

Minutes of the Blackpool Teaching Hospitals NHS Foundation Trust  
Council of Governors Meeting held on Monday 12th November 2012  
at 9.30 am in Room 4, Health Professionals Education Centre, Blackpool Victoria Hospital

Present: Mr Ian Johnson – Chairman

Council of Governors

Public Governors:-

Mr Eric Allcock – Blackpool Constituency  
Mr Peter Askew – Wyre Constituency  
Mr John Bamford – Wyre Constituency  
Mr John Butler – Blackpool Constituency  
Mr Mark Chapman – Blackpool Constituency (for items 1 to 12d)  
Mr Cliff Chivers – Blackpool Constituency (for items 1 to 12c)  
Mrs Hannah Harte – Blackpool Constituency  
Mr George Holden – Blackpool Constituency  
Mr Chris Smith – Blackpool Constituency  
Mrs Anne Smith – Fylde Constituency  
Mr Chris Thornton – Blackpool Constituency (for items 1 – 14a)  
Mrs Lynden Walthew – Wyre Constituency  
Mr Tony Winter – Fylde Constituency

Staff Governors:-

Mrs Tina Daniels – Non-Clinical Support  
Mr Andrew Goacher – Nursing and Midwifery  
Mrs Cherith Haythornthwaite – Clinical Support  
Dr Tom Kane – Medical and Dental  
Mrs Claire Lewis – Community Services

Appointed Governors

Mr James Morrison-Eaves – Blackpool Youth Council (for items 1 – 12b)  
Mrs Susan Rigg – Lancashire Care NHS Foundation Trust  
Mrs Jean Taylor – University of Central Lancashire

In Attendance: Mr Tim Welch – Acting Chief Executive  
Mrs Wendy Swift – Managing Director of Community Development/Transformation  
Mr Feroz Patel – Acting Director of Finance  
Mrs Kay Holland – Business Planner (for Mrs Oliver)  
Miss Judith Oates – Foundation Trust Secretary  
Mr Doug Garrett – Non-Executive Director  
Mr Alan Roff – Non-Executive Director  
Ms Fiona Jones – Patient Experience Officer (supporting James Morrison-Eaves)  
(for items 1 – 12b)  
Ms Anne Clarke – Blackpool LINK Advisory Group  
Dr Mark O'Donnell – Medical Director (for item 3)  
Ms Alison Stewart – Head of Simulation & Skills (for item 3)  
Mrs Emma Dawkins – Assistant Director of OD & Transformational Change

1. Declarations of Interest

The Chairman reminded Governors of the requirement to declare any interests in relation to the items on the agenda.

There were no declarations of interest.

2. Apologies for Absence

Apologies for absence were received as follows:-

- Jo MacDonald – Elected Governor (Lancashire & South Cumbria)
- Ramesh Gandhi – Elected Governor (Wyre)
- Jean Taylor – Appointed Governor (UCLAN)
- Paul Rigby – Appointed Governor (Lancashire County Council)
- Sam Woodhouse – Staff Governor (Nursing & Midwifery)
- Chris Lamb – Appointed Governor (North Lancashire)
- John Boughton – Appointed Governor (Blackpool Council)
- Mary Aubrey – Deputy Director of Corporate Affairs and Governance

At this juncture, the Chairman welcomed Tim Welch and Feroz Patel in their capacity as Acting Chief Executive and Acting Director of Finance respectively. The Chairman commented that the organisation was experiencing significant change, however, he was confident that individuals could rise to the challenge due to the high standard and depth of management.

**RESOLVED:** That the Chairman would provide feedback about the Chief Executive recruitment in due course; it being anticipated that the shortlisting would be confirmed shortly and that the interviews would take place before the year end.

3. Talksafe Presentation

The Chairman introduced Dr Mark O'Donnell, Medical Director, and Alison Stewart, Head of Simulation and Skills, and welcomed them to the meeting.

It was noted that Dr O'Donnell and Mrs Stewart had been invited to attend the meeting to report on the work being undertaken to foster a culture of zero tolerance on patient harms; it being noted that the aim was to not "do harm".

Mrs Stewart provided an overview of TalkSafe and outlined the Trust's current position in terms of patient safety; it being noted that, by taking risks on a daily basis, there would be some near misses and that these need to be captured and appropriate action taken. It was emphasised that the important message was the need to make a difference and to ensure that patient safety was the Trust's top priority.

The Chairman expressed thanks to Mrs Stewart for her presentation and commented on the need for a cultural change, not just in this Trust but in the NHS as a whole.

Mr Chapman asked about the resources available for this project and Mrs Stewart advised that the project was managed by the Clinical Skills Laboratory, however, extra funding had been provided to enable more time to be spent on the project and staff would be trained from the 18th November 2012.

It was suggested that it would be worthwhile to have patient representation in the project.

**RESOLVED:** **That Dr O'Donnell would make enquiries regarding patient representation in the project.**

Reference was made to patients who suffered an allergic reaction and Dr O'Donnell confirmed that, in such circumstances, a note would be included in the patient's records. Dr Kane assured the Governors that this was standard practice.

Dr O'Donnell stated that the overall figures for patient harms were not good but, on the positive side, he had reviewed the national patient safety data and the Trust's figures for incidents were better than the national average, indicating that the profile had been raised amongst staff.

The Chairman stated that it was an excellent project and, by starting to ask questions, changes in behaviour would emerge.

Dr O'Donnell stated that arrangements were being made to enable conversations with patients to be recorded, thereby enabling trends to be analysed and appropriate action taken.

It was noted that the Trust was in the process of finalising significant investment with the commissioners in terms of electronic information across different parts of the health system in order that data could be readily shared.

Mr Bamford thanked Mrs Stewart for her presentation and asked Governors whether they would be interested in attending the TalkSafe training course; it being noted that this could prove useful when undertaking patient safety walkabouts.

**RESOLVED:** **That Governors would advise Miss Oates if they were interested in attending a TalkSafe training course.**

5. Chairman's Introduction

The Chairman referred to the excessive number of items on the agenda and pointed out two significant items; namely the Fylde Coast Consultation and the Strategic Report.

The Chairman advised the Governors that, because certain items on the agenda were statute, there was insufficient time to discuss more strategic issues and that consideration was being given to having perhaps one or two meetings dealing with statute items and the remainder of the meetings concentrating on the big themes in order to enable more interactive discussion to take place. It was anticipated that a draft proposal would be developed by the next meeting.

The Chairman further advised that the Board also had to discuss statutory requirements but, again, needed to be focused on the strategy and therefore Mr Roff was chairing a sub-group comprising two Non-Executive Directors and two Executive Directors to review how Board procedures could be streamlined in order that substantial attention could be given to strategic issues without neglecting the need for the Board to be assured about operational issues.

At this juncture, the Chairman asked Mr Roff to advise Governors about the work being undertaken by the Board Processes Sub-Group to streamline Board processes.

Mr Roff reported that, at present, Board members were required to review between 50 and 60 reports and 400 indicators on a monthly basis and that consideration needed to be given to ensuring a good balance between operational issues and strategic issues; it being noted that the sub-group was moving towards a conclusion that the Chief Executive's Report should comprise an assurance report with key indicators which could then be presented at the Council of Governors meetings.

Mr Roff explained that the Non-Executive Directors were required to hold the Executive Directors to account and that the Governors were required to hold the Non-Executive Directors to account and that the proposed way forward would ensure better use of both the Non-Executive Directors' time and the Governors' time.

**RESOLVED:** That progress from the Board Processes Sub-Group would be reported at the next meeting of the Council of Governors, following discussion by the Board in December 2012/January 2013.

Mr Bamford suggested focusing on the corporate objectives and Mr Roff confirmed that this would be the main core.

The Chairman confirmed that the most logical way forward would be to complete the review of the Board procedures prior to determining the Council of Governors' procedures.

#### 4. Governors Development Programme

The Chairman reminded Governors about the Governor Development Programme which had been designed to assist Governors in undertaking their role more effectively; it being noted that the roles and responsibilities of Governors were likely to increase and therefore better training needed to be provided.

Mrs Dawkins reported that the Foundation Trust Network provided good training courses, however, it was thought that a programme bespoke to this Trust would be more beneficial.

Mrs Dawkins circulated an updated proposal which had been discussed with the Chairman and Mrs Smith.

It was anticipated that the training would be appropriate for Governors' requirements, however, it was noted that any residual development needs could also be discussed.

It was noted that Mandy Wearne, Specialist in Leadership and Strategy at the Department of Health, would be attending the second of the three development sessions.

Mr Winter asked about the level of interaction at these sessions and Mrs Dawkins advised that she would be facilitating the groups, rather than teaching them, therefore the sessions would be very interactive.

Mrs Lewis asked about the arrangements for accommodating turnover of Governors and Mrs Dawkins advised that relevant information would be included in the induction programme.

The Chairman commented that it was important to start the programme and then fine-tune it as it progressed.

Mr Chapman asked Mrs Dawkins whether she had considered asking Governors to facilitate some of the training and Mrs Dawkins stated that suggestions/input from people who could add value would be welcomed.

The Chairman hoped it would be a positive initiative which would help Governors to use their time more effectively.

Mr Allcock expressed concern that, whilst the very nature of Governors was to support each other, and that any proposal to improve patient care was welcomed, it must be remembered that elected Governors were accountable to the members who had elected them. The Chairman accepted this but advised that the training was more about equipping Governors with the necessary skills and about learning from each other.

**RESOLVED:** That Miss Oates would confirm shortly the dates of the three sessions for the Governor Development Programme.

That Mrs Dawkins would share a report from the King's Fund entitled "Leadership and Engagement for Improvement in the NHS".

6. Minutes of the Previous Council of Governors Meeting held on 13th August 2012

**RESOLVED:** That the minutes of the previous Council of Governors Meeting held on the 13th August 2012 be agreed as a correct record and signed by the Chairman.

Mrs Smith queried the reference to inadequate staffing on Ward 8 on page 15 of the minutes. Mr Welch advised that ward visits were undertaken to check staffing levels and that the Board had recently agreed a £1.5 million investment in nurse staffing effective from the 1st April.

7. Matters Arising

i) Action List from the Council of Governors Meeting held on the 13th August 2012

It was noted that the actions had either been addressed, had been included on the agenda for discussion later in the meeting or had been included on the business calendar for discussion at a future meeting.

With regard to Non-Executive Director attendance at the informal Governors' meeting, it was noted that Tony Shaw would be attending on the 24th October.

8. Minutes of the Extraordinary Council of Governors Meeting held on 14th September 2012

The Chairman reminded Governors that an Extraordinary Council of Governors Meeting had taken place on the 14th September 2012 to consider the amendments to the Constitution as determined by Monitor. It was noted that the amendments had been approved and had subsequently been approved at the Annual Members' and Public Meeting on the 24th September 2012.

**RESOLVED:** That the minutes of the Extraordinary Council of Governors Meeting held on the 14th September 2012 be agreed as a correct record and signed by the Chairman.

9. Matters Arising

There were no matters arising.

10. Council of Governors Meetings – Action Tracking Document

The action tracking document was noted by the Governors.

11. Chairman's Report:-

a) Chairman's Communications

The Chairman's report, detailing the activities that had taken place during the past few weeks, was provided for information and was self explanatory.

The Chairman pointed out that, in view of the changes in the health economy, the Trust should have as many contacts as possible with external organisations and engage about collaboration.

**RESOLVED:** **That the Chairman would ensure that Governors were informed of developments regarding collaboration.**

**That the Chairman would consider inviting external organisations to meet with the Council of Governors in due course.**

b) Action Plan from Deloitte's Formal Feedback Report: Governors' Workshop

The Action Plan from Deloitte following the Governors' Workshop was presented to the Governors; it being noted that the majority of the recommendations had been completed and the outstanding recommendations had end dates attached to them.

With regard to membership engagement, Mr Bamford confirmed that many positive messages were communicated to members, however, messages about serious issues also needed to be communicated to members, i.e. public consultation, investment in nurse staffing.

The Chairman pointed out that regular Members' Seminars were arranged and that the Council of Governors was now engaged with the membership.

c) Health & Social Care Act 2012 – Implications for the Trust

The Chairman referred to the Board Report and Action Plan in relation to the Health & Social Care Act 2012 and highlighted the need for the Trust to ensure compliance with the legislation.

Mrs Walther referred to the action on page 10 indicating that Board of Directors' agendas and minutes would be shared with the Council of Governors from April 2013 and asked if this action could be implemented with immediate effect. It was noted that all Board agendas and minutes were currently available on the website via the following link - <http://www.bfwh.nhs.uk/about/meetings.asp>

Mrs Walther referred to the actions on page 14 and requested timescales for dealing with significant transactions. Mr Welch explained that community services transactions, for example, would in future require engagement with Governors.

d) **Stewardship Standard for Governors of NHS Foundation Trusts**

The Chairman drew attention to the document entitled "Stewardship Standard for Governors of NHS Foundation Trusts" which was part of the governance framework and advised that, to date, three Trusts had introduced the guidance.

The Chairman commented that, subject to positive feedback from the Governors, the document could be approved and implemented or, alternatively, the Governors could develop their own version of the guidance.

The Governors commented that it was a useful document.

Mr Roff suggested that the guidance could usefully be included in the Governors' Development Programme.

**RESOLVED:** **That the document entitled "Stewardship Standard for Governors of NHS Foundation Trusts" be approved.**

**That Miss Oates would forward the document to Mrs Dawkins for use as part of the Governors' Development Programme.**

e) **Draft Role Specification for Lead Governor**

It was noted that the draft Role Specification for the Lead Governor had been circulated to Governors for comment and that the comments received would be incorporated into the document.

Mr Chapman asked about the process for nominating a future Lead Governor to replace Mrs Smith. The Chairman suggested that the nomination of a Lead Governor should be considered following the next Governor elections in September 2013. Mrs Smith's view was that the role of the Lead Governor should be reviewed on a regular basis.

f) **Council of Governors' Sub-Groups – Progress Report**

The Chairman referred to the newly established Governor sub-groups and feedback was provided as follows:-

Patient Experience Sub-Group – Tony Winter (Chairman)

- Three meetings had taken place to date and the Terms of Reference and action plan had been agreed and discussed with the Chairman.
- Paul Jebb had given an excellent presentation regarding his activities and responsibilities.

It was Mr Winter's view, having attended the formal Patient Experience Committee meeting, that there was duplication of effort, therefore the sub-group had been disbanded and the relevant Governors had formed a Working Group of the formal Patient Experience Committee and would report to the quarterly meetings of the Patient Experience Committee.

The Chairman thanked Mr Winter and the other Governors on the sub-group for their work undertaken in this area to date.

Mr Winter referred to the three questions from the sub-group, which had been investigated and answered in advance of the Council of Governors meeting, and stated that one response did not answer the question and that additional information was needed. Mr Winter recognised that time at the formal meetings was precious but thought that perhaps some questions raised should be added to the agenda rather than answered in advance. The Chairman assured the Governors that the purpose of responding in advance was to ensure prompt feedback and not to preclude discussion.

Finance Sub-Group – Jo MacDonald (Chairman)

- In the absence of Mrs MacDonald, no feedback was given.

Patient Safety & Quality Sub-Group – John Bamford (Chairman)

- One meeting had taken place to date.
- The Terms of Reference should define how to integrate the current work taking place in the Trust.
- The Board should be held to account for safety and quality objectives and the role of the sub-group would be to ensure that there were mechanisms in place to determine patient safety and quality.

Membership Sub-Group

- Discussion had taken place about the reduction in membership and whether the focus should be recruitment or engagement.
- Three sub-groups had been established, each with one specific strategic objective.
- The importance of all Governors taking responsibility for membership was emphasised.

TOPPs Sub-Group – Anne Smith (Chairman)

- No meeting had taken place to date.

The Chairman stated that he would like to meet with the Chairman of each sub-group on an individual basis.

g) Nominations Committee – Appointed Governor Representative

This item was deferred to the next meeting.

At this juncture, the Chairman reported that the Nominations Committee had recently discussed the shortlisting and interview arrangements for the additional Non-Executive Director post. Mr Askew advised the Governors that Mr Allcock, Mrs Smith and himself had attended the meeting and had discussed the report from the executive search company which recommended thirteen candidates for consideration by the shortlisting panel. It was noted that five candidates had been selected for interview.

h) Schedule of Council of Governors' Meetings for 2013

Miss Oates advised the Governors that a revised schedule of meetings would be circulated shortly.

12.

Chief Executive's Report:-

a) Chief Executive's Report

Mr Kehoe presented the Chief Executive's Report which included the following items:-

- Monitor Quarter 1 Conference Call
- Nursing Times Awards
- Public Question Time
- Monitor Consultations
- Bursary Scheme Proposal
- Bowel Cancer
- Patient Experience – Single Point of Contact
- AQuA Update
- Meeting with Jackie Daniel, Chief Executive, University Hospital of Morecambe Bay.
- Meeting with Mark Britnell, Global Head of Healthcare, KPMG
- Dr Alex Gaw – Chairman, Lancashire North CCG
- Annual Members' and Public Meeting and Staff Achievements Ceremony
- Meeting with Ben Wallace, MP
- Blackpool Nomination Ceremony Celebrating Success
- North West Chief Executives' Forum
- Meeting with Mark Menzies, MP
- QuIPP Update.
- Meeting with CHKS Regional Manager
- Cardiac Bed Ring-Fencing
- Gastroenterology Business Case
- Head and Neck Cancer.
- The Report of the Hillsborough Independent Panel
- Clinical Leadership Development Programme
- Mortality Meetings with Specialists.
- Meeting with IMS Chief Executive

Monitor Quarter 1 Conference Call

Mr Welch advised the Governors that Monitor had emphasised that the decision to remove the Trust from significant breach had been a marginal decision; it being noted that there would be serious implications for the Trust and for Monitor if the anticipated financial risk rating of 3 was not achieved by the end of Quarter 3.

Clinical Leadership Development Programme

Mr Welch reported that the latest programme was the fourth cohort and that members of the Executive Team had attended to talk about their areas of experience. It was noted that Non-Executive Directors and Governors would be asked to participate in future programmes.

Mortality Meetings with Specialists

It was noted that Mr Kehoe had arranged a series of meetings within the areas where mortality rates had been significantly high and that Mr Welch would be continuing these meetings in terms of ensuring that improvements were made in these areas.

b) Corporate Objectives 2012/13: Quarter 2 Update

Mr Welch referred to progress in respect of the corporate objectives which reflected on the items discussed earlier, particularly around having as many measurable items as possible.

Mr Bamford stated that it was a key document and made the following comments:-

- The Trust was continuing to reduce pressure ulcers and c diff and had increased the number of patients assessed for VTE which was demonstrably saving lives.
- The Trust was not making progress in respect of patient falls, medication errors and readmission rates.
- The patient surveys were generally good, however, there were indications that communication was not good and the complaints/PALS information indicated that communication and administration were recurrent themes.
- The Trust should consider the pathway for cancer patients and move away from meeting targets for individual parts within the pathway to a quality improvement approach refocused on the opportunities to simplify and compress the overall timescale from first GP appointment to treatment, ensuing early detection. Mr Bamford referred to an individual patient whose experience had not been good and asked for a review of this service including GP involvement.

Mr Welch commented that the service provided to the patient referred to by Mr Bamford was clearly not acceptable but assured the Governors that, with the level of engagement now in place between the Trust and the GPs across the Fylde Coast, the Trust could start to make progress.

In terms of the corporate objectives and making them as visible as possible, Mr Welch confirmed that Mrs Swift would be reporting on the strategic framework and the associated improvements later in the meeting and that, hopefully, this information could be provided to the Governors following the next Board meeting.

**RESOLVED:** **That information in relation to the strategic framework would be forwarded to Governors following the Board meeting in November 2012.**

**That discussion would take place at the next Council of Governors meeting about whether the Governors' questions had been answered.**

The Chairman reported that Board members had attended an event the previous week which focused on the quality issue and, as a result, improved measures would be introduced.

Mrs Walthew made the following comments:-

- Page 1 – Nursing Care Indicators: there was no reference to CQC Outcome 5 within this section.

It was noted that Outcome 5 related to “meeting nutritional needs” and that the Trust’s nutrition mission process had been invigorated.

Mr Welch confirmed that the nursing care indicators were monitored on monthly basis.

- Page 3 – Health and Safety Executive Targets: there was no reference to the Care of the Acutely Ill Groups.
- Page 5 – Complaints: there were no numbers in relation to complaints and the percentage responded to within 25 days.
- Page 6 – Cancelled Operations: there were no numbers in relation to cancelled operations.

Mr Welch confirmed that the Trust was exceeding expectations in terms of the reduced number of cancelled operations.

- Page 7 – Pre-Op Bed Days: there was no reference to escalation wards.

Mr Welch advised that the number of days was not absolute days and that escalation was slightly different because it impacted upon the medical side, rather than the surgical side, of the service.

- Page 7 – Non-Elective Bed Days: there were insufficient numbers in relation to non-elective beds.

**RESOLVED:** **That Mr Welch would investigate the points raised by Mrs Walthew and Mr Bamford and provide feedback.**

**That the “Progress Against Target” section would be completed for all key measures.**

Mr Holden reported that he had attended the Blackpool LINK meeting on the 9th November and an excellent presentation had been given in relation to dementia. It was noted that reference had been made to the Butterfly Project and Mr Holden suggested inviting the nurses involved to attend a Council of Governors meeting in order that the Governors could be made aware of this really important project.

**RESOLVED:** **That consideration would be given to arranging a presentation to the Council of Governors in relation to the dementia project.**

Mrs Harte pointed out that Mrs Thompson had only attended one meeting of the Council of Governors and thought it was important that members of the Executive Team were present to respond to queries from Governors. The Chairman stated that this was not an unreasonable request and asked for Governors' views about Executive Directors attending future meetings. Mr Roff suggested that Executive Directors could be scheduled to attend meetings to report on their areas within the Chief Executive assurance report, thereby making the best use of their time.

Mr Chapman referred to the comments from Mr Bamford in relation to the patient pathway and suggested highlighting the turnaround time for feedback to GPs; it being noted that there may be delays in follow-up appointments because of the lack of standardisation around result reporting. Mr Chapman suggested working towards a target whereby, for example, 98% of test results were reported to GPs within 48 hours.

Mr Smith commented that there was no reference within the corporate objectives to community services. Mr Welch confirmed that community services had been accounted for, i.e. sickness absence.

Mrs Lewis stated that the 30% target for medication errors was not particularly meaningful. Mr Welch reported that, ideally, the target was to achieve no medication errors, however, a target of 30% had been agreed.

**RESOLVED:** **That consideration would be given to presenting this information in a more meaningful format.**

Mr Bamford reiterated the need to monitor the number of patients being harmed and the need to improve the effectiveness of learning from incidents.

The Chairman confirmed that the presentation of information was being considered as part of the work being undertaken by Mr Roff in his capacity as Chairman of the Board Processes Sub-Group.

**RESOLVED:** **That the Chairman would ask the Executive Directors to consider the format in which information was presented to the Council of Governors.**

Mrs Haythornthwaite commented that the National Patient Safety Agency actually reported specific Trust's data in the public domain.

Mr Holden referred to the re-admission rates and requested help in understanding the statistics.

The Chairman commented that some valid points had been raised and reiterated that consideration would be given to Executive Directors attending future meetings for this type of discussion.

g) Quarterly Finance Report (1st July to 30th September 2012)

The quarterly finance report for the period 1st July to 30th September 2012 was provided for information.

Mr Patel reported that he was working closely with the commissioners about availability of non-recurrent resources to help during the winter period and to achieve some of the big themes referred to by Mrs Swift.

Mrs Smith asked about the figure for non-NHS work and was advised that private patient income was approximately £1 million per year.

At this juncture, Mr Holden referred to the bids for funding submitted to the Charitable Funds Committee which were sometimes rejected because it was thought that they should be funded by the Trust and, once rejected, the Charitable Funds Committee was not informed about the source of funding for these bids.

**RESOLVED:** **That, in future, feedback regarding those bids that had been rejected by the Charitable Funds Committee would be provided to members of the Committee.**

Mr Winter asked about the risks in relation to achieving a financial risk rating of 3. Mr Welch reported that the two most challenging metric were liquidity and, of more concern, EBITDA margin delivery. Mr Welch was confident that the EBITDA target would be achieved but should not lose site of the run-rate into 2013/14.

h) Quarterly Performance Report (1st July to 30th September 2012)

The quarterly performance report for the period 1st July to 30th September 2012 was provided for information.

i) Patient Experience Report

The Patient Experience Report for Quarter 2 was provided for information.

Mr Bamford reported that he attended meetings of the Learning from Incidents and Risks Committee (LIRC) and the Committee was to be commended for the way in which complaints were dealt with, however, Mr Bamford pointed out that complaints needed to be used as a valuable source of information which could be learnt from as a component of quality. It was noted that Dr O'Donnell and Mrs Thompson were working on this issue.

j) Clinical Audit Update

The Clinical Audit Update for Quarter 2 was provided for information.

k) Vision Programme Update

The Vision Programme Update was noted by the Governors.

l) Fund-Raising Update/Going for Gold Appeal

The Fun-Raising Update/Going for Gold Appeal was noted by the Governors.

13. Membership Report

a) Membership Update

The membership figures from 1st April to 26th October 2012 were provided for information.

Mr Holden reported that he had promoted membership at the recent LINk meeting, however, he pointed out that there were no plans to include other benefits within the membership, i.e. car parking, telephone use when in hospital.

The Chairman agreed with Mr Holden's comments and assured the Governors that more focus would be given to membership and its benefits, i.e. discounts at Lloyds Pharmacy.

**RESOLVED:** **That progress would be reported at the next meeting of the Membership Committee.**

Mr Garrett stated that active engagement needed to be considered, not just written engagement.

It was noted that a member of the Communications Department would be attending future meetings of the Membership Committee.

b) Key Elements of Implementation of the Strategy Document

It was noted that this item had been discussed under item 11 (f).

c) Items Referred from the Membership Committee Meeting held on 30th October 2012

There were no items referred from the Membership Committee.

d) Membership Committee Terms of Reference

The Membership Committee Terms of Reference were presented for approval.

**RESOLVED: That the Membership Committee Terms of Reference be approved.**

14. Issues Raised by Governors:-

a) Patient Discharges At Night / Prescription Delays

It was noted that Mrs Woodhouse had addressed Mrs Smith's concerns regarding patient discharges at night and prescription delays and that Mrs Oliver had reported on these issues at the last meeting of the Patient Experience Committee.

b) Appointed Governor Representation: Service Liaison Committee

There was nothing to report on this item.

c) Gazette Article: Fraud Allegation

Concern was expressed that the Governors had not been briefed in advance about an article that had featured in the Gazette. Mr Welch stated that, under normal circumstances, the Governors would be briefed, however, there were a couple of incidents still being investigated.

The Chairman confirmed that, once processes had reached a conclusion, Governors would be briefed where appropriate.

Mr Garrett pointed out the need not to speculate regarding such articles.

d) Council of Governors' Agenda: Executive Summary and Verbal Overview of Reports

There was nothing to report on this item.

15. Feedback Reports:-

a) FTGA Feedback

There was no feedback in relation to the FTGA.

b) Feedback from North West Leadership Event held on 23<sup>rd</sup> August 2012

Feedback from the North West Leadership Event held on the 23rd August 2012 had been circulated with the agenda. Mrs Smith commented that it had been a good event and that it had been helpful for Mrs Gaynor to attend.

c) Feedback from Governors' Attendance at Board Meetings:-

It was noted that feedback from Governors' attendance at Board Meetings was provided either by completion of the pro-forma or by speaking to the Chairman immediately following the meeting.

**RESOLVED: That Governors wishing to observe future Board meetings should inform Miss Oates.**

- d) Feedback from Formal Patient Safety Walkabout held on 20<sup>th</sup> October 2012

Feedback from Mrs MacDonald regarding the Formal Patient Safety Walkabout on the 20th October 2012 had been circulated with the agenda.

- e) Feedback from Governor Induction Day held on 9th November 2012

It was noted that Mr Longstaff had been scheduled to attend this event but, at short notice, had been unable to attend.

16. Standard Reports – Mr Johnson to report:-

- a) Items to be Reported to the Board of Directors

There were no specific items to be reported to the Board of Directors.

- b) Items to be Recommended for Decision or Discussion by Trust Committees

There were no items recommended for decision or discussion by Trust committees.

- c) Annual Work Plan

The Annual Work Plan was provided for information.

It was noted that the document may be amended to reflect any new structures from the Board Processes Sub-Group.

- d) Attendance Monitoring

The attendance monitoring form was provided for information.

The Chairman stated that he would be writing to those Governors who had not attended three consecutive meetings to ask for an explanation about non-attendance.

- e) Motions or Questions on Notice

The Chairman reiterated that responses to questions raised by the Governors had already been communicated to Governors and he asked Governors to advise him if insufficient information had been provided.

- f) Urgent Motions or Questions

There were no urgent motions or questions.

- g) Declaration of Confidentiality

**RESOLVED:** That items 12(c), 12(d), 12(e) and 12 (f) be declared confidential under the Freedom of Information Act.

- f) Date of Next Meeting

The next meeting will take place on Monday 11th February 2013 at 9.30 am in the **Board Room, Blackpool Stadium**.