<p>Mr Higginson set out the national, regional and local challenges facing the Trust. This included an update on the work to agree the plans for 2024/25, both financial and operational, including commitments to reduce the deficit and waiting times. There were concerns about access to capital funds, with Mr Higginson updating on the progress with the Our Future Hospitals programme at North Devon District Hospital (NDDH). Work to construct staff residences had begun but there was concern that the core infrastructure was not scheduled until after 2030. Mr Higginson added that the Trust was investing in its own infrastructure, noting the completion of the cardiac day case at RD&E Hospital, the new endoscopy unit in Tiverton and the new Buttercup Unit at the Nightingale Hospital Exeter, which extended the cardiology and respiratory services delivered there.</p> <p>In terms of Epic and MY CARE, Mr Higginson said he had recently attended Epic’s European General Meeting in Bristol, which was an opportunity to showcase what the Trust was doing and also to learn from other users. The Trust was also supporting Torbay and South Devon and University Hospitals Plymouth (UHP) in their business cases for Epic. Mr Higginson said that Dr Anthony Hemsley (Medical Director – Eastern) had also gone on a secondment as Medical Director at UHP. He said the Trust was working closely with partners in these challenging times.</p> <p>More locally, Mr Higginson said the Board had received a detailed update on research at the Trust and how this was having a positive impact on patients and staff. The Trust had recently launched the Extraordinary People Awards, with nominations open until 9 June 2024. It was also planning a Royal Devon Week, in early July 2024, as a way to celebrate staff. The Trust had also launched its Sexual Safety Charter at the May 2024 Board meeting, with Angela Hibbard, Chief Financial Officer, being the Executive Lead. Mr Higginson said the charter was important for the culture of the Trust and promoting a positive working environment.</p>	
6.2	22.24	OPEN QUESTION AND ANSWER	
		<p>Ms Morgan invited questions for Mr Higginson.</p> <p>Mrs Stone referred to the recent cyber-attack at a London hospital and asked how the Trust worked to protect itself. Mr Higginson said this was a NHS-wide issue; however, the Royal Devon did not have the same level of risk as the London Trust which had outsourced its Pathology system to a third-party provider. He added that system testing etc. was overseen by the Digital Committee. Mr Higginson said that all the Trust’s patient data sat on its own servers and the Trust was continually reviewing its server capacity and security.</p> <p>Noting the opening of nominations for Extraordinary People Awards, Mr Leepile asked how the Trust was encouraging staff to nominate colleagues for this, given people still remembered the short-notice change in venue the previous year, impacting their views of the Awards. Mr Higginson said he was aware of what had happened in 2023 and the impact on some staff. The Trust had chosen to use the original venue again this year, given it was in a more sustainable financial position. He said he had kept in contact with Staff Side about this. Mr Higginson added there would be a communications and engagement plan to encourage nominations for the awards. Ms Morgan added that the Trust had also obtained sponsorships for the award ceremony.</p>	

		<p>Given the expansion of services at the Nightingale, Mr Westlake asked if Mr Higginson was satisfied that the arrangements for public access were being progressed. Mr Higginson said he had discussed this with the staff when the new unit was opened and some concerns on access remained. He said the Trust was doing all it could within its gift, for example improving onsite access for people who use wheelchairs. The Trust wanted to improve pedestrian access through crossings etc. but was unable to do so without permanent planning permission for the Nightingale. Mr Higginson said Devon County Council had only granted temporary planning permission and permanent permission was needed before some improvements could be made. Mr Westlake said the Trust had his support in lobbying for this.</p> <p>Mrs Stevens said that NHS Professionals were currently contacting bank staff at NDDH about vaccinations and having their measles status checked. This was not an issue other than staff were directed to go to Exeter, Plymouth, Taunton or Bristol. Mrs Stevens added that some GPs were also advising staff that there would also be a charge for it. Mr Higginson said he was not aware of this issue and he would follow it up.</p> <p>ACTION: Mr Higginson to follow up the issue of NHS Professionals contacting bank staff re vaccinations/measles check and locations for doing this and any charges being made by GPs.</p> <p>Mrs Matthews said she had submitted a query about whether the Trust had taken part in NHS Providers’ survey on health inequalities but had not yet received a response. Mr Higginson said that the Trust had participated but it had not yet seen the survey report. He added that the Trust had a Health Inequalities Strategy, as did its system partners including the Devon Integrated Care Board (ICB), and it was important to do the health inequalities work in that context.</p> <p>Mr Richards asked for more information on how the Trust was planning to move out of National Operating Framework (NOF) 4 and Mr Higginson said he would cover that under the next item.</p> <p>There were no further questions.</p> <p>The Council of Governors noted the Chief Executive’s Report.</p>	SH
6.3	23.24	Q4 2023/24 PERFORMANCE REPORT	
		<p>Mr Higginson presented the report which outlined the Trust’s performance during the final quarter of 2023/24. . In terms of NOF4, Mr Higginson said the Devon system and all its acute providers were in NOF4, previously known as Special Measures. The work was to move the Trust and system out of NOF4, so it was important the plans were aligned.</p> <p><i>Mr Neal joined the meeting.</i></p> <p>Mr Higginson said that moving out of NOF4 was measured against a number of metrics, including Urgent and Emergency Care (UEC). Mr Higginson said the Trust was the ninth most improved performer in March 2024 for UEC (out of 130 Trust with an A&E) and it received a £2m capital investment as a result. The Trust and system was also required to deliver its financial plan, with some allowance made for the impact of industrial action. Mr Higginson said a deficit had been agreed for the current financial year and there was a trajectory agreed for a break-even position across the system. Plans were also in place for continuing to improve the Trust’s cancer and diagnostic performance. Mr</p>	

Higginson said the Trust and system would move out of NOF in the second half of the financial year if all the plans were met and he could be held to account on that. Mr Cox noted the requirements for leaving NOF4 including having the No Criteria To Reside (NCTR) rate at less than 5%, with the Trust at 14% in April 2024 and on a trajectory to 9.9%. He also noted the requirements about productivity, saying it was a problematic metric to measure. He asked how the productivity requirement and NCTR requirement could be met at the same time. Mr Higginson replied that the NOF4 exit criteria was based upon the A&E four-hour wait metric but alongside that the system had agreed to also reduce NCTR, which was not strictly an exit criteria. Mr Higginson added that failing to meet the target made the challenge more difficult but it was the right thing to do for staff and patients. Mr Cox asked if the 10-12 patients in a Royal Devon bed needing a psychiatric bed as reported at the recent Board meeting were counted in the NCTR measure. Mr Higginson confirmed they were not.

Mr Higginson outlined some of the issues with productivity. He said the Trust had a plan on a page which showed the Trust's level of activity compared to 2019/20 was 123%. Staff numbers increased at a lower rate so in a crude way this was an increase in productivity. Mr Kirby added that the Finance and Operations Committee was reviewing Service Line Reporting in order to use real time data to understand activity and once completed, this would feed into the Board's Integrated Performance Report.

Looking at the quarter as a whole, Mr Higginson said performance had improved and this improvement continued into Quarter One of 2024/25. Waiting lists remained a significant challenge, as did the plan to move from a 2023/24 year-end deficit of £27m to one of £9.8m at the end of 2024/25. Mr Higginson invited questions.

Ms Hallett commented on the big push by the Trust in the run up to the end of the financial year to meet the A&E target, noting that resources were diverted from elsewhere to do this. Mr Higginson acknowledged the comment, adding that the Trust had met the target thanks to the effort of staff and had been given £2m in capital to invest in UCE. It had also been to the benefit of the patients.

Mrs Noar referred to the patient experience page in the report and said she was pleased to see the information from Care Opinions. She noted that much of the feedback related to the Northern services, with little on Eastern services and asked why that was the case. Mr Higginson said that the Northern services patient experience team was further ahead in rolling out Care Opinion. The Eastern team were now also doing this, so the feedback from Eastern services should start to come through to the report.

Mrs Noar said she would like more feedback and data on patients with mental health issues who are patients at the Royal Devon. Mr Higginson said he appreciated that this was an area many Governors were concerned about. Although the Trust was not directly responsible for delivering mental health services, it did work closely with Devon Partnership Trust (DPT) and discussions were underway about inviting its Chair and Chief Executive to a Board meeting. Ms Morgan said she also had regular meetings with the DPT Chair, Andy Willis. She said DPT had attended the CoG meeting in June 2023 and an update was on the list for a future meeting. Mrs Matthews said she would like the CoG to meet with clinical staff from DPT to enable better

		<p>understanding and discussions on the mental health needs of the community. This was noted.</p> <p>Miss Foster said she had been made aware of very long waits at the A&E department at RD&E Hospital by people in her community, noting that waits were shorter at her local Minor Injuries Unit (MIU). There had been comments about triaging people at the A&E and also better signposting to patients as to where they should attend. Mr Higginson noted the comments, adding that the A&E at the RD&E did have GP streaming in order to triage patients, although this was not available at the community MIUs. Mr Richards made reference to a website and app developed by the University of Exeter called nhsquicker.co.uk, that provided real-time information for urgent care issues. It took live feeds from units and predicted travel and waiting times based upon location. Mr Higginson said he had made a note of the site and would look at it.</p> <p>There being no further comments or questions, the performance report was noted.</p> <p>The Council of Governors noted the Q3 2023/24 Performance Report.</p>	
6.4	24.24	<p>DISCUSSION WITH A NON-EXECUTIVE DIRECTOR: STEVE KIRBY</p>	
		<p>Ms Morgan welcomed Mr Kirby to the meeting and asked him to update the Council on his work as Chair of the Finance and Operations Committee (FOC).</p> <p>Mr Kirby said the FOC was established in 2022 as part of the integration of the two previous organisations. It met monthly and was also attended by his fellow NEDs Alastair Matthews and Carole Burgoyne and Angela Hibbard, John Palmer and Chris Tidman as Executive Directors. Senior managers from finance and operations also attended. Mr Kirby said the FOCs remit was to hold the Executive to account on financial performance, and to ensure the Executive had a firm grip on delivering operational plans. It provided supportive scrutiny, challenging on what was being done if targets were not being met. Mr Kirby said the FOC had oversight of the annual Operational and Financial Plan, which was approved by the Board. In terms of the Committee's focus, Mr Kirby said this included the workforce being aligned with the operational and financial plans and a focus on capital and managing the Trust's cash position. Mr Kirby said the FOC monitored delivery through receiving detailed reports by exception. The Trust's new Care Groups were now in place and the Committee was deliberating how it would hold these to account for delivery. The Committee had also worked on modelling of the medium and long-term financial plan. Mr Kirby said the FOC owned a couple of risks which were held on the Board Assurance Framework (BAF). Following a query from the CoG as to what the BAF was, it was agreed to add it to the CoG's glossary and acronym list.</p> <p>ACTION: Board Assurance Framework (BAF) to be added to the CoG acronym list and glossary.</p> <p>Mr Kirby outlined his areas of focus and concern, saying that this included NCTR and the funding the Trust received. He was also concerned by the impact of industrial action. In addition, Mr Kirby noted that the Trust was trying to reduce costs whilst patient acuity was increasing. He invited questions.</p> <p>The Council discussed with Mr Kirby the challenges of meeting the Trust's savings plan, whilst maintaining its cash position, along with many of the challenges related to NCTR being held within social care. Mr Kirby provided</p>	BC

		<p>assurance on how the Trust was able to access cash if required; however it was not predicted it would need to do so. Mr Higginson provided further assurance that the Trust strategy was not to reduce staffing numbers as part of the savings plan but to undertake more activity. In terms of NCTR, it was recognised that Devon County Council, which was responsible for the provision of social care, was under as much financial and operational pressure as the Trust and there were political issues to navigate. Ms Morgan talked about the Trust’s community teams and how important they were in supporting people at home to avoid admission to hospital. There were also initiatives such as the Virtual Ward, which the Governors were aware of. Mrs Hallett gave an example of a patient needing respite care who had been caught up between organisations as to who was responsible for organising this. Whilst this was being debated there remained someone who needed help. Ms Morgan said it was an example of the challenges faced and being constrained by resources and competing priorities whilst trying to do the best for patients.</p> <p>Mr Richards asked for more details on the savings plan, noting that saving on staff costs was the single largest item within the plan. Mr Kirby said it was not the intention to not recruit staff but it was about ensuring the right staff were in post to avoid bank and agency spend. Mr Kirby added that the biggest single number in the plan was the Trust being paid fairly for its activity rather than staffing. Professor Shore raised the issue of productivity and how staff were already overworked in trying to maintain current levels of activity. There was a discussion on the right messaging to staff on this and helping staff work more effectively. It was noted that the Nightingale had shown a way of working differently, including introducing new pathways, which provided a benefit to both patients and staff.</p> <p>Ms Morgan asked Mr Kirby to reflect on the most challenging and most rewarding parts of his role over the last seven years at the Trust. Mr Kirby said the COVID-19 pandemic was extraordinarily challenging, in particular understanding the impact of the Board’s decision making. Chairing FOC had been a challenge, given the financial situation and needing to ensure the tone of any challenge to the Board was right and that there was no compromise to patient safety. In terms of the most rewarding, Mr Kirby spoke about his role as Maternity Safety Champion for Eastern services.</p> <p>There being no further questions, Ms Morgan thanked Mr Kirby and the meeting paused for lunch.</p> <p><i>Mr Higginson, Mrs Bearfield and Mr Westlake left the meeting.</i></p> <p>The Council of Governors noted the discussion with Mr Kirby.</p>	
7.		STAKEHOLDER ENGAGEMENT	
7.1	25.24	FEEDBACK FROM COMMUNITIES – MY CARE	
		<p>The meeting reconvened after lunch and Ms Morgan welcomed Ms Partridge to the meeting. It was noted that Professor Shore had briefly left the meeting but would be returning.</p> <p>Ms Morgan said the Governors had agreed at the April 2024 Development Day to focus this discussion on issues related to MY CARE and the patient portal (My Chart) in particular. A prompt for the discussion had been circulated prior to the meeting.</p> <p>The following issues were raised:</p>	

		<ul style="list-style-type: none"> • Some users find My Chart easy to use and others find it clunky and not very intuitive. • Concerns about excluding people who are not digitally aware or do not have access to devices. • The Trust’s information on how to sign up and use the portal needed to reviewed and monitored based upon user feedback (this included online and the printed leaflet). • There was confusion as to how long information such as clinic letters remained within the portal, with some reports of them disappearing after 12 months and others saying the are there after some years. It was also not clear if documents could be printed from the portal and how to opt in to still receive paper copies of letters. <p><i>Tony Neal left the meeting.</i></p> <ul style="list-style-type: none"> • The name My Chart caused some confusion when it was known at the Trust as MY CARE. • The portal needed to enable easier contact with departments, including for people unable to use a telephone. It was noted that telephone numbers in the portal may differ from those given on letters. Being able to contact PALS through the app would be a plus. • There was discussion as to how it varied in terms of GP practices being aware of MY CARE. <p>It was noted that Mrs McCormack-Hole had used the prompts to survey people in her local community and she had shared the survey results with the Trust. Ms Morgan said all the feedback had been noted and would be fed back to the team. She added it had been useful to have a focussed discussion on a single topic and would encourage Governors to suggest any topics for the future. There being no further comments, Ms Morgan thanked everyone for their contributions.</p> <p>The Council of Governors noted the Feedback from Communities.</p>	
8.		COG BUSINESS	
8.1	26.24	REVIEW OF THE GOVERNORS’ CODE OF CONDUCT	
		<p>Mrs Matthews presented an update on the work to review the Code of Conduct. A task and finish group had been established following the discussion at the Development Day in April 2024. Its members were herself, Mr Reynolds, Mrs Greenfield and Mrs McCormack-Hole. There has been one meeting and some working via correspondence. The work to date had also been shared with the Governor Effectiveness Task and Finish Group and she said the draft would soon be ready for sharing with the CoG. Mrs Matthews gave an overview of some of the issues being considered, such as confidentiality and individual Governors signing the Code. She noted that the recommendations from Mr Neal’s review would also need to be taken into account. The Standard Operating Procedure (SOP) for alleged breaches was also being reviewed and this may need some support. Mrs Holley said she was happy to help.</p>	

		<p>Mrs Matthews said the aim was for it to come for formal approval to the 21 August 2024 meeting. Once it was approved, it would be circulated to all Governors and it would form part of the new Governor induction later in the year.</p> <p>The update on the Governors’ Code of Conduct Task and Finish Group was noted.</p>	
8.2	27.24	AMENDMENT TO THE CONSTITUTION – QUORACY OF BOARD OF DIRECTOR MEETINGS	
		<p>Ms Morgan presented the proposed amendment to the Constitution in relation to the quoracy of Board of Directors meetings. She said it had put unnecessary constraints on the business of the Board and so it had been reviewed.</p> <p><i>Professor Shore re-joined the meeting.</i></p> <p>Mrs Holley said the Constitution was due for a full review and this was an interim measure to ensure the Board could continue its business.</p> <p>Ms Morgan invited questions. As there were none, she asked the Council to approve the amendment, which it unanimously did.</p> <p>The Council of Governors unanimously approved the amendment to the Constitution in relation to the quoracy of the Board of Directors meetings.</p>	
8.3	28.24	TRUST GOVERNANCE REVIEW	
		<p>Mrs Holley presented the Trust Governance Review paper, which set out the proposals to going to the Board at its 26 June 2024 meeting. She highlighted an number of areas, including the proposal that Governors observe the Committees of the Board, apart from Remuneration Committee. There was a further suggestion that Governors join NEDs on their site visits across the Trust. Mrs Holley noted the proposed changes to the schedule of Board meetings and highlighted the variety of venues that would be used, including MS Teams. Ms Morgan said that feedback from Governors, particularly in relation to communication and engagement between Governors, the Trust and the NEDs, had been included in the governance review. She invited discussion on the proposals.</p> <p>The CoG discussed the importance of a new structure to show the Committees to be shared with Governors. It clarified that Governors would be attending the Committees as observers, as was currently the case with the Audit Committee. The Council also supported the proposal for accompanying NEDs on visits and it agreed that it was positive that some of its suggestions had been incorporated into the review. It recognised that it needed to be clear on what it did with the information it gathered, particularly in relation to holding the NEDs to account. A suggestion was made to hold a session at a Development Day with the NEDs on how they hold Executive Directors to account to see if anything could be learnt.</p> <p>ACTION: Session with the NEDs on how they hold Executive Directors to account to aid the CoG in its role to be added to the list of topics for a Development Day.</p>	BC

		<p>Ms Morgan said there would be further discussion on this at the Joint Board and CoG Development Day on 10 July 2024 and the paper was noted.</p> <p>The Council of Governors noted the Trust Governance Review.</p>	
8.4	29.24	ELECTION TO THE COUNCIL OF GOVERNORS 2024	
		<p>Mrs Holley presented the report, which she said would be taken as read. She highlighted the number of posts included in the election and noted that the report gave the details of in which constituencies, what terms of office were available and which Governors were eligible to stand for election. Mrs Holley noted that Miss Foster would be standing down after 9 years an elected Public Governor. There were still some details to be confirmed, including the exact timetable and the election services company. She invited questions.</p> <p>Mrs McCormack-Hole raised concerns about Governors being elected for only one year before they had to stand for re-election. She said there was also a concern amongst some Governors that one year was not enough time to get to know the role. She asked if any of the requirements could be bypassed in the upcoming election. Mrs Holley responded with details from the Constitution as to terms of office and what happens if a Governor resigns mid-term. She said it was important for governance to follow due-process. Mr Hall asked if it was possible for the Council to take a decision at the meeting or via correspondence that all the posts included in the election be for three year terms. Mrs Holley replied that a change to the Constitution would be required and the consequences to such changes would need to be worked through in terms of maintaining a regular cycle of elections. She added that any changes to the Constitution also needed to be approved by the Board and reminded the Council that a review of the Constitution was due to take place. Ms Morgan said the views of the CoG had been noted and this would be taken into account as part of the Constitution review but the upcoming election had to take place under the current rules.</p> <p>The Council of Governors noted the report on the elections to the Council of Governors.</p>	
8.5	30.24	REPORTS FROM THE COG COORDINATING COMMITTEE, PUBLIC AND MEMBER ENGAGEMENT GROUP AND THE TASK AND FINISH GROUPS	
		<p>Mr Hall presented the report on the Task and Finish Groups, reminding the CoG that the work on NED appraisals had been incorporated into the effectiveness group. It had also been decided to change the name to Governor Effectiveness from CoG Effectiveness as its work was broader than just CoG meetings. He said there had been good continuity in attendance at meetings.</p> <p>Mr Hall presented the Public and Member Engagement Group (PMEG) report. He noted that the last meeting was not quorate but it was usually well attended and the continuity was good. Work included reviewing the Governor flyer, which was not yet finalised.</p> <p>Presenting the CoG Coordinating Committee report, Mr Hall said he had been asked to chair in the absence of a Lead and Deputy Lead Governor. The report provided a list of agenda items, rather than a detailed report.</p> <p>Professor Shore reported on two recent Audit Committee meetings, which she observed on behalf of the Council. She provided an overview of the audit work</p>	

		<p>undertaken and said she had been struck by the rigour behind the counter fraud work. The Committee had met on 3 June 2024 to consider the final drafts of the Annual Report and Accounts and Quality Report in order to make recommendations to the Board of Directors. Professor Shore said there was good challenge throughout the meetings from the NEDs and Alastair Matthews’s chairing was excellent.</p> <p>In terms of the Patient Experience Committee (PEC), it was noted that Mrs Bearfield had attended the last PEC on behalf of the Governors. Mr Cox said Mrs Bearfield had provided an update in the pre-meeting and also raised the issue of Governors observing other Committees and Steering Groups. Mrs Holley said she was aware of the request and as mentioned above, it was being considered as part of the governance review.</p> <p>There being no further comments or questions, the reports were noted.</p> <p>The Council of Governors approved the Reports from the CoG Coordinating Committee, Public and Member Engagement Group and the Task And Finish Groups.</p>	
8.6	31.24	NOMINATIONS COMMITTEE REPORT	
		<p>Ms Morgan presented the report which set out the progress being made with the recruitment of two new NEDs. Shortlisting had taken place and the Committee was now moving to the final interview process. There were two candidates for the Finance post and four candidates for the Social Care/Partnership post. Governors had been invited to take part in the hustings with candidates, with a request for volunteers to act as host. Ms Morgan said a reminder of the details would be circulated. Professor Shore encouraged Governors to get involved, adding she had hosted hustings before and it was well supported by the search company and not onerous.</p> <p>ACTION: Details of the NED recruitment candidate hustings with a request for hosts to be recirculated.</p> <p>Ms Morgan said that once the process was concluded, the Committee’s work would turn to a nominated NED from the University of Exeter.</p> <p>There being no questions, the report was noted.</p> <p>The Council of Governors noted the Nominations Committee Report.</p>	BC
8.7	32.24	NED REMUNERATION COMMITTEE REPORT AND TERMS OF REFERENCE	
		<p>Mr Leepile, as a member of the Committee, presented the report. It summarised the decisions made by the Council at its confidential March 2024 meeting and also presented the Terms of Reference for approval, having gone through a routine review. There were no comments or questions on the Terms of Reference, which were unanimously approved.</p> <p>The Council of Governors noted the NED Remuneration Committee Report and approved the Terms of Reference.</p>	
8.8	33.24	ANNUAL REPORT AND ACCOUNTS AND QUALITY REPORT 2023/24	
		<p>Mrs Holley presented the report which updated the CoG on progress with the Reports production. As Professor Shore had noted earlier, the Reports had</p>	

		<p>been presented to the Audit Committee and the Committee would be making its recommendations to the Confidential meeting of the Board later in the month. There was then submission to NHS England before the Annual Report and Accounts had to be laid before Parliament. Once done the reports would be shared with the CoG and published, ahead of formal launch at the Annual Members Meeting. With regards to the Quality Report, Mrs Holley gave her thanks to Mrs Matthews and Mrs Bearfield for their drafting of the CoG stakeholder statement. This had been circulated to all Governors and included in the Report.</p> <p>There were no questions and the report was noted.</p> <p>The Council of Governors noted the update on the Annual Report and Accounts and Quality Report 2023/24.</p>	
9.		INFORMATION – NO REPORTS	
	34.24	<p>Any Other Business</p> <p>Ms Partridge asked about the Governors reviewing the list of Development Day topics. Mr Cox said this had been due to be done at the pre-meeting but time had not allowed. Mrs Holley said the list had been previously been circulated, with Governors asked to prioritise. It was noted that the draft agenda for the Joint Board and CoG Development Day in July was currently being considered in terms of topics requested by the Governors. The Council discussed in general the approach taken at Development Days and said it was important not to have too many topics to allow for in-depth discussions and more focussed sessions. This was noted.</p> <p>There being no further business, the meeting was closed.</p>	
		<p>DATE OF NEXT MEETING</p> <p>The next meeting would be held on Wednesday 21 August 2024.</p>	

MEETING OF THE COUNCIL OF GOVERNORS IN PUBLIC

5 June 2024

ACTIONS SUMMARY

This checklist provides a summary of actions agreed at the CoG meeting, and will be updated and attached to the minutes each quarter.

Minute No.	Month raised	Description	By	Target date	Remarks
08.24 (3)	March 2024	Mr Palmer to share information with the CoG on patient harm whilst on the cardiology waiting list (including waiting for angiograms)	JP	June 2024 August 2024	<p>June 2024 update: Issue being discussed at Cardiology Transformation Group on 20/05. Action on-going.</p> <p>August 2024 update: Over the last 12 months there have been five patients identified as having experienced harm (graded moderate or above) as a result of delays for angiography. These were identified either by the routine clinical audit (3 patients) or directly by their cardiologist (2 patients). The five harms relating to angiography waits are equivalent to 1.43% of the harms graded moderate or above reported within the Trust within the last 12 months (harms graded moderate or above within the specialty of cardiology as a whole accounted for 7.16%). Of the three patients identified by the audit, subsequent investigation has identified that moderate harm has been identified for each. Duty of candour letters have been written to be sent to the patients. The remaining two harms relate to instances where patients have died. These have been discussed at the Emerging Patient Safety Event Panel. Following the receipt of further information from the clinical team, the grading of harm will be determined by the Panel meeting, and any further investigation or review that is</p>

Minute No.	Month raised	Description	By	Target date	Remarks
					identified as necessary undertaken. Action closed.
09.24 (1)	March 2024	Communications Team to consider an article on Organ Donation and the Organ Donation Committee's work for the Trust's stakeholder newsletter.	SD	June 2024 November 2024	Update June 2024: This has been noted and the Team will liaise with Bridie Kent, NED lead for Organ Donation. Organ Donation Week takes place in September 2024 and an article is being considered to coincide with that. Action ongoing. Update August 2024: It was noted that the article was planned for October 2024 and it was agreed keep the action open until it was published. Action ongoing.
18.24	June 2024	Information on the Lead and Deputy Lead Governor election, confirming the new nomination deadline of 19 June 2024, to be re-circulated to Governors.	BC	August 2024	Update August 2024: This action was completed on 06/06/2024. Action completed.
19.24	June 2024	Linking the Council of Governors with the League of Friends across the Trust to be explored.	C&ET	August 2024	Update August 2024: Communications and Engagement Team circulated details by email to the CoG on 05/08/2024. Action completed.
20.24 (1)	June 2024	Acronym list and glossary to be circulated to all Governors	BC	August 2024	Update August 2024: This was circulated by email on 07/06/2024. Action completed.
20.24 (2)	June 2024	MY CARE user demographic information as reference by Sam Higginson at the June 2024 CoG meeting to be circulated.	BC	August 2024	Update August 2024: An email was circulated with the information on 07/06/2024. Action completed.
23.24	June 2024	Mr Higginson to follow up the issue of NHS Professionals contacting bank staff re vaccinations/measles check and locations for doing this and any charges being made by GPs.	SH	August 2024	Update August 2024: The issue was raised with the Trust's Head of Temporary Staffing who confirmed that the Trust had worked with NHS Professionals to source space and NHS Professionals had now set up local clinics in Exeter and North Devon. Action completed.
24.24	June 2024	Board Assurance Framework (BAF) to be added to the CoG acronym list and glossary.	BC	August 2024	Update August 2024: This was added so that it was included in the acronym list and glossary that

					was circulated to Governors on 7 June 2024. Action completed.
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Minute No.	Month raised	Description	By	Target date	Remarks
28.24	June 2024	Session with the NEDs on how they hold Executive Directors to account to aid the CoG in its role to be added to the list of topics for a Development Day.	BC	August 2024	Update August 2024: This has been added to the list of topics for Development Days. Action completed.
31.24	June 2024	Details of the NED recruitment candidate hustings with a request for hosts to be recirculated.	BC	August 2024	Update August 2024: An email was sent to all on 6 June 2024. Action completed.

Signed:

Name: Shan Morgan, Chair