

Council of Governors

SUMMARY REPORT

Meeting Date: 19 April 2023

Agenda Item: 10

Report Title:	Council of Governors self-assessment 2022 – actions		
Author(s):	Deborah Lawrenson, Director of Corporate Governance		
Accountable Director:	Sharon Mays, Chair and Terry Proudfoot, Lead Governor		
Other Meetings presented to or previously agreed at:	Committee/Group:	N/A	
	Date:	N/A	

Summary of key points in report

Recommendation for the Council of Governors to consider:

Consider for Action	Approval	Assurance	Information	X
				X

The Council of Governors review of effectiveness form received at the December 2022 meeting has been updated to include proposed actions for discussion and finalisation and is attached at **appendix 1**.

Please identify which strategic priorities will be impacted by this report:

	Yes	X	No
Recover Services and Improve Efficiency	Yes	X	No
Continuing Quality Improvement	Yes	X	No
Transformation – Changing things that will make a difference	Yes	X	No
Partnerships – working together to make a bigger impact	Yes	X	No

Is this report relevant to compliance with any key standards ? State specific standard

	Yes	X	No	
Care Quality Commission Fundamental Standards	Yes	X	No	Good Governance – Code of Governance Health and Social Care Act Provider Licence
Data Security Protection Toolkit	Yes		No	X

Have these areas been considered? YES/NO

If Yes, what are the implications or the impact?
If no, please explain why

	Yes	X	No
Service User and Carer	Yes	X	No

Safety, Engagement and Experience					Any of these areas could potentially be covered through reports received at the Council of Governors or through their engagement activity
Financial (revenue & capital)	Yes	X	No		
Organisational Development/Workforce	Yes	X	No		
Equality, Diversity & Inclusion	Yes	X	No		
Legal	Yes	X	No		
Sustainability	Yes	X	No		

Council of Governors self-assessment summary

The self-assessment was reported to Council of Governors in December 2022.

This has been updated post discussion with the Chair and Lead Governor for receipt at the 18 April 2023 meeting.

Governors Review of Effectiveness amalgamated form – 2022				
<i>Proposed actions received at Council of Governors April 2023</i>				
1	Chairing of the Council of Governors is effective and everyone has the opportunity to ‘have a voice’ and contribute to the debate			
	Strongly agree – 4	Agree	Unable to say	Disagree
	Comments from the survey		Response / Proposed actions	
	<ul style="list-style-type: none"> • Our Chair of the Council of Governors (CoG) ensures that all the major issues concerning NHS Sheffield are discussed. Any CoG member is able to raise their hand and discuss an issue if they so wish. 		<p style="color: #4f81bd;">No further action required at this time</p> <p style="color: #4f81bd;">Opportunities for Governors to have their voice heard will continue in 2023:</p> <ul style="list-style-type: none"> • Chair drop-in sessions • Chair 1:1 meetings with Governors • Governor feedback as a standing item on the agenda 	
2	The Chair and Non-Executive Directors effectively engage with the Council of Governors			

	Strongly agree - 2	Agree - 2	Unable to say	Disagree	Strongly disagree
Comments from the survey	Response / Proposed actions				
<ul style="list-style-type: none"> • There are numerous opportunities to engage with the CoG Chair or any of the Non-Executive Directors (NEDs), if CoG members so choose. • The Chair definitely engages, as do 2 or 3 of the NEDS. However, one or two are consistently absent from CoG. • Do not work for the trust and no contact outside of formal meetings 	<ul style="list-style-type: none"> • Non- Executive Directors (NEDs) for the most part are attending some/all formal Council of Governor meetings and where possible the additional meetings that are put in place as well as engagement opportunities where appropriate. Sometimes NEDs are unable to attend all meetings due to other commitments. • NEDs attend Governor workshops, Governor lunches and present updates on their committee work to the Council of Governors at meetings. • Engagement with the Chair includes: <ul style="list-style-type: none"> ○ 1:1 meeting with Governors ○ Chair drop-in sessions by constituency ○ Staff Governor meetings with Freedom to Speak Up Guardian ○ Governor lunches ○ Carer and Service user meetings ○ Nominations and Remuneration committee (Chair and Senior Independent Director (SID)) ○ Governor Development Workshops ○ Buddying System (SID and Deputy Lead Governor) 				

		<ul style="list-style-type: none"> In our forward planning - we liaise with NEDs to ensure they are available for example for presenting on the work of the committees they chair. Opportunity for Governors to observe board committees. <p>Action: Consideration is being given to a range of other ways in which Governors may be given the opportunity to visit services and teams (with NED/Execs) potentially for example through PLACE visits.</p>		
3	I am assured by the NED reports/presentations on their leadership of Board sub-committees			
	Strongly agree - 2	Agree - 3	Unable to say	Disagree
Comments from the survey		Response / Proposed actions		
<ul style="list-style-type: none"> I attend a couple of the Board sub-committees myself and they are fine. CoG members are also able to get a copy of Board sub-committee minutes on request. COG are fully dependent on the NEDs and the officers for assurance on the proper and legal operation of the Trust. This can feel difficult as we are asked to make decisions on arm's length information. 		<ul style="list-style-type: none"> Governors are offered the opportunity to act as an Observer of Board sub committees. All meetings are via teams but are during the working day which can be an issue for some Governors. Committee presentations, led by the NED Chair are presented at each formal Council of Governors meeting and reflected on the forward planner Additional governor development and workshop sessions (e.g. on quality and quality improvement, finance and the Homeless Assessment team) are planned following feedback from conversations, reports and presentations to the Council of Governors 		

		<ul style="list-style-type: none"> Governors have a key role in feeding views and feedback into the Council of Governors from their constituents and in taking messages back. <p>Action – Governors have been asked to confirm if any would wish to take an observer role for the committees and there currently remains only 1 vacancy on the Audit and Risk committee, however the observer roles can be rotated every 6 months</p>		
4	The Chair and Non-Executive directors are operating effectively in holding the Executives to account at the Board and its sub committees - Please answer if you have observed these meetings			
	Strongly agree - 1	Agree – 2	Unable to say	Disagree
Comments from the survey		Response / Proposed actions		
<ul style="list-style-type: none"> The CoG Chair and other NEDs do hold the NHS Board of Governors? and their sub-committees to account. They regularly raise issues which are minuted and they feedback to the CoG what the issues were and the answers given by the Board. I have been present at numerous Board Meeting and sub-committee meetings and have observed Chair and NED follow up on a number of occasions. This appears so from the information we receive at COG I've not seen one of these meetings happen yet as a new governor. 		<p>See comment and action above.</p> <p>There are opportunities to observe the Board of Directors: public Board of Directors meetings for the year are available on the Governor calendar and meetings, held via MS teams are published on the SHSC website. Reminders and requests for questions to the Board are now being sent to governors in advance of the meeting.</p> <p>If Governors are able to try and come to a couple of meetings a year (even if only in part) that would</p>		

<ul style="list-style-type: none"> I am assured of this from the reports we receive at CoG. I have not observed Board meetings myself 	<p>significantly help Governors in feeding back on this in the appraisal process.</p> <p>Action: share the board meeting link monthly with Governors for ease of access and as a reminder</p>				
<p>5</p>	<p>The Council of Governors receives information such as reports, presentations, briefings, and verbal updates</p> <ul style="list-style-type: none"> are they user friendly? do they provide the right level of information to support our discussions and decision making? have they improved over the last year? 				
	Strongly agree – 4	Agree - 1	Unable to say - 1	Disagree - 1	Strongly disagree
<p>Comments from the survey</p>			<p>Response / Proposed actions</p>		
<ul style="list-style-type: none"> CoG members receive a large volume of briefings, reports, presentations and verbal updates. This is very useful to remain abreast of developments regarding our Trust. Accessibility and user-friendliness has remained at a good standard. Information is huge delivering transparency. NEDs have been clear in picking out the main issues and communicating those to the CoG. Communication with the CoG has improved this year compared to last year. Not always pre-meeting or sometime very last minute 			<ul style="list-style-type: none"> Governors have made decisions during the financial year and key decisions such as the Quality Objectives, are outlined in the Annual Report. Following feedback from Governors, a Board Update report is received at each of its meetings with key items from the Board of Directors meetings highlighted. Following feedback from Governors, a Governor calendar of events has been produced and this is refreshed and circulated regularly Work plan is in place. 		

<ul style="list-style-type: none"> • Improving but still often full of NHS jargon and acronyms • Some reports can be difficult to absorb due to the complexity of the subject, however they have got better over time. • Where an issue is on going and you have missed meetings catching up can be difficult. • There are too many questions here! • The reports are generally quite dense but informative. I do wonder if everyone is able to understand these, and they are very information-heavy at times. • I'm not sure that we <i>do</i> make decisions (or any that are not effectively rubber-stamping things that are <i>fait accompli</i>), and perhaps a criticism is that we still receive too many reports for information only. • Agendas do seem to be reactive. The work plan needs to be reviewed 	<p>Action: attach other groups Governors can be involved in through the engagement activity in the Trust to the Governor Calendar (including where known which Governors are involved in these groups) – follow up with engagement team</p> <p>Action: continued focus on accessibility of papers including avoiding or explaining acronyms wherever possible.</p> <p>Action: Review the jargon/acronym buster and re-share with Governors</p> <p>Action: consider and explore development of an electronic hub page/electronic portal for sharing information with Governors</p>
6	<p>I feel supported to fulfil my role; I have access to advice, support, and engagement opportunities such as</p> <ul style="list-style-type: none"> • drop in sessions with the Chair • governor buddying scheme • governor induction and get to know you lunch • workshops • development sessions on areas of interest such as community mental health team

	<ul style="list-style-type: none"> engagement in programmes of work/opportunities to give views and feedback such as service user and carer experience, human rights etc <p>Has this improved over the last year?</p>			
Strongly agree – 3	Agree – 2	Unable to say	Disagree	Strongly disagree
Comments from the survey		Response / Proposed actions		
<ul style="list-style-type: none"> Being a CoG member is very rewarding. I have access to all the advice, engagement, information, and support I need if I asked. The drop in session with the CoG Chair are useful as small groups can share information and clarify earlier communication. The Governor Budding scheme is developing slowly but steadily at the pace CoG members are comfortable with. The new Governor Inductions process is really good now that the worst of COVID-19 seems to have passed. The lunch workshops are also good where CoG members can meet in person and interact. Development sessions are really interesting so people with one interest in NHS Sheffield can hear other aspects regarding our service. Various engagement programmes, workshops and presentations have taken place. Again people could give feedback or just observe how people addressed certain issues. There has been a significant improvement in engagement opportunities from last year, mainly due to the end of COVID-19 restrictions. 		<p>This remains a work in progress and will develop through engagement and feedback from Governors.</p> <ul style="list-style-type: none"> To support ensuring all Governors feel able to ‘have a voice’ the Lead Governor and Deputy Lead Governor could be available for pre-meets for the formal Council of Governors meetings. Action: Circulate Lead Governor’s contact details [these are also available in the induction pack for new governors] 		

<ul style="list-style-type: none"> • I haven't needed or used any of these initiatives, but all are very welcome and reflect positively on the support available for CoG members. • I feel I'm unable to tick 'strong agree' here as a someone who has been a governor solely in the covid era and only had the opportunity to undertake online-first activities . 				
7	I have support, where I need it to engage with my constituency (if not please say what support you would find helpful).			
Has this improved over the last year?				
Strongly agree	Agree - 1	Unable to say - 2	Disagree	Strongly disagree – 1
Comments from the survey		Response / Proposed actions		
<ul style="list-style-type: none"> • It has only been relatively recently, that it has been possible for CoG members to engage with their constituency. This work has been massively delayed for two years by COVID-19. • I feel confident that if CoG members were to ask for support to deliver a raise awareness stand in their constituency, the request would be fulfilled. • Yes it has. Two in-person sessions have taken place in 2022, which was been disrupted by COVID-19 and the death of the Queen. 		<ul style="list-style-type: none"> • It is for Governors (<i>working with SHSC</i>) to determine the best way of engaging to meet the needs of their 'constituencies' - if Governors need support or guidance on this the team can provide this. • The Annual Members Meeting is an opportunity for Governors to engage with the membership more generally • The Membership Strategy will be reviewed in the autumn. 		

- I have had no support engaging with my constituency (the University). This is a source of disappointment and concern; there has been virtually no senior engagement across organisations in all of my time on the CoG, and for as long as I have worked in Sheffield (since 2016).

Action: Externally facilitated session to be put in place on membership engagement (this will include appropriate use of social media) – September 2023.

Action: Share social media policy and code of conduct with all Governors (*note these shared in Induction with new Governors*)

Action: explore opportunities for joint membership engagement activity with neighbouring trusts

- The Trust is engaged in a very wide variety of partnership work with regular updates received at Board meetings and at Council of Governors. This includes participation in Sheffield Place and leading the Mental Health Learning Disability Provider Collaborative Alliance – now called the Provider Collaborative
- Feedback from governors reporting back from their constituencies is included on the workplan and is a standing item on the agenda
- Governors are invited to feedback from their constituencies and activities at the Chair drop-in sessions which are also attended by the SHSC leads on Engagement, Experience and Coproduction
- Governors have the opportunity to input their constituent feedback at Governor development

		workshops such as the Community Mental Health Team development workshop, Carer groups, etc.			
8	The Nominations and Remuneration Committee (NRC) effectively fulfils its role and provides the Council of Governors with appropriate reports to support discussion and decision making				
	Strongly agree – 1	Agree - 1	Unable to say - 1	Disagree - 1	Strongly disagree
Comments from the survey			Response / Proposed actions		
<ul style="list-style-type: none"> The Nominations and Remunerations Committee functions well and feedbacks to the Board of Directors and the CoG clear information regarding what the issues are and the suggestions to progress matter in hand. I feel the information we are given is limited and directs COG to agree the decision already made by the N and R committee. My experience is that no counter arguments are put and it's a rubber stamp job. I believe it is active in ensuring it meets its obligations and objectives but not seen it in action as yet. I have long been concerned that NRC does not always represent the wider CoG membership. It has a privileged place in terms of Trust governance. We know relatively little about NRC meetings. 			<ul style="list-style-type: none"> The detail received at NRC is generally confidential personal information related to the NEDs for example around appraisal or as part of recruitment processes. NRC is a required committee with delegated authority. All Governors have had the opportunities to join the NRC if they wish to do so. Governors have had the opportunity to get involved with the stakeholder engagement elements of board recruitment. <p>Action: Include further detail in reports from the NRC on key areas of consideration and challenge in reaching recommendations made to the Council of Governors.</p> <p>Action: Terms of Reference of NRC to be reviewed – for approval in Q1 of the new financial year.</p>		

9	The external auditors, to the best of my knowledge, are working effectively with the Trust and have provided the Council with their report on the Annual Report and Accounts				
	Strongly agree - 2	Agree	Unable to say – 2	Disagree	Strongly disagree
Comments from the survey			Response / Proposed actions		
<ul style="list-style-type: none"> As a CoG member who observes the FPC sub-committee I have not seen any indication regarding the independent auditing of the Trust’s financial accounts. Don’t know enough about this aspect to give a fair comment. The person delivering the external audit explained how it worked and what each bit meant and gave us an appraisal of how we were doing over all. That was really helpful to see. The external auditing process has always been questionable; not because of anything we do at SHSC but because the idea that a firm who we select and pay is going to be truly independent is a barely credible proposition. We do this because we have to and (I have to say) there is little value here. I don’t give any particular credibility to this part of our work. I have seen this with the accounting (KPMG I think?) and I thought that was effective. However, when people deliver powerpoints or other mass pieces of information, whilst they may be very knowledgeable on what they are speaking about I often don’t find that it is 			<ul style="list-style-type: none"> Independent auditing of the Trust accounts takes place via our external auditors and reports are received at the Audit and Risk Committee A report is received annually from external audit to the Council of Governors related to the Annual Report and Accounts. As a public sector NHS organisation we are required to have external auditors in place and go through the proper processes to appoint them which is what happens in practice. The auditing process is extremely detailed and rigorous and follows nationally set parameters. <p>Action: Following discussion and agreement to extend the External Audit appointment, Governors will have the opportunity to be involved in the tender process this year.</p> <p>Action: discussion to take place with external audit to consider how the presentations to the Council of Governors can be made more accessible in future.</p>		

delivered well to enable those with no knowledge of the matter to understand.				
10	Administrative arrangements for the Council of Governors work well (circulation of papers, minutes, actions, and forward planning)			
	Strongly agree - 3	Agree - 1	Unable to say	Disagree
Comments from the survey		Response / Proposed actions		
<ul style="list-style-type: none"> Administration of the CoG works very well most of the time. I have heard other CoG members voice concerns at the late appearance of meeting notification and minutes. This only happens when there has been a last minute development. The secretariat are invariable helpful and generally brilliant! Would like more time where possible 		<ul style="list-style-type: none"> The forward planner has been updated and is now shared at each meeting. Dates for all meetings for the year and beyond have been shared. There will be extraordinary additional meetings required at times to meet business need. A Governor calendar of events for 2022-23 and 2023-2024 has been produced. This is updated and circulated to all Governors regularly and suggestions for improvement are happily received. <p>No further action required at this time.</p>		

General observations on areas of good practice and improvements made in the last year	Response / Proposed actions
<ul style="list-style-type: none"> The impetus that CoG members should have more opportunities to meet in person is good practice. 	Please see comments above

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| <ul style="list-style-type: none"> • Hopefully there can be a quarterly event where all CoG members can meet for presentations and workshops, or just to observe. • The COG is well attended, well organised and well chaired. I feel that everyone is welcomed and allowed to put forward their views and comment as appropriate • I am told that SHSC has a large number of Governor positions compared to other Trusts. This potentially gives us a broader spectrum of people to call from • I liked that as a Trust we opened up the newly renovated Burbage ward (New name TBC) for a day to help staff and Governors that don't normally get to see what a ward looks like and talk to the team about how it will run. What I particularly like about this is that it helps break down and may be even dispel some of the myths, and stigma that can be associated with a mental health wards. • CoG meetings are balanced, well attended, inclusive and very well chaired. The Council appear to be operating in more consensual ways, and with greater harmony. NEDs mostly attend and invariably participate in constructive and assuring ways. I would like to give particular credit to the Lead Governor, who does a superb job. • The NED recruitment process demonstrated that - a lot of 'awkward' and probing questions asked • Some meetings seem to be better than others. Mainly the ones called at last minute e.g. Jan retiring or the new Ned's remuneration seem to be a lot better structured, flow better, be | <ul style="list-style-type: none"> • Agendas and papers received are structured to support discussion. • The calendar outlines the range of face to face opportunities for example workshops, engagement events and further detail will be shared as noted earlier. • If there is anything more that would support improving this Governors are asked to provide specific feedback for example on the report from the Board to the Council of Governors which distils key information for sharing with the Governors and it is hoped will support Governors in onward sharing of messages. • Governors have been given opportunities to get involved in key pieces of work and there has been feedback through additional meetings or at formal meetings on some of these such as the Community Mental Health team development workshop, NED and Chief Executive recruitment, Care Opinion workshop, human rights training etc. Other opportunities through engagement team will be attached to the calendar. • Calendar is in word and font has been enlarged. |
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more concise to the point with relevant information, be more engaging, etc than the ones that go on for about 2.5hrs and are all over the place, more unstructured, etc.

General observations of areas where improvement is needed and suggestions or examples of how these could be improved

- There is little where CoG governance and oversight could be improved in relation to where we are at the moment.
- I feel it would be good practice for all meetings CoG members might be interested in attending, are regularly sent out in an email by the 7th of each month.
- The Governor Diary needs to be made larger, especially for CoG members who may be visually impaired. It also needs to be in Word, as CoG members may not be able to access or use Excel.
- CoG members can be supported to have a quarterly surgery in their own constituency, so they can more easily become aware of any public concerns.
- There appears to be an In crowd who has knowledge and insight that the rest of us don't have. However, I think the chair works hard to be inclusive so it's not too bad.
- I carry out this role as part of my other duties in the Trust so I need plenty of notice to attend any session.
- I also want to say that Amber Wild does an amazing job at coordinating loads of information. without her I would not know half or what I know.

- I do not have many other comments beyond what's mentioned above, but I would suggest that there are too many extraordinary meetings.
- The relationship between the wider organisation and the governors has been hampered to a degree by the public health arrangements of the past couple of years, but hopefully this can change going forwards
- The Online – First (due to NCovSars2) format of the meetings has been a slight hampering factor to this – hopefully more hybrid and F2F meetings in the future will be able to address this
- We are not bringing enough service user feedback on SHSC to the meeting and there is not enough suitable opportunities provided by SHSC for governors to obtain it to feedback, share their informed views and challenge constructively. If I'm honest, not only did I think there would be a lot more opportunity for this when I applied to be a Governor, I also thought the meetings would include a lot more of the main difficulties which service users were experiencing being discussed as main topics to ensure action was being taken to improve care provided.

There are too many members on the council to allow every member to make a significant contribution