

**Council of Governors Meeting**  
**Minutes of the Meeting held in Public**  
**Thursday, 24 January 2019**  
**at 5.30pm in the Post Graduate Lecture Hall, Leighton Hospital, Crewe**

**Present**

Mr D Dunn	Chairman
Dr K Birch	Lead Governor and Public Governor (Vale Royal)
Mr T Ashcroft	Public Governor (Vale Royal)
Mr M Perry	Public Governor (Vale Royal)
Mr G McCourty	Public Governor (Vale Royal)
Mrs B Beadle	Public Governor (Crewe and Nantwich)
Mr B Selby	Public Governor (Crewe and Nantwich)
Mrs J Ollier	Public Governor (Congleton)
Mrs P Psaila	Patient and Carer Governor
Mrs M Leverington	Patient and Carer Governor
Mr M Long	Patient and Carer Governor
Mrs N Moores	Patient and Carer Governor
Mr R Stafford	Patient and Carer Governor
Cllr J Clowes	Partnership Governor (Cheshire East Council)
Mr P Colman	Partnership Governor (Chambers of Commerce)
Dr J Griffiths	Partnership Governor (Vale Royal CCG)
Mrs H Piddock- Jones	Staff Volunteer Governor
Mr N Boyce Cam	Staff Governor (Medical and Dental Practitioners)
Mrs J Martin-Jackson	Staff Governor (Nursing and Midwifery)
Ms C Birch	Staff Governor (Rep. of Trade Unions and Staff Organisations)

**In attendance**

Mrs T Bullock	Chief Executive
Mrs H Barnett	Director of Workforce and OD (to item CoG/18/10/15)
Ms L Butcher	Non-Executive Director (to item CoG/18/10/15)
Mr J Church	Non-Executive Director (to item CoG/18/10/15)
Mr M Davis	Non-Executive Director
Mr D Hopewell	Non-Executive Director (to item CoG/18/10/15)
Ms L Massey	Non-Executive Director (to item CoG/18/10/15)
Mr M Oldham	Director of Finance (to item CoG/18/10/15)
Mr C Oliver	Chief Operating Officer (to item CoG/18/10/15)
Mrs J Tunney	Director of Nursing and Quality (to item CoG/18/10/15)
Mrs L Lane	Advanced Community Practitioner (to item CoG/18/10/03)
Mrs L Papworth	Advanced Community Practitioner (to item CoG/18/10/03)
Ms E McGuigan	Director of Operations (to item CoG18/10/04)
Mrs K Dowson	Trust Board Secretary

**Observing**

Dr C Gillon	ST8 Paediatrics
<b>Name removed under Section 40 of the Freedom of Information Act</b>	Executive Assistant to the CEO and Chairman (to item CoG/18/10/15)

**Apologies**

Mrs G Alasadi	Public Governor (Crewe and Nantwich)
Mrs J Roach	Public Governor (Crewe and Nantwich)
Mr J Pritchard	Patient and Carer Governor
Mrs L Evans	Staff Governor (Clinical Support Staff)

Mr R Sutton	Staff Governor (Other Professionally Qualified Staff)
Mr R Platt	Staff Governor (Non-Clinical Support Staff)
Dr Andy Wilson	Partnership Governor (Vale Royal CCG)
Cllr S Burns	Partnership Governor (Cheshire West & Chester)
Dr G Pearson	Partnership Governor (Manchester Metropolitan University)
Dr P Dodds	Medical Director and Deputy Chief Executive
Mr J Barnes	Non-Executive Director

<b>CoG19/01/1</b>	<b>Welcome and Apologies for Absence</b>
19/01/1.1	The Chairman welcomed everyone to the meeting, in particular Mr Long who was attending his first meeting of the Council as a Governor and Mrs Barnett who was formally attending as an Executive Director for the first time. The Chairman also welcomed staff members attending to observe and to present items.
19/01/1.2	The Chairman noted the apologies for absence.
<b>CoG19/01/2</b>	<b>Interests to Declare</b>
19/01/2.1	There were no new interests declared and no interests declared in relation to any open items on the agenda.
<b>CoG19/01/3</b>	<b>Patient Story – Community Rapid Response Service</b>
19/01/3.1	Mrs Tunney introduced the patient story chosen by Governors which was previously presented to the Board of Directors in November 2018. The story is in regard to a patient who benefitted from the new Rapid Response Service (RRS) established by Central Cheshire Integrated Care Partnership (CCICP) in September 2017. Mrs Papworth explained that the service identifies patients with long term conditions that have led to a number of hospital visits and admissions. In this case the patient had had seven hospital admissions between November 2017 and June 2018 for urinary infections. The story illustrated that a combination of a care package, training for his carer, therapies and rapid access to a GP and antibiotics if required had been successful in preventing further hospital admissions. The patient also described the positive impact on his life.
19/01/3.2	The Chairman asked how the patient is doing and Mrs Papworth replied that he is doing very well and has not been back into hospital since. As a result of the support given, his speech, mobility and his vascular dementia has improved now the infection is under control. Mr Church asked how the RRS is received by patients in the community. Mrs Papworth replied that the service is very well received, the Community Matrons can prescribe antibiotics and deal with a wide range of issues. Ms Butcher commented on how positive it is to see how the service has allowed the patient to regain their independence.
19/01/3.3	Cllr Clowes asked how easy it has been to work with social care to put packages of care into place. Mrs Papworth replied that the patient only needed care for a few weeks and was then keen to be independent again. He has particularly benefited from therapists and day support at St Luke's hospice.

19/01/3.4	Mr Oldham asked what the catalyst was to change the service. Mrs Lane replied that about 18 months ago the Community Matrons identified that the demand was changing and that there were a number of patients with long term multiple conditions that needed active support and management to avoid hospital admissions that are not in best interest of the patients. Mr Oldham asked if there are patients that are not accessing this service because of capacity. Mrs Lane replied that the service is only weekdays, 9-5 and there is a business case being worked through to extend this service as the demand is there 24/7.
19/01/3.5	<p>Mr Oliver asked what the impact on the team has been. Mrs Papworth replied that it has been very positive in terms of the impact seen on patients and for staff the authority to assess and make decisions is empowering, although challenging at times. Mr Selby asked how patients access the service and Mrs Papworth advised that either the GP or the multidisciplinary community team refer through the district nurse. The Chairman thanked Mrs Papworth and Mrs Lane and their team for their work and commented on the rich vein of services that have been added to the Trust since it has taken on the hosting arrangements for the Community Services Partnership and this service exemplifies what the Trust aspires to.</p> <p><b>Resolved:</b> The Council noted the presentation</p> <p><i>Mrs Lane and Mrs Papworth left the meeting.</i></p>
<b>CoG19/01/4</b>	<b>Governor Discussion Topic – Access and Flow Update</b>
19/01/4.1	Ms McGuigan, Director of Operations presented an update on the Access and Flow project which was last presented to the Council in 2017. Ms McGuigan explained that the Access and Flow programme finished last year but work continues under the Transformation Programme. Ms McGuigan reminded Governors of the work completed under Access and Flow, including streaming to GPs and ambulatory care in the Emergency Department (ED) and the Discharge to Assess ward programme.
19/01/4.2	Ms McGuigan noted the successes of the programme, including the development of a closer working relationship with local authorities (LA) and the Clinical Commissioning Groups (CCG) to support patients out of hospital to home or to another safe environment. This has resulted in a significant decrease in patients who are clinically optimised to leave hospital being delayed because packages of care are not in place. Other successes include the Virtual Fracture Clinic and Skype consultations in care homes.
19/01/4.3	Ms McGuigan presented the plans for improvements in 2019/20 which are in response to the increasing year on year demand and to new technology and digital transformation planned in the Trust. For example, 'Patient Knows Best' is currently being piloted with a group of patients on the Thyroid pathway which is a web based platform that patients and GPs can input into to monitor patients. Work is underway to introduce more virtual clinics and use the virtual hospital model more widely.
19/01/4.4	Ms McGuigan advised that the project team had assessed their performance with the help of the national improvement team. The conclusion was that building relationships is crucial to delivering projects

19/01/4.5	<p>successfully and this can take time. In response to the feedback the transformation team has decided to focus on a smaller number of projects that can then be embedded if successful.</p> <p>Ms McGuigan explained that a new 90 day methodology is being used which will focus the team on one problem; bringing in additional resource such as finance support from the beginning. This approach will include patient engagement and a clinical-led approach from the start and will ensure projects are implemented and embedded if successful. These projects will be across streaming, SAFER (rapid consultant review on wards) and Pathway 3 (discharge to home). Success will be measured by community and staff feedback as well as metrics and impact.</p>
19/01/4.6	<p>The Chairman thanked Ms McGuigan for the overview and asked Mr Oliver for his comments on how the projects are progressing and the new approach. Mr Oliver commented that Ms McGuigan had been very busy and the new refocused approach has been presented to Transformation and People Committee (TAP). The success of the Virtual Fracture Clinic (VFC), which was a clinically led project, has in part influenced the change of approach. Mr Boyce Cam commented that as one of the leads for the VFC it was a frustrating process which took 2.5 years to come to fruition. It can be difficult to maintain momentum and clinical enthusiasm when the process is so slow.</p>
19/01/4.7	<p>Mr Boyce Cam noted that there is currently a very successful pilot taking place in ED being led by therapists and it would be good to see that being picked up more quickly. Ms McGuigan replied that this was exactly the kind of pilot that is being supported by the transformation team, the initial two week pilot led by therapists has now been funded and extended to March as the positive impact has been so clear. Therapists are seeking out patients at the front door who can benefit from an early intervention and bringing in social work colleagues to undergo a mini multi-disciplinary meeting, this can result in the patient being sent home without being admitted with appropriate support in place. Ms McGuigan noted that a business case for a permanent service is being written to capitalise on this as quickly as possible.</p>
19/01/4.8	<p>The Chairman commented that it was empowering for staff to have ownership of projects and to bring ideas forwards.</p> <p><b>Resolved:</b> The Governors noted the presentation and discussion session and thanked Ms McGuigan and her team for all their work.</p> <p><i>Ms McGuigan left the meeting.</i></p>
<b>CoG19/01/5</b>	<p><b>Minutes of the Last Meeting</b></p> <p>The minutes of the last meeting held on 25 October 2018 were agreed as a true and accurate record of the meeting.</p>
<b>CoG19/01/6</b>	<p><b>Matters Arising and Action Update</b></p> <p>The Chairman noted that there were no outstanding actions from the last meeting.</p>

<p><b>CoG19/01/7</b> <b>CoG19/01/7.1</b> 19/01/7.1.1</p> <p>19/01/7.1.2</p>	<p><b>Chairman's Report</b> <b>Governor Resignation and New Governor Appointment</b> The Chairman advised that Mr Steven Holman who had been elected Governor in September 2018 had recently resigned for health reasons. The Chairman advised that he has written to Mr Holman on behalf of the Council to thank him for his interest and intention. In line with the constitution, the candidate who had received the next number of votes in the recent election was approached to take up the vacant post. The Chairman was pleased to note that Mr Long had agreed to the appointment and his first official meeting is today. The Chairman welcomed Mr Long to the Council and noted that his induction had started with meetings with the Chairman, Mrs Bullock and Mrs Dowson.</p> <p>The Chairman advised that this week he had received a further resignation letter from Mrs Martin-Jackson who is therefore attending her last meeting today as she is retiring from the Trust at the end of February. As Mrs Martin-Jackson is a staff Governor she will not be completing her term of office which ends in September 2019. This vacancy will be carried forward to the next Governor elections which will take place this summer. The Chairman thanked Mrs Martin-Jackson for her work as an employee at the Trust as well as her time as a Governor.</p> <p><b>Resolved:</b> The change in Governor membership was noted.</p>
<p><b>CoG19/01/7.2</b> 19/01/7.2.1</p>	<p><b>Chat with the Chairman – 23 November</b> The Chairman advised that he had met with a number of Governors informally and discussed matters including recruitment, the workforce transformation strategy and the direction of travel for East Cheshire's health economy.</p>
<p><b>CoG19/01/7.3</b> 18/10/7.3.1</p>	<p><b>Governor Strategy Session – 9 November</b> The Chairman reported that ten Governors had attended this half day event which was held to listen to Governors views on the strategic direction of the Trust.</p>
<p><b>CoG19/01/7.4</b> 18/10/7.4.1</p> <p>18/10/7.4.2</p> <p>18/10/7.4.3</p>	<p><b>CEO Recruitment</b> The Chairman formally announced to the Council that Mrs Bullock will be leaving the Trust at the end of March to take up the role as Chief Executive at University Hospitals of North Midlands NHS Trust (UHNM).</p> <p>The Chairman updated the Council on the recruitment process for the Chief Executive. Gatenby Sanderson have been appointed as Executive Search and the advertisement is now open with interviews scheduled to take place on 28-29 March 2019. The Chairman advised that he will be discussing with Dr Birch how Governors will be engaged in the process; while it is not formally a Governor process, Governors are required to ratify the final decision. This decision will take place at the next Council of Governors meeting which may need to be an Extra Ordinary meeting.</p> <p>The Chairman advised that Dr Dodds, Deputy Chief Executive will act as interim CEO for any interim period. Mr Murray Luckas, Deputy Medical Director will step up into the Medical Director role and his post will also be backfilled. The Chairman added that all projects and developments within the Trust and system will continue as business as usual.</p>

<p><b>CoG19/01/7.5</b> 19/01/7.5.1</p> <p>19/01/7.5.2</p> <p>19/01/7.5.3</p> <p>19/01/7.5.4</p>	<p><b>Discussions with Universities</b></p> <p>The Chairman reminded Governors that the Trust is an Associate Teaching Hospital due to its relationships with the University of Manchester. The Trust also has links with Manchester Metropolitan University (MMU), University of Chester and Keele University. More recently discussions have been held with the University of Buckingham (UB) who have acquired the former MMU site in Crewe. Their intention is to create a health science faculty and take ownership from August 2019. UB is very ambitious and aspirational and will be working in partnership with Apollo Health Education, an Indian organisation.</p> <p>The Chairman reported that UB plan to deliver Biomedical Sciences and Foundation Medical Degrees. The Trust is speaking to them about any potential relationship in this endeavour and senior clinicians have been to meet with them at their Buckingham campus and with Milton Keynes NHS Foundation Trust who host their medical students. The Chairman advised that the Trust has committed in principle to partner them and help provide a sustainable solution for the Crewe campus.</p> <p>The Chairman advised that the Trust has also been having discussions with the University of Chester (UC) who have developed a medical school with post-graduate research students. UoC are hoping to be successful in March with a bid to deliver funded medical school places and if successful the Trust has agreed in principle to host medical student placements. The Chairman noted that both opportunities could bring a lot of benefit for the Trust and that the Governors will be kept updated.</p> <p>Cllr Clowes commented that having been involved in the setting up of Keele Medical School and the processes involved in securing Government approval that this can be a complex process. Cllr Clowes asked how advanced UC's plans are. The Chairman replied that UC is involved in the national bidding round for new medical schools and will be using the University of Warwick curriculum. UC is reasonably confident of success in this round as there is a compelling case as there is no medical school in Cheshire. The Chairman added that the Trust has been clear that it will not have an exclusive relationship with any one University.</p> <p><b>Resolved:</b> The Chairman's update was noted.</p>
<p><b>CoG19/01/8</b> 19/01/8.1</p>	<p><b>Non-Executive Director Recruitment</b></p> <p>The Chairman reported that following a recruitment process which ended with interviews on 20 December 2018, two candidates are recommended for appointment to the Non-Executive Director (NED) vacancies, subject to the final approval of the Council of Governors today. The Chairman commented that the shortlist was exceptionally strong and the two proposed candidates Trevor Brocklebank and Les Philpott met the candidate profiles well. A summary of each candidates has been included in the pack. The Chairman reminded Governors that Mr Philpott is a qualified accountant and will be taking up the role of Audit Chair if agreed.</p> <p><b>Resolved:</b> The Governors approved the appointment of Mr Les Philpott and Mr Trevor Brocklebank to the post of Non-Executive Directors of the Trust from 1 February 2019 for a period of three year.</p>

<p><b>CoG19/01/9</b></p> <p>19/010/9.1</p> <p>19/10/9.2</p> <p>19/10/9.3</p>	<p><b>Lead Governor Report</b></p> <p>Dr Birch presented the Lead Governor report noting the broad range of activities that Governors support and get involved in. Dr Birch was particularly pleased to note the number of Governors who attended the Strategy session in November given the statutory responsibility of the Board to take account of Governors views when setting the strategy of the organisation.</p> <p>Dr Birch also thanked Governors for supporting the Annual Members Meeting in October although the challenge remains of getting more Members to attend.</p> <p>Dr Birch advised Governors that on the back of the internal Well Led Framework as well as the Care Quality Commission (CQC) review she was interviewed for an external review highlighting areas of good practice and had particularly emphasised the relationship between Governors, NEDs and Executives. The initial informal response was very positive from the panel. The Chairman confirmed that this report will be shared with Governors once the Trust has had chance to review and respond.</p> <p><b>Resolved:</b> The Council of Governors noted the Lead Governor report.</p>
<p><b>CoG19/01/10</b></p> <p>19/01/10.1</p>	<p><b>Register of Governor Enquiries to Board and Committee Chairs</b></p> <p>The Chairman noted that one enquiry has been made and the response has been included in the papers. The Chairman asked Dr Birch if she was content with the response given. Dr Birch replied that this was a reflection of the change in the Trust with more staff out and about in the community rather than a particular concern. The Chairman commented that the Trust has invested in technology for colleagues working in the community.</p> <p><b>Resolved:</b> The Governors noted that response to Governor Enquiries provided.</p>
<p><b>CoG19/01/11</b> <b>19/01/11.1</b></p> <p>19/01/11.1</p>	<p><b>Council of Governor Committees</b> <b>Membership and Communications Committee – 17 December 2018</b></p> <p>Mrs Beadle, Chair of Membership and Communications Committee presented the draft minutes of the most recent meeting noting that membership numbers remain on track although there is work taking place to encourage more younger members. The new Youth Ambassadors presented their new projects which will all involve and support more engagement with young people. The Chairman commented that it would be good to hear the Youth Ambassadors presentations at full Council. Mrs Beadle added her thanks to Mrs Martin-Jackson for her time on the Membership and Communications Committee.</p> <p><b>Resolved:</b> The minutes of the Membership and Communications Committee were noted.</p>
<p><b>CoG19/01/11.2</b> 19/01/11.2.1</p>	<p><b>Nomination and Remuneration Committee</b> <b>12 November 2018</b></p>

	<p>The Chairman advised that the Nomination and Remuneration Committee (N&amp;R) had met twice in November to undertake the long listing and then the shortlisting for the NED appointments. The Chairman observed that there had been 50 applications for the two posts and thanked all Governors involved for their time and contribution to the process.</p> <p><b>Resolved:</b> The minutes of the Nomination and Remuneration Committee were noted.</p>
<p><b>CoG19/01/12</b></p> <p><b>19/01/12.1</b> 19/01/12.1</p> <p>19/01/12.2</p> <p>19/01/12.3</p> <p>19/01/12.4</p>	<p><b>Chief Executive's Update Report</b> Mrs Bullock presented the Chief Executives update.</p> <p><b>Quarter 3 Performance</b> Mrs Bullock confirmed that the NHS Improvement (NHSI) Quarter 3 rating remains as a 2. This rating is also likely to remain for Quarter 4. Mrs Bullock explained that the Trust has performed well against all the key constitutional targets with the exception of the 4-hour transit target which remains challenging and Ms McGuigan has already presented on the projects in place to improve this position. Mrs Bullock advised that the quarterly review meeting with NHS Improvement (NHSI) have taken place today and NHSI are satisfied that the rating remains correct and there are no plans to change it.</p> <p>Mr Boyce Cam asked if there are any plans to improve the physical layout of the ED as this remains a frustration for clinicians. Mrs Bullock replied that the Board has approved a business case for remodelling ED. There are two options, one to build an extension with ten additional majors cubicles, this would cost c.£7M. The second option would include the extra cubicles plus a remodelling of the existing layout to improve patient flow and oversight. The cost for option two is c.£13M. NHSI are aware that this is a need and that to fund it capital investment or borrowings are required.</p> <p>Mrs Bullock advised that decisions on capital spending have not been made for 2019-20 but that the Trust is ready to progress if an opportunity arises. Mrs Bullock asked if Governors were aware that there is a petition in circulation for the £1.4M funding that the Trust did not get for a temporary solution for ED this winter to be given to the Trust. Mr Oliver commented that the ED solution plans were developed with ED staff over many planning sessions to ensure their ideas were central to the proposed solution.</p> <p>Mrs Moores asked how much impact the remodelling would have. Mrs Bullock replied that it would have a significant impact as there are currently not enough majors cubicles and it would improve patient flow, experience and end patient waits on corridors. It would also mean that it was easier for staff to coordinate care as there would be visual lines across the department. The Chairman commented that the Trust is acutely aware of the relentless pressure and demand on ED staff.</p>
<p><b>19/01/12.2</b> 19/01/12.2.1</p>	<p><b>Financial Position</b> Mrs Bullock updated the Board on finance, noting the report reflects performance to the end of December 2018. December has been a particular challenge and the Trust is not in the financial position that was forecast with a £1.8M deficit against a planned £0.4m. Pay is the most significant issue with a large increase in the number of agency staff across both medical and nursing posts. The Trust has had to maintain safe care</p>

<p>19/01/12.2.2</p>	<p>and this has meant using more agency staff. The Trust is now spending more money on agency shifts than bank staff. Mrs Bullock advised that Mrs Tunney and Mrs Barnett are leading multiple pieces of work to retain, support and recruit staff.</p> <p>Mr Oldham advised that there are ongoing discussions between the Trust, the regulators and the CCG regarding the system deficit and where it should sit as this will have a significant impact on the end of year position. The Trust has made some assumptions on this to ensure it maximises resources but this means that the position remains fluid and could change at the end of the year. Mrs Bullock added that the Trust has also received its control total for 2019/20 which is based on the Trust meeting its target this year. This will potentially make next year very difficult to achieve.</p>
<p><b>19/01/12.3</b> 19/01/12.3.1</p> <p>19/01/12.2.2</p>	<p><b>Annual Planning Process</b></p> <p>Mrs Bullock explained that this section of the report has been included in response to a request from Dr Birch. Mrs Bullock advised that all the guidance has now been received and Mr Oldham and his team are now working through this which takes a considerable amount of time. Plans for next year have been worked through with all divisions to understand their pressures, investment needs, efficiency opportunities as well as service developments to meet national guidance and improve quality and safety. All the proposed investments are worthwhile but there is not enough money to agree them all so a collective process with senior divisional leaders will take place to prioritise all investments.</p> <p>Mrs Bullock outlined the timetable noting that the Health &amp; Care Partnership have to aggregate all the plans into a Cheshire &amp; Merseyside five year plan by the autumn.</p>
<p><b>CoG19/01/12.4</b> 19/01/12.4.1</p> <p>19/01/12.4.2</p>	<p><b>NHS Long Term Plan</b></p> <p>Mrs Bullock explained that the summary of the NHS Long Term Plan has been included in the report and recommended all Governors to read it. Mrs Bullock commented that she agrees with the need for investment in mental health and primary care and the move towards integrated care partnerships which is a clear thread throughout the plan. This is central to the Trust's direction of travel within Cheshire East Place (CEP) and the CEP strategy needs to be consistent with the long term plan before moving to the next stage.</p> <p>Cllr Clowes commented that she felt there was a missed opportunity in the plan to encourage closer working between LAs and health partners and given that it is now part of the same department it is disappointing. Cllr Clowes noted that further detail and guidance is awaited and the CCG are still waiting for confirmation of funding allocations and priorities for spending. Cllr Clowes added that there remains flexibility on how the guidance is interpreted to get the best value locally. Mrs Bullock agreed and added that while closer partnership working with LAs is not explicit this will not stop local partners from moving in this direction. Ms Butcher observed that the absence of a Social Care green paper is pertinent and also the absence of public health funding. Cllr Clowes replied that the LA anticipates a further reduction in public health spending so the NHS approach to early intervention really needs to knit everything together.</p>



19/01/13.3	Mr Stafford noted recent media coverage which suggested that there are more volunteers than the NHS can deal with. Mrs Piddock-Jones replied that the Trust is certainly not swamped and there is a shortage. The volunteers provide a very valuable service to the Trust as it releases professionals from some tasks and that she has been speaking with the volunteer lead about putting up notices to recruit more volunteers and speaking to local organisers of events about how they recruit volunteers.
<p data-bbox="193 461 453 797"><b>CoG19/01/14</b> <b>19/01/14.1</b></p> <p data-bbox="193 797 453 1066"><b>19/01/14.2</b> 19/01/14.2.1</p> <p data-bbox="193 1066 453 1368">19/01/14.2.2</p> <p data-bbox="193 1368 453 1626">19/01/14.2.3</p> <p data-bbox="193 1626 453 1962"><b>19/01/14.3</b> 19/01/14.3.1</p>	<p data-bbox="453 461 1447 797"><b>Any Other Business</b> <b>Senior Independent Director (SID)</b> The Chairman advised that as this was Mr Hopewell's last meeting before his term of office finishes on 31 January, he will be stepping down from the SID role. This role is an important role for liaising with the Governing body and leads on the appraisal of the Council of Governors effectiveness as well as the Chairman's appraisal. The Chairman was pleased to announce that Mr Mike Davis had agreed to take this role on for 12 months and this has been supported by the Chief Executive.</p> <p data-bbox="453 797 1447 1066"><b>Non-Executive Directors</b> The Chairman offered a vote of thanks to the two departing NEDs, Mr David Hopewell and Mr John Barnes. Unfortunately, Mr Barnes was not able to attend tonight but the Chairman noted his six years of contribution with his particular insight into managing risk, risk registers, investment appraisal and business cases. The Chairman thanked Mr Barnes on behalf of the Council.</p> <p data-bbox="453 1066 1447 1368">The Chairman thanked Mr Hopewell, the longest serving NED ever at the Trust. Mr Hopewell joined before the Trust became a Foundation Trust and was significantly involved in that process. The Chairman noted in particular the support of Mr Hopewell in changing the culture of the Board from being risk averse to becoming aspirational and ambitious. Mr Hopewell has been the Audit Chair, leading it well in governance and finance terms and providing professional and astute guidance as well as significant personal support to the Chairman.</p> <p data-bbox="453 1368 1447 1626">The Chairman thanked both Mr Barnes and Mr Hopewell on behalf of the Council and Trust and wished them both well in their future ventures. Mr Hopewell thanked the Chairman for his words and commented that it had been a long and good journey during which the Trust has made lots of progress of which everyone should be very proud. Mr Hopewell added that it had been a pleasure to work with such great people and thanked everyone for their help and support.</p> <p data-bbox="453 1626 1447 1962"><b>Chief Executive</b> Dr Birch observed that while Mrs Bullock would not be leaving the Trust until March, this will be the last meeting of the Council of Governors and as such she would like to thank Mrs Bullock for the support and encouragement provided to the Council. Mrs Beadle added her thanks to Mrs Bullock for all the support given so willingly and the openness in which Mrs Bullock shared celebrations and was also honest and transparent when things have not gone so well. Mrs Beadle noted that Mrs Bullock has been pivotal in turning around the performance of the Trust and patients would thank you for this as well. Mrs Beadle added that the Governors will</p>

<p>19/01/14.3.1</p>	<p>continue to work to continually improve the Trust and build on the work led by Mrs Bullock. Mrs Beadle wished Mrs Bullock every success in her new role.</p> <p>Mrs Bullock thanked Dr Birch and Mrs Beadle for their kind words commenting that her experience of working with Governors has been very positive and that a strong relationship based on trust has been established. Mrs Bullock thanked the Governors for their role which has been to always bring the focus back to patients and remind the Board that this is the core of what the Trust is about.</p> <p><i>Non-Executive Directors and Executive Directors with the exception of Mrs Bullock left the meeting.</i></p> <p><i>Mr Paul Colman left.</i></p>
<p><b>CoG19/01/15</b></p> <p>19/01/15.1 19/01/15.2 19/01/15.3 19/01/15.4</p>	<p><b>Chief Executive Briefing in private</b></p> <p><b>Paragraphs removed under Section 42 of the Freedom of Information Act.</b></p>
<p><b>CoG19/01/16</b></p> <p>19/01/16.1</p> <p>19/01/16.2</p>	<p><b>Evaluation of Meeting Effectiveness (in private)</b></p> <p>The Chairman advised that Mrs Roach had sent apologies for the meeting so asked the Lead Governor for her thoughts on the meeting. Dr Birch noted that it was a meeting covering a wide range of areas with some good, wide-ranging discussions. The patient story had set the theme of the meeting on building relationships and the opportunities this brings which had been carried through to the discussion topic on transformation which emphasised the importance of including staff in change to embed it.</p> <p>Dr Birch commented on the opportunities on the horizon in new relationships with universities and how this may impact on the recruitment pipeline of the workforce. Finances remain a challenge for managing demand and investing in services. Dr Birch noted that it is a time of change with changes to Governors, new NEDs and a new CEO on the horizon all of which are attracting excellent candidates which is a reflection on the Trust and its reputation.</p>
<p><b>CoG19/01/17</b></p>	<p><b>Date and Time of Next Meeting</b></p> <p>The next meeting is scheduled to take place on Thursday, 25 April 2019 at 5.30pm in the Post Graduate Lecture Hall, Leighton Hospital, Crewe.</p> <p>The meeting closed at 7.30pm.</p>