

A photograph of a middle-aged woman with short blonde hair, smiling at the camera. She is wearing a light blue hospital uniform with a dark blue collar. She is holding a piece of medical equipment with a screen. The background is a blurred clinical setting. Overlaid on the right side of the image is a large, semi-transparent blue shape that serves as a background for the text.

KGH Annual Members' Meeting NGH Annual General Meeting

Thursday 3 November 2022, 10am-12pm

Annual Members' Meeting (KGH) Annual General Meeting (NGH) 3 November 2022

No.	Item	Lead(s)	Time
1	Welcome and Overview	Alan Burns, Chair (KGH and NGH)	10:00
2	Our 2021/22 Annual Reports and Hospital Showcases	Andy Callow, Interim Group Chief Executive Deborah Needham, KGH HCEO Heidi Smoult, NGH HCEO	10:05
3	Our Financial Position	Jon Evans, Group Chief Finance Officer	11:00
4	Our Quality Reports	Directors of Nursing and Quality: Fiona Barnes (KGH), Debra Shanahan (NGH)	11:20
5	Lead Governor's Report	Professor Peter Woolliscroft, KGH Lead Governor	11:35
6	Questions and Answers	Alan Burns, Group Chair	11:45
7	Close	Alan Burns, Group Chair	12:00



Interim Group CEO update to Annual Members' Meeting Andy Callow

3 November 2022



Group Launch

- ▶ In January 2020 Kettering and Northampton hospitals announced their commitment to create a hospital group.
- ▶ Since then, on 1 July 2021 we launched our Group, the University Hospitals of Northamptonshire.
- ▶ We are delighted to have achieved University Hospital status, working in partnership with the University of Leicester and the University of Northampton. This status will enable us to strengthen our existing research and support clinical teams, ensure our staff have access to the latest training and techniques and provide patients with access to cutting edge treatment and research trials. As a result, this will improve the quality of care we are able to provide and enhance training and development opportunities for staff.

Dedicated to Excellence

These are our Group vision, mission and values. They are a direct product of the extensive engagement we have undertaken with staff, patient representatives, governors, health and care partners, and others.



OUR VISION

Dedicated to excellence in patient care and staff experience, and to becoming a leader in **clinical excellence, inclusivity and collaborative healthcare.**

OUR MISSION

Provide safe, compassionate and clinically excellent patient care by being an outstanding employer for our people, by creating opportunity and supporting innovation, and by working in partnership to improve local health and care services.

Values



► Compassion

We care about our patients and each other.

We consistently show kindness and empathy and take the time to imagine ourselves in other people's shoes.



► Accountability

We take responsibility for our decisions, our actions and our behaviours.

We do what we say we will do, when we say we will do it. We acknowledge our mistakes and we learn from them.



► Respect

We value each other, embrace diversity and make sure everyone feels included. We take the time to listen to, appreciate and understand the thoughts, beliefs and feelings of others.



► Integrity

We are consistently open, honest and trustworthy.

We can be relied upon, we stand by our values and we always strive to do the right thing.



► Courage

We dare to take on difficult challenges and try out new things.

We find the strength to speak up when it matters and we see potential failure as an opportunity to learn and improve.



Priorities and Strategies

Patient

Excellent patient experience shaped by the patient voice

Quality

Outstanding quality healthcare underpinned by continuous, patient-centred improvement and innovation

Systems and partnerships

Seamless, timely pathways for all people's health needs, together with our partners

Sustainability

A resilient and creative university hospital Group, embracing every opportunity to improve care

People

An inclusive place to work where people are empowered to be the difference

Our Strategic Initiatives



People Plan



Clinical Strategy



Nursing, Midwifery and Allied Health Professional Strategy



NHCP Integrated Care System Strategy



Strategic Estates Programme



Academic Strategy



Digital Strategy

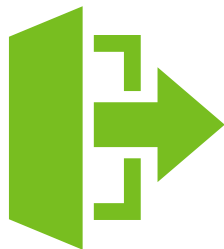


Financial Strategy

Other Key Moments from the Past Year



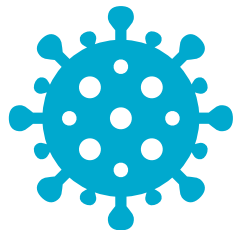
Elective
surgery
performance



National
Hospital
Discharge
Programme



Aligning our
governance



Continuing
impact of the
pandemic on
performance



Formation of the
Northamptonshire
Integrated Care
System



Our Staff



Hospital CEO KGH - A year in review

Annual Members' Meeting

Deborah Needham
3rd November 2022

Call for Concern®

Presented by Kirsty Datson

Critical Care Outreach Practitioner, AIR Team

What is Call for Concern©?

- ▶ Enables patients and/or relatives to be collaborative partners in their care
- ▶ Recognises the important role that patients and/or relatives can play in spotting the subtle signs of deterioration
- ▶ Available for any in-patient on adult wards 24/7
- ▶ Recognised and recommended in National Healthcare publications
- ▶ Pioneered by The Royal Berkshire Hospital learning from previous patient stories nationally and internationally

How does the service work?



I am concerned my mum is getting worse even though I have raised my worries with the ward team



Patient/ relative or loved one contacts Call 4 Concern service run by AIR Team by ringing dedicated C4C mobile number



Signposting

Ward visit/ review

A member of the AIR team will take the call and listen to the concerns, they may ask for further details



A member of the AIR team will update referrer on review

Impact so far..

- ▶ X 2-3 times more referrals received than expects
- ▶ Majority of referrals appropriately related to concerns around clinical condition and communication issues
- ▶ Overall positive outcomes for patient
- ▶ No calls have resulted in admission to Intensive Care thus far
- ▶ Several referrals led to interventions being instigated by our team resulting in improvement to patient clinical condition
- ▶ Majority of reviews highlight level of care already being provided being adequate and reassurance provided to referrer
- ▶ Overwhelming positive feedback from service users
- ▶ 100% found the service easy to access
- ▶ 100% extremely likely to recommend the service to others
- ▶ 100% extremely satisfied with the outcome of their call

We found the service extremely beneficial

We are so privileged to have been able to access it

Put our minds at ease

Such a valuable service to patients and relatives

Very reassuring

Without the call for concern process I would not have felt reassured that my Dad was receiving the appropriate care

For the first time of coming into hospital he knew what was going on

It helped us at a difficult time

Any Questions?

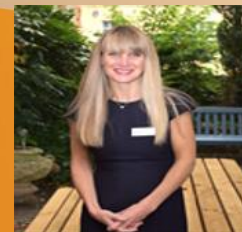


For more information use QR code above to visit the C4C webpage

Call for Concern referral line – 07974598810
Email – kgh-tr.criticalcareoutreachpractitioners@nhs.net



Hospital CEO NGH - A year in review Annual General Meeting



Robotic Surgical Service



Robotic Surgical Service

Aim

- Introduce a minimally invasive robotic assisted surgical service for the Northamptonshire University Hospital Group. Our patients are currently limited to open or laparoscopic surgery options within their local area.

Why

- Robotic surgery demand within the region significantly outweighs capacity. With minimum waits of 8-12 weeks for robotic cancer surgery.
- Robot techniques will ultimately replace both open and laparoscopic surgery

Where

- A Da Vinci Surgical Robot has been installed at Northampton General Hospital to provide robotic surgery for patients within Northamptonshire across the group.

What services

- Urology, Colorectal, Gynaecology and Head & Neck patients are being offered robotic surgery as an alternative to travelling to UHL or having laparoscopic surgery at NGH/KGH.

Patient Impact

- This transformation has delivered improvements in a range of outcomes for patients.
- Provides patients with a wider choice of treatment local to them
- Reduce waiting times

Robotic Surgical Service Benefits

Patients



Improved patient experience by providing the right procedure (robotic, open or lap) according to the patients disease and treatment required

Improve patient outcomes (faster recovery , reduced length of stay, less blood loss, quicker return to normal activities)

Timely treatment closer to Home

Staff



Ergonomically more comfortable reducing risk of injury

Increased training opportunities

Attract and retain high quality clinical staff

Link with Universities to offer robotic fellowship posts

Group



Maintain status as a Cancer Centre and support aspiration to become a Centre of Excellence

Increased Research and Development Opportunities

Support Group Strategy to become a Centre of Excellence for training clinical staff

Increase robotic surgery capacity in the East Midlands

Aligned with Group Clinical Strategy

The Deteriorating Patient Digital Task List

Northampton General Hospital

Dr Jonathan Hardwick MBBS FRCA FFICM
Intensive Care Consultant, Critical Care Outreach lead

Charlotte Hoodless (RN)
Patient Safety Improvement Manager, Patient Safety Specialist



Zero harm care

“...Mrs A’s NEWS was consistently elevated. Despite the raised NEWS score, Mrs A’s condition was not escalated.”

INSIGHT

- ▶ Real-time accessible data with a clear safety measure that is not reliant on manual audit or incident reporting

INVOLVEMENT

- ▶ Opportunity for staff to learn from what goes well and proactively respond to adverse trends

IMPROVEMENT

- ▶ Prevention of avoidable deterioration utilising an automatic safety checklist:
 - ▶ No harmful incidents attributed to failure to recognise and escalate deterioration
 - ▶ Reduction in unexpected critical care admissions
 - ▶ Reduction in preventable cardiac arrest calls
 - ▶ Improvement in hospital mortality

EARLY-STAGE PATIENT SAFETY
INNOVATION OF THE YEAR

HIGHLY COMMENDED

Northampton General Hospital Trust

The Deteriorating Patient Task List

Presented at the Patient Safety Awards on 24th October 2022



Alastair McLellan
Editor
HSJ

Our Financial Position

Annual General Meeting / Members' Meeting

Jon Evans, Group Chief Finance Officer

3rd November 2022

Year end financial performance

Income and Expenditure

- ▶ For NHS performance purposes ('adjusted financial performance' in the 2021/22 accounts):
 - **KGH** ended the 2021/22 financial year with a **deficit of £0.4m**
 - **NGH** ended the 2021/22 financial year with a **surplus of £0.4m**
 - ▶ In 2021/22, all NHS Trusts continued to work to a set of financial arrangements that:
 - Continued to provide support for post-Covid service recovery and the resumption of planned care; and
 - Recognised the ongoing challenges of Covid on clinical services, from an infection, prevention and control (IPC) and operating capacity and efficiency standpoint
- Funding was provided on a fixed allocation (block) basis rather than on a reimbursement on costs incurred, as was the case in 2020/21.
- ▶ The financial performance in 2021/22 meant that UHN met its part of the Northamptonshire ICS's requirement to deliver breakeven at system-level in-year. As required by NHS England & Improvement (NHSEI).

Audit and approval

- ▶ The Annual Accounts for financial year 2021/22 have been approved by both the KGH and NGH Audit Committees, on behalf of the Trust Board, in separate meetings on 20 June 2022.
- ▶ Both sets of Accounts received an unqualified audit opinion from Grant Thornton (external auditors).
- ▶ The following issues were flagged in the accounts:
 - ▶ Judgements made with regard to accruals (particularly annual leave), provisions and prepayments, noting significant improvements from the prior year (both KGH and NGH)
 - ▶ Accounting practices in relation to Education & Training revenue, where a suitable policy should be added (NGH)
 - ▶ Journal posting segregation and limits KGH

 Grant Thornton

The Audit Findings for Kettering General Hospital NHS Foundation Trust

Year ended 31 March 2022

June 2022



 Grant Thornton

The Audit Findings for Northampton General Hospital NHS Trust

Year ended 31 March 2022

June 2022



Auditor's Annual Report

Kettering General Hospital NHS Foundation Trust

Audit VFM Recommendations

The KGH external audit report regarding VFM arrangements **did not identify any significant weaknesses**, and some improvement recommendations were made.

- ▶ **Financial sustainability**, KGH delivered a small deficit of £0.4m in 2021/22. Delivery of the 2022/23 plan depends on identification and delivery of savings plans.
- ▶ **Governance**, various Group strategies have been developed in 2021/22, as well as formation of the Northamptonshire Integrated Care System (ICS). Concerns raised regarding staff survey results. Appropriate risk management and internal audit processes are in place.
- ▶ **Improving economy, efficiency & effectiveness**, KGH receives an Integrated Performance Report (IPR) measuring against a range of KPIs. Improvement recommendation made on adherence to procurement best practice. Adherence to Procurement procedures is improving after adoption of a Group-wide team structure, and adequate arrangements are in place to improve service delivery.



Grant Thornton found **no significant weaknesses** in:

- ▶ **Financial Sustainability**
How the Trust plans and manages its resources to ensure it can continue to deliver its services
- ▶ **Governance**
How the Trust ensures that it makes informed decisions and properly manages its risks
- ▶ **Improving economy, efficiency and effectiveness**
How the Trust uses information about its costs and performance to improve the way it manages and delivers its services

Criteria	2020/21 Auditor Judgment	2021/22 Auditor Judgment
Financial sustainability	<div></div> Significant weakness in arrangements identified and key recommendation made	<div></div> No significant weaknesses in arrangements identified, but improvement recommendation made
Governance	<div></div> No significant weaknesses in arrangements identified, but improvement recommendation made	<div></div> No significant weaknesses in arrangements identified, but improvement recommendation made
Improving economy, efficiency and effectiveness	<div></div> No significant weaknesses in arrangements identified or improvement recommendation made.	<div></div> No significant weaknesses in arrangements identified, but improvement recommendation made

Auditor's Annual Report

Northampton General Hospital NHS Trust

Audit VFM Recommendations

The NGH external audit report regarding VFM arrangements **did not identify any significant weaknesses**, and some improvement recommendations were made.

- ▶ **Financial sustainability**, NGH delivered a small surplus of £0.4m in 2021/22. Delivery of the 2022/23 plan depends on identification and delivery of savings plans.
- ▶ **Governance**, various Group strategies have been developed in 2021/22, as well as formation of the Northamptonshire Integrated Care System (ICS). Concerns raised regarding staff survey results. Appropriate risk management and internal audit processes are in place.
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Grant Thornton found **no significant weaknesses** in:

- ▶ **Financial Sustainability**
How the Trust plans and manages its resources to ensure it can continue to deliver its services
- ▶ **Governance**
How the Trust ensures that it makes informed decisions and properly manages its risks
- ▶ **Improving economy, efficiency and effectiveness**
How the Trust uses information about its costs and performance to improve the way it manages and delivers its services

Criteria	2020/21 Auditor Judgment		2021/22 Auditor Judgment	
Financial sustainability		Significant weakness in arrangements identified and key recommendation made		No significant weaknesses in arrangements identified, but improvement recommendation made
Governance		No significant weaknesses in arrangements identified, but improvement recommendation made		No significant weaknesses in arrangements identified, but improvement recommendation made
Improving economy, efficiency and effectiveness		No significant weaknesses in arrangements identified or improvement recommendation made.		No significant weaknesses in arrangements identified, minor improvement recommendations made

Value For Money

Value For Money

- ▶ The NGH & KGH National Cost Collection Index (NCCI) is based on 2020/21 data, grouped with medium sized Trusts.
- ▶ The NCCI is a measure of relative cost difference between NHS providers
 - KGH's NCCI score in 2020/21 was 101, slightly higher than the average score of 100
 - NGH's NCCI score in 2020/21 was 99, slightly lower than the average score of 100

- ▶ The KGH cost per Weighted Activity Unit (WAU)* is higher than NGH by 2% and 3% higher than peer average. The potential productivity opportunity for KGH stands at £2.9M, or 9% of actual annual cost.
- ▶ The NGH cost per Weighted Activity Unit (WAU) is in line with the peer average. The productivity opportunity for NGH stands at £3.6M, or 9% of actual annual cost.

It should be noted that 2020/21 NCCI data was significantly impacted by the Covid pandemic, both in costs incurred and clinical activity delivered.

National Cost Collection Index (NCCI)

Category	KGH			NGH		
	20/21	19/20	18/19	20/21	19/20	18/19
Organisation Wide (adjusted for MFF)	101	*	106	99	*	103
Organisation wide (unadjusted for MFF*)	99	98	103	97	91	101

* unadjusted MFF is included for comparison to 19/20 where national data collection issues prevented the publication of an MFF adjusted NCCI

	Cost per WAU (MFF adjusted)	Potential Productivity Opportunity
NGH	£3,614	£3.6m
KGH	£3,678	£2.9m

* WAU represents the cost of providing clinical activity, accounting for casemix and complexity

Capital spend

Kettering General Hospital NHS Foundation Trust

KGH saw another significant year of capital investment in 2021/22 with **total spend at £18.4m**

- ▶ Digital investments, including continuing roll out of the Electronic Patient Record (EPR) and national Targeted Investment Fund (TIF) in Pathology, Maternity and Imaging of £8.8m
- ▶ Continued investment in the development of the New Hospital Programme and enabling works of £4.0m
- ▶ Clinical equipment, including a Gamma camera, of £2.7m and investment and maintenance work on the Trust Estate, including work on two new X-ray rooms, of £4.5m

Northampton General Hospital NHS Trust

NGH also saw another significant year of capital investment in 2021/22 with **total spend at £27.4m**

- ▶ Finalisation and opening of the Critical Care Building at £6.1m (total £16.0m) and completion of emergency works of £1.1m (total £10.1m)
- ▶ Digital investments, including business as usual, End User Devices and Targeted Investment Fund in Outpatients, long term care management and Trust Care Coordination Solution, of £10.7m
- ▶ Clinical equipment, including a Surgical Robot, of £1.7m, and Histopathology scanning equipment at £1.0m



Programme	KGH		NGH	
	2021/22 £'000	2020/21 £'000	2021/22 £'000	2020/21 £'000
Covid	0	5,398	0	2,450
Electronic Patient Record IT System (EPR)	801	2,016		
Replacement of Cardiac Cath Labs 1&2		362		
ECG Department Expansion		660		
HIP 2 - New Hospital Development Programme	3,947	2,087		
Critical Care New Building			6,022	9,967
Emergency Electrical & Fire Works	485		1,123	8,990
Paediatric Emergency Department Building			45	2,883
Digital End User devices	1,362		3,000	
Targeted Investment Fund (TIF) Digital Projects	1,876		3,221	
Digital Pathology	1,456			
Surgical Robot			1,763	
Digital Histopathology Scanner			1,028	
Endoscopy Recovery Equipment				829
Gamma Camera	1,108			
Radiology Rooms	1,029			
Major Schemes	12,064	5,125	16,202	22,669
Equipment	2,022	2,787	2,089	1,771
Estates	2,481	1,054	4,591	4,954
IT Software and Hardware (Non EPR)	1,804	663	4,538	3,328
Business As Usual	6,307	4,504	11,218	10,053
Total	18,371	15,027	27,420	35,172

Financial plan for 2022/23

- ▶ 2022/23 has seen the substantial return to the planning and financial arrangements in place before the pandemic. With payment for NHS services being made by NHS commissioning bodies (Northamptonshire CCG / ICB and NHSE England Specialised Commissioning) through contracts for activity.
- ▶ There has been a removal of the majority of financial support put in place over the past two financial years to support the response to the pandemic, with a notable tightening of funding and financial controls, as well as a requirement to deliver greater levels of financial efficiency.
- ▶ There is a clear re-focus on the efficient and productive use of resources, in order to create the necessary capacity to deliver improved operational performance and reduced backlog of elective activity, whilst stepping down any costs added during the pandemic and continuing to provide necessary support for urgent care services.
 - Nationally, this includes incentive funding for delivering elective activity above pre-pandemic levels
 - Locally, this includes the delivery of significant clinical and operational change through the iCAN programme
- ▶ As has been put in place during the pandemic, this has been done in the context of Integrated Care System (ICS) based budgeting, reporting and regulatory oversight.
- ▶ The **Northamptonshire Integrated Care System (ICS) is expected to deliver a breakeven position in 2022/23, and has submitted a plan to meet this requirement.** As part of this income and expenditure plan:
 - **KGH** has planned for a **deficit of -£5.1m**
 - **NGH** has planned for a **deficit of -£1.9m**
- ▶ National planning guidance assumed that the impact of Covid and wider operational pressures would be minimal and cost inflation (in particular energy and clinical supplies) would be considerably below that now being seen. Delivery of the financial plan in light of these assumptions not holding true is currently being assessed as part of delivery of the system financial plan.

Kettering General Hospital Quality Report Northampton General Hospital Quality Account



Fiona Barnes, KGH Director of
Nursing and Quality







Debra Shanahan, NGH Director of
Nursing and Quality

What are the Quality Report and Account?







- ▶ NHS Improvement requires all **NHS Foundation Trusts (Kettering)** to produce Quality Reports
- ▶ **NHS Trusts (Northampton)** are required under the Health Act 2009 and subsequent Health and Social Care Act 2012 to produce Quality Accounts if they deliver services under an NHS Standard Contract, have staff numbers over 50 and NHS income greater than £130k per annum.
- ▶ The reports help trusts to improve public accountability for the quality of care they provide. Therefore it is important that all staff and members know what they cover.
- ▶ **Both** are mandated documents
- ▶ The **Quality Report** is laid before parliament before being made available to the public on the NHS Choices Website.
- The **Quality Account** is required to be submitted to the Secretary of State

How did Kettering General Hospital perform against the priorities it set for 2021-22?






KGH Patient Safety Priorities 2021-22

Priority		Did we achieve it?
	Reduce the numbers of our patients who fall in hospital	 YES
	Focus on the learning from incidents, rather than attributing blame	 YES
	Keep our hospital clean	 YES

KGH Patient Experience Priorities 2021-22

Priority		Did we achieve it?
	Support you to leave hospital	
	Improve the way we communicate	
	Continue to include you in planning for the hospital	

KGH Clinical Effectiveness Priorities 2021-22




Priority		Did we achieve it?
	Assess your ability to make decisions impacting on your treatment	 ALMOST
	Identify if you are frail to improve your care	 YES
National Safety Standards for Invasive Procedures (NatSSIPs)	Keep you safe when having a procedure	 YES

What are Kettering's improvement priorities for 2022-23?

Kettering Patient Safety Priorities 2022-23

To continue to reduce avoidable harm, three key priority areas were identified and selected through consultation and approved.




KGH Patient Safety Priorities 2022-23

Priority	
	Progress the implementation of the National Patient Strategy.
	Eliminate wrong site surgery.
	Extend/Develop a culture of psychological safety for staff at all levels.

KGH Patient Experience Priorities 2022-23

To continue to improve on our patient's experience, three key priority areas were identified and selected through consultation and approved.




KGH Patient Experience Priorities 2022-23

Priority	
	Embed the Strategy for Excellence in the Care of Patients with a Learning Disability and/or Autism.
	Improve the way we communicate
	Continue to include you in planning for the hospital

KGH Clinical Effectiveness Priorities 2022-23

To continue to improve on the clinical effectiveness of the services that we provide, three key priority areas were identified and selected through consultation and approved.

KGH Clinical Effectiveness Priorities 2022-23

Priority	
	Assess your ability to make decisions impacting on your treatment
	We will continue to improve and expand our learning from deaths process.
	We will continue to embed evidence-based care in line with national standards such as NICE Guidance.

Annual Members' Meeting (KGH) Annual General Meeting (NGH) 3 November 2022

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NGH: Performing against priorities

Identifying priorities for improvement over a three year period

NGH: Key Success Factors 2019/20 to 2021/22

Improve the safety culture at NGH by 10% from the baseline





Reduce the number of preventable harm events by 10% from 2018 baseline

Efficient and effective outcomes. Eliminate preventable early patient deaths by 10% from baseline




Improve patient experience of care by 15% from 2018 baseline

Improve the safety outcomes of maternal and neonatal care. Reduce the rate of still births, neonatal death and brain injuries occurring by 20% from 2019/20 baseline by 2020/21




Safety Culture

Success Factors, Metrics and Position		Achieve
Number of incidents reported	Staff are encouraged to report issues via Datix, leading to an open and fair culture without fear of reprisal	
Safety Huddles	Throughout the year the Safety Huddle has continued and has been key to having an overview of the trust, in particular during the Pandemic.	
Nurse Vacancies and Staffing Establishment	In spite of the backdrop of a global pandemic, recruitment and retention has been successful at NGH during the 2021/22 period, reducing our RN vacancy rate from 13% to 7% and our Health Care Assistant (HCA) vacancy rate from 14% to 8% due to a number of initiatives	
Staff Survey	Safety Culture is now aligned to the 'we are safe and healthy' People Promise element.	





Preventable Harm

Success Factors, Metrics and Position		
VTE risk assessment	Significant progress has been made in clearing the back log of RCAs	
Pressure Ulcers	Within expectations save for during first and second waves of Covid	
Falls	Throughout 2021-2022 falls per 1000 bed days remained below the trust target of 5.5	





Efficient and effective outcomes

Success Factors, Metrics and Position		
HSMR	As expected	
SHMI	As expected – Band 2	
Smoking and Alcohol	Engagement with long term plans	

Patient experience

Success Factors, Metrics and Position		
Cancer Experience	287 patients responded (58%). There was improvement in 3 out of the 6 questions on the National Cancer Dashboard.	
Patient Communication	Friends and Family Test	
Dementia training	Affected by Covid but restarted	
Outpatients	Individualised and central	

Maternal and Neonatal Care

Success Factors, Metrics and Position		
Reducing smoking in pregnancy	100% booking rate	
Risk assessment	Mandatory and now 100%	
Stillbirth	Aspirin at book	
Awards	Excellence in Maternity Care during a Global Pandemic Excellence in Race Matters	

Next Steps

to continue to improve quality and safety
to review and set new quality priorities

Kettering General Hospital NHS Foundation Trust Lead Governor's Report

Annual Members' Meeting (KGH) 3 November
2022



Prof Peter Woolliscroft, Lead Governor

The Trust is enjoying exciting times, it's a great time to be a Governor supporting the board and our Non-Executive colleagues.

There is a lot I could tell you about the Council of Governors; however, in this short presentation I will:

- **Explore holding the Non-Executives to Account for the performance of the Board**
- **Show how we are here to work on your behalf and to help develop stronger links between the Trust and the community**

- Currently 28 Governors on the Council of Governors comprising:
 - 15 publicly elected governors representing Kettering, Corby, Wellingborough and East and West Northants. With 3 vacancies
 - 8 staff governors representing the hospital's 4000 staff.
 - 5: (1 vacancy) stakeholder appointed governors representing Northamptonshire Healthwatch, Northamptonshire Age UK, Kettering MIND and the Local Authority.
- New seats have been created to reflect population growth and the new hospital group model. New seats represent existing constituencies and new constituencies of **West Northamptonshire and the Rest of UK.**

Amongst the Governors' duties are:

- **To hold the Non-Executive Directors to account for the performance of the Board**
- **To represent the interest of the membership and the public and develop stronger links between the Trust and the community**
- To appoint the Trust Chair and other Non-Executive Directors (NEDs)
- Decide the remuneration and allowances plus other terms and conditions of office of Chair and NEDs
- Approve any new appointment of a Chief Executive
- Appoint the Trust's Auditor
- Receive the Annual Report
- Approve significant transactions

The Governors' roles do **not** involve:

- Taking on individual concerns (Governors should direct the matter to the relevant person in the Trust to address).
- Making operational decisions or deal with complaints
- Directing or managing staff
- Representing their own personal interests
- Getting any favourable treatment or care
- Acting as an advocate for individual constituents (but can signpost to sources of support and guidance etc)

- Council of Governor meetings
- Membership of the Governor Overview Group
- Governor Appointment and Remuneration Group
- Board and Council Meetings
- Lead Governor appointment
- Abidance by the Trust's Code of Conduct
- Confidentiality
- Welcome and support fellow Governors
- **Be keen to develop stronger links between the Trust and the community**
- **Ability to communicate the needs of the community above personal preference**
- **Be keen to understand and be able to champion the needs of the local community**
- **Actively listen and value the contributions of different people**

Our main opportunity to do this is:

- Board Committee meeting observation and Council of Governor Meetings
- Governors observe three committees supporting the Trust board (finance, quality, audit)
- Governors observe three “Committees in Common” with Northampton General Hospital (people, digital, strategic development)
- At present these are still mostly virtual and take around 2 hrs each time but involve pre reading of committee papers

Last year Kettering Governors bid successfully to present a Showcase to NHS Providers National virtual Conference. This was based on our partnership with the local newspaper The Evening Telegraph who printed our series of articles describing the changes in healthcare in our county.

One of the changes we reported on was the creation of the Integrated System of Care (ICS)

To explore further the ICS we joined forces with governors from Northampton Healthcare Foundation Trust. We held two workshops at which leaders of the ICS presented to us. This proved to be of great benefit and worthy of sharing. So, we bid again to present a Showcase to NHS Providers National virtual Conference and were selected to present again!

NHS Providers felt our submission demonstrated well how two sets of governors could work together on a matter of mutual interest

<https://www.youtube.com/watch?v=B0DojSkmgd4>

Governors' Communication Group

Last year at this meeting I announced the Governor communication group had been established, I am delighted to tell you it is going well and we are engaging with a range of guests to explore communication avenues that help us better get information to members.

Governors' Green Group

The Trust is committed to reduce its carbon footprint in accordance with the government guidance. To compliment this work governors have established a 'green group' focusing on more practical ways of energy saving and general good practice to help members and staff in their quest to improve their carbon footprint and make financial savings.

We will publish these suggestions and tips in the newsletter and eventually by posting on noticeboards etc.

Governors are elected to represent you the members, we act as a conduit between you and your hospital Trust offering you a wonderful opportunity to give us your feedback on your experiences with the hospital

Please take advantage of the opportunity this offers, make contact with the governor of your choice.

A full list of governors are set out on the hospital website together with contact details

Thank you for listening

Annual Members' Meeting (KGH) Annual General Meeting (NGH) 3 November 2022

No.	Item	Lead(s)	Time
1	Welcome and Overview	Alan Burns, Chair (KGH and NGH)	10:00
2	Our 2021/22 Annual Reports and Hospital Showcases	Andy Callow, Interim Group Chief Executive Deborah Needham, KGH HCEO Heidi Smoult, NGH HCEO	10:05
3	Our Financial Position	Jon Evans, Group Chief Finance Officer	11:00
4	Our Quality Reports	Directors of Nursing and Quality: Fiona Barnes (KGH), Debra Shanahan (NGH)	11:20
5	Lead Governor's Report	Professor Peter Woolliscroft, KGH Lead Governor	11:35
6	Questions and Answers	Alan Burns, Group Chair	11:45
7	Close	Alan Burns, Group Chair	12:00