
Group Name:	Council of Governors' Meeting		
Date of Meeting:	Tuesday 9 October 2018		
Venue:	Seminar rooms 1 & 2, Heartbeat Education Centre, F Level, North Wing, Southampton General Hospital		
Time:	2.45-5.30pm		
Apologies to:	Sue Diduch - Corporate Affairs Administrator Tel: 023 8120 3885		
NED Session 2.45 – 3.15pm	Council of Governors' Meeting with Non-Executive Directors Governors and Non-Executive Directors in attendance		
Closed Session 3.15 – 4.15pm	In Private Governor-Only Meeting Governors only in attendance		
Break 4.15 – 4.30pm	Tea and coffee to be served		
Open Session			
4.30	1.	Chair's Welcome and Opening Comments	
	2.	Apologies for Absence	
	3.	Declarations of Interest	
	4.	Minutes of Previous Meeting held on 10 July 2018	Enclosure 1
	5.	Matters Arising/Summary of Agreed Actions	Enclosure 2
4.35	6.	Chief Executive's Performance Report <i>Receive an update on current performance of the Trust</i> (Paula Head, Chief Executive)	Enclosure 3
4.45	7.	Update from Governors' Nomination Committee <i>Receive an update from the Governors' Nomination Committee regarding NED appraisals and the Chair's appraisal.</i> (Peter Hollins, Chair)	Oral
4.50	8.	Feedback from Working Groups and Events <i>Receive feedback from governors following attendance at engagement events, NHS Providers events and from Chairs of governor working sub-groups (by exception only)</i> <ul style="list-style-type: none">• Engagement Events (if any)• NHS Providers Events (if any)• Patient Experience Sub-group• Strategy & Finance Sub-group• Staff Experience Sub-group• Membership & Engagement Sub-group	Oral
5.00	9.	Membership Engagement <i>Receive an update on membership engagement activities</i> (Emma Abdulaal, Membership Manager)	Enclosure 4

5.10

10. **Any other business**

11. **Date of next meeting:** Thursday 24 January 2019,
2.45 to 6.00pm, Conference Room, Heartbeat Education
Centre, F Level, North Wing, SGH

In attendance: Paula Head, Chief Executive
Emma Abdulaal, Membership Manager

Apologies: Diane Eldridge, Southampton City Centre
Tony Havlin, Southampton City Centre
Cllr Sue Blatchford, Southampton City Council

Council of Governors' Minutes – Open Session

Minutes of the Council of Governors' (CoG) meeting on Tuesday, 10 July 2018, held in the Conference Room, Heartbeat Education Centre, North Wing, University Hospital Southampton, commencing at 18.00 and concluding at 19.30.

Present:	Peter Hollins, Chair	PH
	Simon Porter, Senior Independent Director/Deputy Chair	SP
	Andrew Grapes, Elected, New Forest, Test Valley & Eastleigh	AG
	Anne Murphy, Elected, New Forest, Test Valley & Eastleigh	AM
	Reuben Pengelly, Elected, New Forest, Test Valley & Eastleigh	RPe
	Tony Havlin, Elected, Southampton City Centre (from 18.15)	TH
	Rose Wiltshire, Elected, Isle of Wight	RW
	Richard Goldsmith, Elected, Rest of England & Wales	RG
	Max Jonas, Elected, Medical & Dental Staff	MJ
	Emil Bica, Elected, Other Clinical Staff	EB
	Amanda Turner, Elected, Non-Clinical Staff	AT
	Michelle Cowen, Appointed, University of Southampton	MC
	Shirley Anderson, Appointed, Business South	SA
	Cllr Sue Blatchford, Appointed, Southampton City Council	SB
In attendance:	David French, Interim Chief Executive	DAF
	Neil Thomas, Partner, KPMG	NT
	Amanda Lowe, Associate Director Corporate Affairs	AL
	Norma Cadavieco, Corporate Affairs & Policy Manager	NC
	Emma Abdulaal, Membership Manager	EA
Apologies:	Lorna Cotter, Under 21 Representative	LC
	Dr Mark Kelsey, Appointed, Southampton City CCG	MK
	Diane Eldridge, Elected, Southampton City Centre	DE
	Rob Chambers, Elected, Southampton City Centre	RC
	Robert Purkiss, Elected, Rest of England & Wales	RP
38/18	Chair's Welcome and Opening Comments The chair welcomed everyone to the meeting.	Action By
39/18	Declarations of Interest No declarations of interest were made.	
40/18	Minutes of Previous Meeting The minutes of the meetings held on 17 May 2018 were accepted as a correct record.	
41/18	Matters Arising/Summary of Agreed Actions	
41.1	<u>Ref 33.4 Review of the Trust Constitution</u> Clarification was provided within the constitution around the eligibility of volunteers and staff on honorary contracts to serve as public governors. The Trust constitution was amended to reflect this clarification and the governors were asked to approve the updated constitution outside of the meeting. The governors approved the updated constitution.	

41.2 Cultural awareness training

Governors were reminded of the requirement to attend Cultural Awareness Training.

ACTION: A follow-up session will be arranged in the next 3 months for those who were unable to attend the first session held in May.

AL

42/18 **Chief Executive's Performance Report**

- 42.1 DAF provided an update on the Trust's performance, highlighting several key areas. The national target for Emergency Access Performance is 95%; however, there has been a struggle to achieve this across the NHS. Performance at UHS deteriorated about 6 months ago and did not recover as expected following winter. A programme of work is underway in the Emergency Department (ED) to increase capacity through improved ways of working. This has resulted in a significant improvement for June and the start of July. The trajectory target for the quarter is 90% and it is expected that this will be achieved.
- 42.2 The RTT target has not been achieved nationally. However, the Trust saw a 1% improvement in May.
- 42.3 There have been difficulties achieving cancer targets, largely related to capacity within the breast specialty and availability of robots in urology.
- 42.4 2017/18 was a financially successful year for the Trust, with targets met and Sustainability & Transformation Funding (STF) achieved. The Trust is currently slightly behind plan for the start of 2018/19 but this is expected to move closer to plan as the year progresses.
- 42.5 The Trust was ranked in the top 5 Trusts nationally for staff recommending the Trust as a place to work in the NHS national staff survey. There are currently nearly 400 Nursing vacancies, which has caused an increase in the use of agencies to fill these gaps. The Trust Board is closely monitoring nursing vacancies. The new nursing apprenticeship programme is expected to decrease this over time.
- 42.6 RW queried whether the targets were the right ones if there is a struggle to achieve them nationally. DAF noted that there is currently no expectation that the targets will be adjusted and Trusts have been encouraged to continue working towards achieving them.
- 42.8 SB sought clarification of the change in metrics for Emergency Access. DAF noted that the various indicators are used to make performance more comparable nationally by using the whole geography rather than UHS alone.
- 42.9 RG queried the number of staff surveyed for the NHS national staff survey. DAF noted that this is based on a national online survey which was distributed to approximately 7,000 members of staff. The Trust had a response rate of nearly 50%, therefore the results are considered reliable.
- 42.10 SA suggested that a comparison to the position in the previous year be included in future reports for additional context. PH asked the governors to consider what changes would make this report more useful. AL noted that the data included must already be collected by the Trust.
- 42.11 The Council of Governors **NOTED** the Chief Executive's Performance Report.

43/18 **2017/18 Annual Accounts and Annual Report, Quality Account and Performance of the Auditors**

- 43.1 DAF introduced the 2017/18 Annual Report, highlighting the Trust's achievements over the year. NT provided a summary report of the external audit work carried out for 2017/18 and summarised the role of KPMG as external auditors. Overall the report indicated positive outcomes for the Trust benchmarking against the regulations as well as peer organisations, including:
- Unqualified (clean) opinion on the financial statements.
 - Unqualified (clean) conclusion on the use of resources.
 - Limited assurance (clean) opinion on the content of the quality report.
 - Limited assurance (clean) opinion given on the "A&E 4 Hour wait" indicator.
 - Qualified opinion given on the "referral to treatment" indicator.

- 43.2 SA asked how long KPMG had been the Trust's external auditors. NT said that KPMG had been the Trust's external auditor for 6 years. SP noted that the standard of service from KPMG has been consistently high and emphasised the benefit of KPMG also auditing many of the Trust's peers. A tender process which considered other firms were completed last year and KPMG were recently reappointed for a further 3 years, with the contract assessed after 2 years.
- 43.3 The Council of Governors **NOTED** the 2017/18 Annual Accounts and Annual Report, Quality Account and Performance of the Auditors.

44/18 Governor Elections

- 44.1 AL provided an update on the forthcoming Governor elections. The election timetable has been agreed with notification of election due to be published on 16 July 2018. The posts up for election are: Staff - Nursing & Midwifery (1 seat); Southampton City (2 seats); New Forest, Eastleigh and Test Valley (1 seat); and, Rest of England and Wales (1 seat). EA noted that no governor drop-in sessions will be held this year and that election awareness will be tied in with other recruitment activities.
- 44.2 TH sought clarification of the cost of the governor elections. AL confirmed that the cost was similar to the previous year.
- 44.3 The Council of Governors **NOTED** the update on Governor Elections.

45/18 Update from Governors' Nomination Committee

- 45.1 PH provided an update on the Non-Executive Director (NED) recruitment process. Three candidates were interviewed and one was identified as the preferred candidate. However, the individual opted not to take up the role after it was offered and a decision was made not to appoint either of the other two candidates.
- 45.2 RPe queried whether the difficulty in recruiting a new NED was a reflection on the service provided by the recruitment agency. PH said that the service provided had been good. Other consultancies are however currently being approached as part of a periodic reselection process.
- 45.3 The Council of Governors **NOTED** the update from the Governors' Nomination Committee.

46/18 Non-Executive Director Extension

- 46.1 PH requested agreement from the Governors on an extension of tenure of up to 12 months for SP following the inability to recruit a suitable replacement.
- 46.2 The Council of Governors **APPROVED** the proposed extension of tenure for SP.

47/18 Feedback from Working Groups and Events

- 47.1 **Engagement Events**
There has been one members evening since May and a series of events have been held locally for NHS 70. Membership information was available at the events held at West Quay and Winchester Cathedral.
- 47.2 **NHS Providers Events**
There have been no NHS Providers events since the last Council of Governors meeting.
- 47.3 **Patient Experience Sub-Group**
TH noted that the group met in April, where the quality report and feedback on PLACE were discussed. Feedback on proposed areas of focus for the group has been requested from governors; however, responses have been minimal. The next meeting will be arranged for the Autumn.
- 47.4 **Strategy & Finance Sub-Group**
MC updated the group on the last meeting, which included an informative presentation on the Trust's finances. Two more meetings have been scheduled, with the next meeting focussing on subsidiary organisations.

47.5 **Staff Experience Sub-Group**

EB noted that there have been difficulties in arranging meetings and ensuring attendance when meetings are scheduled. An engagement plan is being developed which will include scheduled visits to meet with staff in order to increase visibility and awareness.

47.6 **Membership Engagement and Development Sub-Group**

EA noted that the group have met twice since the last Council of Governors, with the most recent meeting in June. The membership and engagement strategy was reviewed and the group is working on ways to raise awareness.

47.7 The Council of Governors **NOTED** the Feedback from Working Groups and Events.

48/18 **Membership Engagement**

48.1 EA summarised the report, highlighting the following:

- The next member's evening was scheduled for 16 July 2018.
- The Membership Engagement Sub-Group was working on engaging with external groups in the Southampton City area.
- A communications plan for the upcoming Governor elections has been developed.

48.2 PH sought further detail on engagement with external groups. EA noted that there has been communication with the local Muslim Council and Jewish Council, and that the Trust has signed up for 'Fresh Affairs' in conjunction with Southampton City CCG in order to increase awareness among university students.

48.3 EA noted that the Membership Engagement Sub-Group had queried the availability of funds for membership activities. PH confirmed that a budget was set 12 months ago but had not been spent. AL added that the group had been asked to outline the desired activities in order that funds could be allocated appropriately. PH emphasised the importance of progressing recruitment and engagement activities.

48.4 The Council of Governor **NOTED** the Membership Engagement update.

49/18 **Any Other Business**

49.1 MC informed the Governors of the new nursing recruitment video from University of Southampton, which will be used as an advertisement on YouTube.

49.2 MJ praised the Annual Report and requested clarification of its distribution. AL confirmed that the report is available in PDF and is disseminated to key stakeholders.

49.3 SB noted that Southampton City Council is currently carrying out a 'clean air zone' consultation. Details are available on the Southampton City Council website.

49.4 As the result of the recent ballot, Amanda Turner had been appointed by the Council of Governors as Deputy Lead Governor.

49.5 PH sought feedback from governors on the addition of an evening meeting and whether this should be included in next year's schedule. The governors agreed that the evening meeting is useful and asked that the schedule for next year be reviewed to possibly include two evening meetings.

50/18 Date of Next Meeting: Tuesday, 9 October 2018, 14.45 to 18.00, Conference Room, Heartbeat Education Centre, F Level, North Wing, Southampton General Hospital.

UHSFT – Council of Governors’ Actions Summary for 9 October 2018 Council of Governors’ meeting

Action & Minute Reference	By whom	Target Date	Current Status
<i>Council of Governors – 17 May 2018</i>			
30.4 <u>Matters Arising/Summary of Agreed Actions</u> Ref 21.4 Advertising Costs for NHS Jobs & Public Appointment Portal - Costs not yet determined. Information to be circulated to governors.	Steve Harris/ Amanda Lowe		To be circulated.
<i>Council of Governors – 10 July 2018</i>			
41.2 <u>Matters Arising/Summary of Agreed Actions</u> Ref 41.2 Cultural Awareness Training – A follow-up session to be arranged in the next 3 months for those who were unable to attend the first session held in May.	Amanda Lowe		To be arranged.

2 October 2018

Council of Governors' meeting 9 Oct 2018

Title	Chief Executive's Quarterly Performance Report
Authors' names & Job titles	Paula Head, Chief Executive
Purpose of the paper	For information <input checked="" type="checkbox"/> To note <input type="checkbox"/> Formal approval <input type="checkbox"/> For decision <input type="checkbox"/>
History	Regular Report
Main issues / Executive Summary	To update the Council of Governors on the Trust's performance.
Implications	N/A
Action Required	The Council of Governors are asked to note the report.
Next Steps	N/A

Council of Governors 09 October 2018

Chief Executive's Performance Report

1. Purpose

The purpose of this report is to summarise the Trust's performance against a range of key indicators. This report covers the period Jun 2018 to Aug 2018 noting that some targets are reported in arrears.

The Board has recently discussed the performance measures it considers, and the presentational format in which it considers them, and has agreed to revise several of the metrics to improve the relevance and effectiveness of the Board's oversight. Future Chief Executive's performance reports to the Council of Governors will incorporate these amendments.

2. Safety

Infection Control	Target	June 2018	July 2018	August 2018
Clostridium Difficile infection (confirmed lapse in care)	<=4	4	3	3
MRSA Bacterium infection	0	0	0	0

Safety	Target	June 2018	July 2018	August 2018
Never Events	0	0	1	0
Serious incidents requiring investigation (month in arrears)	N/A	7	2	N/A
Number of overdue SIRIs	0	1	0	N/A
Avoidable hospital acquired grade 3 and 4 pressure ulcers (month in arrears)	<=2	1	2	N/A

In August, there were three cases of Clostridium difficile which is within the accepted tolerance rate. There was an increase reduction in Grade 3 and 4 pressure ulcers in July. There were 2 SIRIs in July.

Clinical Effectiveness	Target	To Feb 2017	To Mar 2018	To Apr 2018
Hospital Standardised Mortality Ratio (HSMR) – UHS (rolling 12 month average)	<=100	94.7	88.7	90.5
Hospital Standardised Mortality Ratio (HSMR) – SGH (rolling 12 month average)	<=100	88.5	82.3	83.8

HSMR performance remains low due to continued low values from several specialties. The latest data includes 2 months' worth of data to recover the gap in the previous update.

Patient Experience

Friends and Family Test (FFT)

Indicator	Target	June 2018	July 2018	August 2018
Inpatients - Negative Score	<5%	0.84%	0.81%	1.13%
ED - Negative Score		See below*	See below*	See below*
Maternity - Negative Score		0.61%	0.00%	1.61%

*Friends and Family test results remain positive in Inpatients and Maternity. ED FFT scores were removed from the Trust Board IPR due to low response rates.

Concerns and Complaints

There is a new KPI setting out complaints per 1000 units. In July 2018 complaint performance was 0.41 for the month (against the target of <1.2, reported one month in arrears). The value has reduced significantly since last quarter's report as the metric has changed from complaints per 1000 bed days to complaints per 1000 units - this KPI now includes all complaints for all types of activity (inpatient spells, outpatient appointments, ED attendances) .

More detailed complaint data is outlined for the period June to August 2018.

Indicator	Target	June 2018	July 2018	Aug 2018
Complaints received for investigation	Trends monitored	44	46	51
Number of complex concerns		29	27	20
Number of complaints and complex concerns		73	73	71
Complaints open at end of month		8	29	49
Number of complaints closed in month		34	37	56
Trust average response time for complaints (based on resolved date)	35 days	30	33	36
Complaints returned dissatisfied	15 per quarter	10	5	6
Parliamentary and Health Service Ombudsman (PHSO) cases upheld (reported a quarter in arrears)	0	0 for Q4 (2017/18), 1 for Q1 (2018/19)		

All feedback, including concerns and complaints are welcomed by the Trust, therefore no definitive targets are set for a reduction in numbers received, however trends will be monitored. What is important is that learning and improvement occurs as a result of concerns and complaints, and that this learning is disseminated across the Trust.

The total number of complaints and complex concerns continues to increase although this is in line with increasing activity throughout the Trust. Comparative data to other similar sized trusts demonstrates a significantly lower rate of complaints per 1000 staff than other major trusts.

4. Access Performance

Emergency Access Performance		Jun 2018	Jul 2018	Aug 2018
% patients spending less than 4 hours in UHS ED's (Types 1, 2 & 3, which includes Lymington)	=>95%	93.0%	90.5%	84.7%
% patients spending less than 4 hours in ED - UHS site (Main ED, Eye Casualty & Urgent Care Hub)	≥ 90%	91.6%	88.7%	81.6%
% patients spending less than 4 hours in ED - Lymington Minor Injuries Unit	=>95%	99.8%	99.3%	99.3%
% patients spending less than 4 hours in ED - RSH Minor Injuries Unit	=>95%	99.8%	99.4%	100%
% patients spending less than 4 hours in ED - Combined system total	≥ 90.30%	94.9%	92.8%	88.7%

The national target for Emergency Access is 95% of patients treated and discharged within 4 hours. Our trajectory target for Q1 is to achieve 91.4% including all emergency attendances for our population (i.e. including the Royal South Hants Minor Injuries Unit). We achieved this target for July but were below target in August.

Referral to Treatment (RTT)	Target	June 2018	July 2018	Aug 2018
% incomplete pathways within 18 weeks in month	=>92%	87.68%	87.43%	86.90%
% of elective operations cancelled at the last minute	<=1%	* Data not available due to a change in metrics.		
Total patients in backlog (internal target)	<1200	3,915	3,991	4,186
New referrals received (month in arrears)	N/A	20,477	20,468	N/A

The Trust did not meet the 92% target for Referral-to-Treatment in August due to insufficient capacity to meet rising levels of demand. It is anticipated that the Trust will achieve 92% by the end of the calendar year. A formal recovery action plan has been requested by Commissioners. Actions to recover this position include recruitment to medical staff in a number of key specialty areas. This has to be finely balanced against a request not to increase the contract over performance.

Cancer	Target	May 2018	June 2018	July 2018
Urgent GP referrals seen in 2 weeks (month in arrears)	=>93%	83.5%	82.7%	89.3%
Breast symptomatic patients referral seen in 2 weeks (month in arrears)	=>93%	33.7%	44.3%	73.5%
Treatment started within 62 days of urgent GP referral (month in arrears)	=>85%	78.5%	67.3%	75.0%

As we are currently unable to use the IPT method for 'Treatment started within 62 days of urgent GP referral (month in arrears)', we have instead used the NHSE methodology which varies by approximately +/-1%. In July, we did not meet the targets for Urgent GP Referrals seen in 2 weeks, Breast symptomatic patient referral seen in 2 weeks and 62-day urgent GP referral to treatment. The Urgent GP referral and Breast Symptoms targets were not achieved due to insufficient breast radiology capacity. Recovery of the Treatment started within 62 days of urgent GP referral wait, is likely to be slow and significant challenges are being experienced linked to significant growth in referrals and the number of cancers treated (87 year to date).

5. Finance

Indicator	June 2018	July 2018	Aug 2018
Financial position	£2.9m surplus, £1.7m better than Plan	£2.6m surplus, £0.4m worse than Plan	£0.9m surplus, £0.5m worse than Plan
Cost improvement plans (CIPs)	£1.5m against a target of £2.5m	£2.1m against a target of £2.5m	£2.4m against a target of £2.6m
Financial Sustainability Risk Rating	1	1	1

In August 2018 the Trust delivered a control total surplus excluding PSF of £0.9m, £0.5m worse than Plan. Year to date the Trust is £0.8m worse than Plan, which is also the current miss in Q2. On top of this, the Trust has anticipated it will miss the Q2 PSF targets for A&E, which is worth £1.5m in Q2 - £1m of which has been included in the August position. CIP delivery in the month was £2.4m against a target of £2.6m, meaning a £0.2m shortfall to Plan in the month. This slow start to CIP performance (£5.1m off-Plan YTD) is a cause for concern and is partially driving the underlying run-rate position. Overall the Trust's Use of Resources score is '1' against a Plan for August 2018 of a '1'. Our forecast position is to be a '1' at the end of the financial year.

6. Human Resources

Indicator	Target	Q1	National Average
Staff FFT - % of staff likely or extremely likely to recommend UHS as a place to work	=>75.5%	80%	66%
Staff recommending UHS as a place to receive care/treatment	=>85.0%	94%	81%

The Trust continues to maintain strong performance against the Staff Friends and Family Test measure being amongst the top 20 in the country for both measures. Staff recommending UHS as a place to receive care/treatment rose again this quarter to 94%.

Indicator	Target	June 2018	July 2018	Aug 2018
Turnover – rolling 12 months (internal target)	<=12%	13.74%	13.95%	N/A
Sickness absence – rolling 12 months (internal target)	<=3.0%	3.45%	3.46%	3.45%
Nursing vacancies (internal target)	<=8%	17.81%	16.50%	17.05%

Turnover over for the rolling 12-month period has increased for the 10th month in a row. Nursing vacancies remain high. Nurse registered vacancy levels are expected to continue to rise slightly until September when the intake of newly qualified nurses (adult and child) will join the trust. Sickness absence remains near the target of <=3.0%.

UNIVERSITY HOSPITAL SOUTHAMPTON NHS FOUNDATION TRUST

- 1 Purpose** To update governors on progress reached in transferring CMH to an independent hospice (Mountbatten Isle of Wight) on 1st November 2018
- 2 Background** Countess Mountbatten Hospice (CMH) is unusual in being funded 90% by the NHS and only 10% by charitable donations. There has been an ambition for some time to develop a Hospice at Home service for which money is unavailable from NHS sources. It is felt unlikely that it will be possible to generate charitable funds for the development of such a service while Countess Mountbatten remains embedded within the NHS.

It has accordingly agreed between the Trust, the Countess Mountbatten charity and commissioners that the interests of patients would best be served by transferring CMH to the charitable sector.

3 Key Issues and specific detail

Purpose of the transfer

Secure a new partner to enable CMH services to continue to develop and provide the best possible end of life care aligned to commissioner expectations. This has been facilitated by providing Mountbatten with 'preferred provider status' via an agreed procurement exercise with our two local CCGs and CMHC.

The two step plan to independence

1. To transition the services (management and operations) to Mountbatten by 1st November 2018 under a sub-contract arrangement. CMH Charity staff will transfer to Mountbatten from 1st October 18. This sub-contract will remain in place until 31st March 2019. During this period all relevant parties will work together to ensure that CMH service is maintained. Governance for this will take place via monthly KPI meetings to ensure that the level and quality of care is maintained.
2. From 1st April 19 Mountbatten will have full responsibility for running CMH, under contract commissioned directly from local CCGs. UHS will have no further input into the management of CMH. Mountbatten and CCGs will be working together to agree a timeframe to move from a 90/10 funding split to 40/60.

Clinical Governance update

Due diligence has been undertaken to ensure that current service provision will be maintained and via monthly KPI meetings with Mountbatten UHS will have oversight of the quality and service metrics until 31st March 2019. UHS will maintain CQC registration until 31st March 2019. After this date CQC registration will sit with Mountbatten.

Charity Governance update

On the 1st October, the current CMH charity will become a subsidiary of Mountbatten Isle of Wight. Existing CMH charity staff have been employed by the subsidiary from 1st October.

It has been agreed that any monies raised on the mainland will be for CMH only. Monies raised on the IoW will be solely for their use.

Finances

It has been agreed that Mountbatten will deliver the current service within the existing budget allocation until 31st March 2019. This includes the remainder of the 18/19 UHS funding contribution. UHS will continue to provide support and ancillary services at present levels during the period to 31st March 2019.

Workforce Plan

We will be undertaking the TUPE process for all 'in scope' UHS staff to transfer from UHS to Mountbatten on 1st November. This will not include medical staff as they will remain with UHS. To achieve this the formal TUPE process will be commencing on 24th September with an anticipated 30 day consultation period.

Risks

The key risk is that during the 5 month sub-contract period either UHS or Mountbatten may decide to not proceed with a full transfer of service to a direct CCG/Mountbatten arrangement after 31st March. If this should happen UHS would expect to take back the management of CMH and re-start discussions with commissioners around the future direction of CMH and its services.

4 Next Steps / Way Forward

- Complete TUPE transfer of staff from UHS to Mountbatten by 1st November
- Sign contracts for transfer of service from UHS to Mountbatten by 1st November.
- Schedule monthly monitoring/performance meetings
- Start to deliver new services to patients at CMH, the first new service will be a bereavement service funded by the new charity
- In future years the service will deliver an enhanced Hospice at Home service and nurse led beds.

Council of Governors' meeting 9 October 2018

Title UHS Trust Membership Update

Sponsoring Executive Paula Head, Chief Executive

Authors' names & Job titles Emma Abdulaal, Communications Manager

Purpose of the paper For information To note Formal approval For decision

Main issues / Executive Summary This paper aims to update the council on Trust membership and recent and planned engagement activities.

Action Required Please review the attached UHS Trust membership update and provide feedback/comments at the CoG meeting on Tuesday, 9 October

UHS membership update

Aims of this paper

- Provide an overview of current UHS public members
- Provide a summary of membership engagement activities that have happened since July 2018 when the most recent update was provided
- To give the Council of Governors the opportunity to comment on and put forward any thoughts about future member engagement

Current members

The table below shows the current number of UHS public members broken down into constituencies.

Constituency	Number of members
Southampton City	2,966
New Forest, Eastleigh & Test Valley	3,542
Isle of Wight	797
Rest of England and Wales	1,319
Out of trust area (inc Jersey)	7
Total number of members	8,631

Please note these numbers are correct as of 2 October 2018 and deductions include those requesting to be removed as members when they received election information through the post.

Membership engagement – summary

Please see below a summary of membership engagement activities that have taken place since July 2018.

Members' evenings

We have hosted two members' evenings since July – the first focused on innovations at UHS and the second was our annual members' meeting.

Members' mail

Since July a number of member communications have been emailed out including event notifications and reminders about elections. We held back the September newsletter to October as many members would have already been receiving information from us around elections.

Membership engagement group

The group has not met since June 2018.

NHS70 events

As part of NHS70 celebrations we held numerous events over the summer both on our own and as part of the wider NHS in Hampshire network. These events included a service at Winchester Cathedral, a party outside main reception of SGH for staff and public, and a public engagement event at Westquay where we had people sign up as members.

Recruitment

Recruitment continues with social media and engagement events being used as the main points of reaching people. We have also discussed with a number of groups in the Southampton City area about coming and speaking with them. Discussions have also taken place about an open letter to the public being shared on our website inviting groups and individuals to invite us to their meetings/gatherings to talk about the hospital and role of governors.

Elections

Governor elections ran from 16 July to 25 September 2018. The successful nominees have now been notified.

Timetable and list of vacancies below:

Event	Date
Publication of Notice of Election	Monday, 16 July 2018
Deadline for Receipt of Nominations – 5pm	Wednesday, 15 August 2018
Publication of Statement of Nominations	Thursday, 16 August 2018
Deadline for Candidate Withdrawals	Monday, 20 August 2018
Notice of Poll / Issue of Ballot Packs	Friday, 31 August 2018
Close of Poll – 5pm	Tuesday, 25 September 2018
Declaration of Result	Wednesday, 26 September 2018

Constituency	Number of seats	Seats filled
Public - New Forest, Eastleigh and Test Valley	1	1
Public - Southampton City	2	1
Public – Rest of England & Wales	2	2
Staff – Nursing and Midwifery	1	1

Upcoming dates

- 20 November – next members' evening
- The members' evenings for 2019 are being confirmed this week and will be circulated to governors shortly.