

Northern Lincolnshire and Goole Hospitals 
NHS Foundation Trust

DATE	25th January 2012
REPORT FOR	Council of Governors
REPORT FROM	Dr Jim Whittingham, Chairman
CONTACT OFFICER	Sarah Everatt, Assistant Head of Governance – Membership & Assistant Trust Secretary
SUBJECT	Public Governor/Member Consultation
BACKGROUND DOCUMENT (IF ANY)	Monitor Code of Governance
EXECUTIVE COMMENT (INCLUDING KEY ISSUES OF NOTE OR, WHERE RELEVANT, CONCERN THAT THE COG NEED TO BE MADE AWARE OF)	The report proposes the establishment of a programme of regular meetings between Public Governors and Members
COUNCIL ACTION REQUIRED	Governors are asked to approve and / or comment on the proposal

Public Governor/Member Consultation

Introduction

This paper proposes the establishment of a programme of regular meetings between Public Governors and Members. The purpose of the meetings should be to enable Governors to consult with Members on issues of concern to Members or on issues on which the Council of Governors wish to consult or communicate with Members.

Background

The NHS and this Trust confront a number of unprecedented challenges which potentially threaten the future sustainability of the Trust and the services which it provides. To deal with this challenge the Trust will need to work with a range of new partners including the new Clinical Commissioning Groups whose commissioning decisions will have a fundamental influence over the configuration of acute services in Northern Lincolnshire and Goole. At the same time, the Trust's internal efficiency and quality improvement programme is likely to result in changes to the configuration of the Trust's services and hospitals. The changes which will necessarily flow from both processes will be of legitimate interest to the public and the Trust's membership.

The responsibilities of the Council of Governors include feeding back information about the NHS Foundation Trust, its vision and its performance to the constituencies that elected them and holding the Board of Directors to account (on behalf of the local community through the Membership). While the processes which are currently in place have allowed the Council to satisfactorily discharge its responsibilities it is by no means clear that they are sufficient to deal with the current challenge and as the Trust moves forward.

The Council has previously received reports about the special measures which it has been necessary to take to respond to concern from the community in Goole about the future of Goole District Hospital and the services which it provides. The meeting of the "special" Goole Forum in December agreed to reconfigure Trust-community consultation at Goole in future in line with this proposal and there was general acceptance from the Goole based Members in attendance that the proposed approach represents an appropriate way forward.

Proposal

Governors are recommended to approve the following:

1. The establishment of a programme of regular meetings between Public Governors and Members. The purpose of the meetings should be to enable Governors to consult with Members on issues of concern to Members or on issues on which the Council of Governors wish to consult or communicate with Members.
2. Meetings should be held on a hospital by hospital basis as a meeting between Public Governors elected from the constituencies which relate to that hospital and the equivalent membership (for example, at DPoWH between Public Governors elected from the NE Lincs constituency and the NE Lincs membership);

3. There should be 4 (quarterly) meetings for each hospital per year and the meetings should be published in the annual calendar of events;
4. Meetings should be attended by the Chairman and the appropriate Public Governors. Other (non Public) Governors may attend as observers. Executive and Non Executive Directors may be invited to attend to deal with specific issues and may attend as observers.
5. A process should be developed to canvas Members on issues to be included in the Agenda for each meeting and to develop and publish a response.
6. Parallel processes should be developed to enable the Council of Governors to identify issues on which the Council would like to consult or communicate with members (to be included in the Agenda) and to collect feedback from Members.
7. These processes and the Agenda and the general conduct of meetings should be designed to support and create opportunities for individual Governors to deal directly and personally with Members.
8. A communications strategy and plan should be developed and implemented to publicise the programme and to integrate with the Trust's overall communications and membership development strategies.
9. The CoG Steering Group should be asked to oversee the initial planning and implementation of the programme which should also include an interim review and report which should be at the 6 month point (i.e. after 6 meetings / 2 per hospital).

Other matters on which Governors views are sought:

1. Governors may feel that these proposed Governor/Member meetings should replace the current programme of Chair/Governor group sessions, which have not proved popular (the individual Chair/Governor one-to-one sessions to continue).
2. Governors are asked to note that the Chairman has committed the Trust to a first meeting in Goole in March 2012 subject to the Council's approval. If approved this means that the next meeting could be in April 2012 at either SGH or DPoWH.
3. It will be necessary to give some thought to both timing (day-time or evening) and venue (and possibly to "experiment" with both).

Dr J Whittingham
Chairman
January 2012