

## Council of Governors

Minutes of the 60<sup>th</sup> Meeting of Sheffield Health and Social Care NHS Foundation Trust's Council of Governors held on Thursday, 31 October 2019 from 2.45pm to 4.45pm in the Circle, Voluntary Action Sheffield, Rockingham Lane, S1 4FW

### Present:

Name	Governor Constituency	Name	Governor Constituency
Cllr Steve Ayris	Appointed (SCC)	Angela Barney	Public South West
Jayne Brown OBE	Trust Chair	Adam Butcher	Service User
Tyrone Colley	Service User	Fay Colphon	Appointed (SACMHA)
Billie Critchlow	Carer	Julian Davis	Staff (Nursing)
Mark Goodwin	Staff (Social Work)	Nick Hall	Service User
Steve Hible	Public North East	Sue Highton	Appointed (Staffside)
Cllr Adam Hurst	Appointed (SCC)	Ahmed Ibrahim	Public North East
Toby Morgan	Service User/Lead	Cllr Josie Paszek	Appointed (SCC)
Julian Payne	Service User	Charlotte Porter	Public South West
Terry Proudfoot	Service User	Dr Abdul Rob	Appointed (PMC)
Sue Roe	Carer	Adam Rodgers	Staff (Clinical Support)
Antony Sharp	Staff (Support Work)	Kate Steele	Service User
Bradley Wass	Staff (Central Support)	Prof Scott Weich	Appointed (UoS)
Maggie Young	Staff (AHP)		

### In attendance:

Name	Designation	Name	Designation
Clive Clarke	Interim Chief Executive	Dr Helen Crimlisk	Deputy Medical Director
Sarah Ehrlich	Member of Public	Rita Evans	Director of Organisational Development
Sandie Keene CBE	Non-Executive Director	Liz Lightbown	Executive Director, Nursing & Professions
Richard Mills	Non-Executive Director	Brenda Russell	P.A.
Margaret Saunders	Director of Corporate Governance	Heather Smith	Non-Executive Director
Sam Stoddart	Deputy Board Secretary	Ann Stanley	Non-Executive Director
Jo Yardley	Senior Employment Specialist		

**Apologies:**

Name	Designation	Name	Designation
James Barlow	Appointed Governor (Carers Centre)	Cllr Olivia Blake	Non-Executive Director
Lee Coxon	Service User Governor	Phillip Easthope	Executive Director of Finance
Mark Gamsu	Appointed Governor (CCG)	Jonathan Hall	Service User Governor
Sylvia Hartley	Public Governor (NW)	Dr Mike Hunter	Executive Medical Director
Jules Jones	Public Governor (SE)	Varrisa Russell-White	Carer Governor
Margaret Spencer	Public Governor (NW)	Professor Brendan Stone	Associate Non-Executive Director
Janet Sullivan	Appointed Governor (MENCAP)	Joan Toy	Service User Governor
Dean Wilson	HR Director		

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CoG 60/01	<p><b>Welcome and Apologies</b></p> <p>The Chair welcomed everyone including all new governors. Apologies were noted. The Chair highlighted the new style agenda which reflected the points raised by governors at the development session in July. She asked governors to provide feedback on how effective they felt the agenda was as the aim was to continue its development.</p> <p>The Chair informed CoG that Cllr Olivia Blake had taken a leave of absence from her role as a Non-Executive Director as she was standing as a labour candidate in the general election.</p>	All to note
CoG 60/02	<p><b>Declarations of Interest</b></p> <p>None made.</p>	
CoG 60/03	<p><b>Minutes of the Meeting held on 25 July 2019</b></p> <p>These were accepted as a true record.</p> <p>Cllr Steve Ayris asked if the workforce challenges cited on page 7 could be subject to a future presentation. The Chair confirmed it was already on the CoG bring forward and would be scheduled for 2020.</p>	Accepted
CoG 60/04	<p><b>Action Log and Matters Arising</b></p> <p>Note was made of the outstanding action for Mark Gamsu. As he had given his apologies for the meeting, Sam Stoddart agreed to pursue him for a response.</p>	M Gamsu
CoG 60/05	<p><b>Chair's Report</b></p> <p>The Chair briefed CoG on her activities since the last meeting.</p>	

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	<ul style="list-style-type: none"> <li data-bbox="336 208 1238 349">• Annual Members Meeting 24 September 2019: the Chair thanked all those who attended and stated the opportunity had been taken at the event to acknowledge Kevan Taylor's contribution and present him with a gift.</li> <li data-bbox="336 394 1238 573">• Toby Morgan was elected as Interim Lead Governor in July until December 2019. Therefore, the item will be brought back to the December meeting where a vote will be taken. In the meantime, Sam Stoddart will write to all eligible governors inviting them to stand.</li> <li data-bbox="336 618 1238 831">• Sheffield MENCAP – The Chair had recently visited this service and highlighted the fantastic service it provides across the city pointing out the input and value brought by the voluntary sector. She thanked Janet Sullivan, appointed governor, who hosted her visit and it acted as a reminder of how valuable the voluntary sector is and how it adds value.</li> </ul> <p data-bbox="336 875 1238 1043">Jayne provided an update on the Chief Executive appointment and the process adopted, explaining that whilst it was initially hoped the process would be complete by the end of October, this had not been possible and would now be completed on 15 November.</p> <p data-bbox="336 1088 1238 1301">She informed governors there were four candidates; one internal and three external. When asked about the diversity of the candidates, she responded that a number of applicants had declared protected characteristics. Of the four shortlisted candidates, three were women and one male and one was from the BME community.</p> <p data-bbox="336 1346 1238 1715">An invitation had been sent to all governors to attend the candidate presentations on Thursday 14<sup>th</sup> November in the Mayfield Suite. At the same time as the presentation, three panels would be taking place: one for stakeholders, one for board members and the other for governor and service user members on which Nomination &amp; Remuneration Committee members would sit (these governors would not be attending the presentation). The chair informed CoG of the composition of the final interview panel on which Toby Morgan would sit as lead governor.</p> <p data-bbox="336 1760 1238 1928">The Chair stated the intent was to make the process as inclusive as possible with staff also being invited to attend the presentations. However, because of a limit on numbers, she urged governors to confirm their attendance, as their place could be offered to staff if they could not attend.</p> <p data-bbox="336 1973 1238 2074">The Chair also confirmed that it was a statutory responsibility of CoG to approve the Chief Executive's appointment, explaining approval could only be withheld on the basis of</p>	<p data-bbox="1302 315 1445 349">All to note</p>

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	<p>process not being followed. She gave assurance that if the panel feel none of the candidates are the best fit for the organisation, then an appointment will not be made; however, she was confident, based on the calibre of the applicants, this would not be the case.</p> <p>The Chair then stated that as CoG was not due to meet again until 12 December 2019 she would like to recommend an extraordinary meeting soon after the interviews in order to present the Trust's recommendation. This was agreed by CoG.</p> <p><b>Post meeting note: date confirmed of Tuesday 19 November 2019 at 2pm in the Mayfield Suite.</b></p>	<p>Agreed</p> <p>All to note</p>
CoG 60/06	<p><b>Chief Executive's Report</b> Clive Clarke, Interim Chief Executive, presented his first formal report to the meeting.</p> <p><b>a) Mental Health Transformational Bids</b> Clive confirmed the Trust had been successful in relation to the serious mental illness bid working in primary care networks. This worth £5m over the next two years. Sheffield has been selected as one of 12 national implementer sites for the development of a new approach to community and primary care mental health. With its partner, Primary Care Sheffield, the Trust wants to create a multidisciplinary service aligned with primary care networks; this was a key feature of the NHS Long Term Plan and Mental Health Implementation plan. The programme is about the system coming together for the benefit of our population.</p> <p>The second successful is a bid for an extended crisis services. The Trust submitted a bid for £1.3m but was awarded £500k. The Trust is going to use the funding to increase its crisis response capacity and make its services available outside of usual office hours.</p> <p>The third recently confirmed bid is £500K for the Community Forensic bid. This is part of our new models of care.</p> <p><b>b) Tenders</b> The trust has submitted bids to its commissioners at the local authority for its substance misuse service (START). The trust would like to continue to provide the opiates, non-opiates and alcohol services in the city for the next five years and submitted an excellent bid which included also criminal justice elements.</p>	

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	<p>The trust's Gender Identity Team has submitted a bid to NHS England to continue running their service for the next five years.</p> <p><b>c) Internal</b> Clive updated CoG on the collective dispute that has been running with Unison and staff members from recovery teams in the north and south of the city and the SPA team. He confirmed that having listened to staff the trust has invested £700k into the recovery teams and SPA; in addition, £1.4 million has been invested into inpatient services.</p> <p><b>d) Listening into Action (LiA) Journey</b> One of the Trust's responses to the staff survey was engaging LiA, the aim of which is to improve engagement with staff. Since the Spring the Trust has been working tirelessly to listen to its teams and empower them to make changes that will improve their working lives.</p> <p>The Chair asked about the collective dispute and the ballot taking place. Clive responded that 6 areas had been identified following discussions with staffside. Five of the areas have been progressed significantly.</p> <p>One area related to caseload size, which it has been agreed will be set at no more than 35 cases per person which is a Nationally recognised figure – work is continuing to achieve this.</p> <p>Another area related to SPA: the Trust is asking for two assessments per day and wanted the centre to close at 8pm. Staff thought 2 assessments was excessive and wanted the centre to close at 6pm. However, at the moment the Trust believes both elements are reasonable and so there is no change to the model for the time being.</p> <p>A review of admin support has taken place with the Trust increased admin capacity in both SPA and the recovery team.</p> <p>In addition, there was an agreement to undertake two reviews of the CMHTs and their reconfiguration. The first reviewed HR procedures and whether they were followed during the reconfiguration. The trust engaged an independent external consultant called Dean Royles, an experienced HR Director. The report identified all processes had been followed, but the report recommended the trust should develop a new change management process. The recommendations were accepted in full and two colleagues, one from HR and the other from UNISON, have been working together on developing a new change management policy.</p>	

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	<p>The second review is being undertaken by SCHaRR and is looking at the qualitative nature of CMHTs. The trust had identified the issues prior to reconfiguration and made clear where it wanted to be. The review should identify what the trust will need to do to ensure it achieves the aims of the reconfiguration and to ensure the service is where it was intended to be. The review will gather the views and experiences of service users, but it must do the same for staff too. Once the report has been received, there will be discussions about the recommendations and how to move forward.</p> <p>The Chair queried what would happen if the report comes back with a number of recommendations and whether the Trust will be prepared to change. Clive confirmed this but stated that until the report is received the implications are not known. He added, that it may be recommendations made may not be able to be carried out all at once and there may be resource implications.</p> <p>Professor Scott Weich stated it would not be an independent report because he himself, Billie Critchlow and others were involved in delivery and the steering group. He explained it is a quality improvement exercise and is about understanding the model and its implementation and where there may be fault lines or where expectations haven't been met. He stated a challenge has been an inability to secure enough participation from front line staff and queried the reason for this.</p> <p>Adam Rodgers said that in his opinion people are fearful of being honest. Sue Highton said the feedback she has had from front line staff is that for the past 18 months they have been consistently telling the Trust how they feel and no longer wish to go over it again.</p> <p>Angela Barney said it was good to hear about new funding for forensics in the community. However, she thinks Sheffield has a lot of people that have been mentally ill in prison and do not have back up when come back to Sheffield and felt the new money allocated was very small.</p> <p>Clive responded that the Trust will advocate for more resources and clarified that when the Trust makes bids, they are based on need, but funds allocated do not always reflect need. He also confirmed that the Trust was interviewing for a Programme Manager and a Clinical Lead to look at new models of care for low secure and forensic services.</p> <p>Toby Morgan asked about the Trust's values and the importance of dealing with issues within the boundaries of the values, and not to target individuals. Clive agreed wholeheartedly with Toby adding that all communications and</p>	

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	discussions should be respectful and should be compassionate.	
CoG 60/07	<p><b>Quality Assurance Committee Report</b></p> <p>This item was presented by Sandie Keene, Chair of the Quality Assurance Committee. She outlined the purpose of the committee and detailed its functions. She explained that unlike other board committees, it met each month as its remit covering quality and safety was large. She explained how the committee gained its assurance and then detailed some of the key topics brought before it over the past three months. These included:</p> <ul style="list-style-type: none"> <li>• Structured Judgement Reviews (SJR) Deep Dive - these are carried out when there may have been a death or serious incident of someone whilst in the care of the Trust. It is a formalised process which analyses what happened, the care provided and its quality and whether anything needs to be changed or lessons learned. The report gave the committee assurance that when such incidents take place there is a robust process of review and learning that follows.</li> </ul> <p>Angela Barney queried how or whether learning from deep dives is transferred to other areas within the Trust. Sandie confirmed that this. Liz Lightbown informed the meeting that Andrea Wilson, Director of Quality has established a new learning lessons forum for staff to attend following patient safety incidents or when care has fallen below expected standards. There is also an Improvement Forum which meets monthly which focuses on a particular aspect of care or practice.</p> <ul style="list-style-type: none"> <li>• Evaluation of the Reconfiguration of CMHT – the trust has put in several different mechanisms for learning from this. Scott Weich has reported to QAC on the comprehensive review he is leading on behalf of SCHaRR. The committee has commissioned a report to bring together all the different elements of learning to check that there is nothing else that needs to be done or anything is falling through gaps.</li> <li>• Serious Incident Investigation into Complaints Handling – there had been an issue with a backlog and assurance has been given on progress made, however, there is still some work to do in terms of backlogs and timescales and our contract with the CCG.</li> <li>• Litigation Annual Report – the committee were not assured by the report because it is felt the trust has more to develop in terms of how it learns from incidents and how it can put things in place from a preventative perspective.</li> </ul>	

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	<ul style="list-style-type: none"> <li>• Board Assurance Framework and Corporate Risk Register – these identify critical issues and risk and both are regularly scrutinised by EDG, the board and board committees.</li> <li>• Service User Experience – this is a subject on the committee’s radar as it knows the trust doesn’t get sufficient granular feedback from people who use its services and we want to ensure all we do is informed by peoples’ experiences.</li> <li>• Quality Objectives</li> <li>• Terms of Reference</li> <li>• CQUINS (Commissioning for Quality and Innovation) which is akin to performance related pay for certain targets including flu vaccinations, IAPT services, alcohol and tobacco and mental health data quality. Sandie explained the Trust gets 20% of its CQUIN payment for achieving 80% of its workforce having a flu vaccination. It doesn’t receive any payment for under 60% and the trust has never reached 60% so it is trying to think about how best to encourage its staff to have the flu jab. There was discussion about the ways in which staff can receive the flu jab.</li> <li>• Research and Innovation</li> <li>• Eliminating mixed sex accommodation – the trust’s doesn’t technically meet the CQC’s criteria but they understand that the Acute Care Modernisation will result in full compliance <ul style="list-style-type: none"> <li>▪ Clinical Effectiveness Group</li> <li>▪ CQC Action plan – concerns have been raised to the board about the implementation of some of the actions</li> </ul> </li> </ul> <p>She then highlighted the significant issues raised with the Board. These included:</p> <ul style="list-style-type: none"> <li>• Monitoring Mental Health Act Implementation (recording people of their rights on admission) – whilst the committee is assured of the position, we are not implementing all requirements</li> <li>• Complaints – a full action plan in place approved by the CCG</li> <li>• CQC Action plan (updating policies, IMST and Estates –</li> </ul>	

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	<p>thorny issues about what is done and when)</p> <ul style="list-style-type: none"> <li>• Flu Vaccinations</li> <li>• Litigation Annual Report</li> <li>• Acute Care and Community Data – the committee realises there is very little information about community services so it has asked for more detailed information and has asked the executive to identify information already at hand that can be reported to the committee. There is also a desire to interrogate all data in order to be clear about trends etc.</li> <li>• Staff Survey</li> <li>• Service User Representation on the committee</li> <li>• Physical Health monitoring</li> </ul> <p>Council was then invited to ask questions.</p> <p>Cllr Steve Ayris asked if the Council could receive the final report from the CMHT reconfiguration review. It was confirmed that the intention was that it would be a public document and therefore it would be shared with Council.</p> <p>Terry Proudfoot asked how the committee is seeking assurance the Trust is taking steps to learn effectively from litigation. Sandie responded that the Committee would expect the Trust to look at the key issues and thematic then identify how to prevent them or learn from them. She also confirmed the Trust has more litigation than some other comparable Trusts.</p> <p>Adam Butcher enquired about the Learning Disabilities Mortality Review (LeDeR) Programme and if there are any lessons learned from that. Sandie explained the LeDer process takes a long time for reports to be completed. To date, two reports have been received but neither with significant issues.</p> <p>Cllr Adam Hurst queried whether the Trust records the changes made as a result of a complaint and whether the Trust reviews trends and types of complaints. Sandie confirmed that the Trust is now looking at the types, trends and categories of complaints, but this is not something it had done in the past and therefore the data collated so far is limited.</p> <p>Professor Scott Weich said he valued the report from QAC and it helped governors to understand how the assurance processes work throughout the organisation, but given the committee's remit covered some of the most important areas in the Trust, was its responsibility too big. Sandie acknowledged this, but said unlike the other committees, it met more frequently, with 11 meetings taking place over the past year. She added that that 3 NEDs sat on the committee: herself, Heather Smith and Richard Mills each of whom looks at</p>	

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	<p>different aspects of the committee. There is also good representative in the community from a number of teams including quality assurance and clinical operations.</p> <p>The Chair apologised for not introducing Heather Smith, a newly appointed NED attending her first meeting.</p>	
CoG 60/08	<p><b>Finance, Information &amp; Performance Committee Report</b> As Chair of this Committee, Richard Mills presented a brief overview of key items discussed. These included:</p> <ul style="list-style-type: none"> <li>• Assurance received regarding trust’s financial performance</li> <li>• Review of trust’s procurement strategy</li> <li>• Next year’s financial plan</li> <li>• New investments</li> <li>• The need to look at vacancies and how to manage it going forward</li> <li>• Business case agreed for a nurse call system which will bridge the gaps that CQC identified on the wards</li> <li>• Update on the Estate Strategy – asked for work to expedited on community hubs</li> </ul> <p>Terry Proudfoot asked about an item raised by Richard at the Quality Assurance Committee in relation to the Health and Safety Report. He had said the health and safety report was not assuring and she questioned in what way. Richard said that the Workforce Committee had not been assured, where executive responsibility lies, that areas of health and safety were in need of improvement. Ann Stanley added that following a visit from the Health &amp; Safety Executive, certain estate issues were picked up that needed attention. Immediately the committee challenged EDG requesting regular updates. Health and safety from a workforce perspective were taken to the Workforce Committee, but quality issues were taken to the Quality Assurance Committee.</p> <p>Clive Clarke explained that one issue was environmental risk assessment and the appropriate health and safety training for appropriate grades of staff. A paper is going to the next Workforce Committee which will start the assurance process back to the Workforce Committee and on to the board.</p> <p>Adam Butcher asked if any of the health and safety issues would be taken to the service user safety group. Ann Stanley said yes as well as being taken to the committees.</p> <p>Maggie Young asked if it would be possible to have a report at the next meeting regarding the backlog of estate issues.</p>	<p style="text-align: right;">Phil Easthope</p>

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CoG 60/09	<p><b>(a) Trust's Strategic Review</b>            Sam Stoddart reminded governors that the Trust was going through a process of reviewing and revising its strategic direction and objectives, and governors were invited to a session scheduled for Monday 11 November from 10.30am to 12.30pm in the Mayfield Suite to input into the process. She asked for any governors to let her know as soon as possible if they would be attending.</p> <p><b>(b) Appointment of Trust's External Auditors</b>            Ann Stanley, Chair of the Audit &amp; Risk Committee, updated governors on the process to appoint the Trust's external auditors referring to the associated paper. She confirmed the task is a statutory governor duty, which is undertaken by the Audit &amp; Risk Committee supported by finance and procurement colleagues. Jules Jones, Adam Butcher and Terry Proudfoot had agreed to participate on behalf of the Council and they would bring back to the Council their recommended company for CoG's approval.</p>	<p>All to note</p> <p>All to note</p>
CoG 60/10	<p><b>(a) Governor Feedback from activities</b>            The Chair thanked Sue Roe for her report. No questions were asked and the report was received.</p> <p><b>(b) Governor Questions to Board</b>            These were received by CoG.</p> <p><b>(c) Performance Overview Group minutes</b>            These were received and noted as draft minutes of the last meeting.</p> <p><b>(d) Performance Dashboard</b>            The Dashboard was received by Council, not that discussion would take place at the next Performance Overview Group meeting.</p>	<p>Received</p> <p>Received</p> <p>Received</p> <p>Received</p>
CoG 60/11	<p><b>Individual Employment Place and Support: Presentation</b>            Jo Yardley, Senior Employment Specialist introduced herself to the group. She stated the programme is a Public Health England trial to determine if intensive employment support throughout drug and/or alcohol treatment can lead to a more successful recovery. Individual Placement Support (IPS) is an intensive form of employment support and is provided by employment specialists working within the drug and alcohol treatment services from Sheffield Treatment and Recovery Team (START).</p> <p>The trial started in May 2018 and the last enrolments were September 2019 with the trial finishing in September 2020. It is a randomised control trial that is open to all 18-65 year olds eligible to work in the UK and who have been in substance</p>	

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	<p>misuse treatment for a minimum of 14 days and are in receipt of a state benefit.</p> <p>It is an open access trial which means patients can self-refer, as well as doctors, nurses, drug workers and PSI workers.</p> <p>IPS aim to get people into paid employment. At the moment there have been 41 persons who have gained paid employment.</p> <p>Sheffield is one of seven IPS sites and after six months had a rating of 107 out of 125 following a fidelity review.</p> <p>Jo then went on to describe three examples of successful case studies.</p> <p>Adam Butcher questioned how jobs are sought for patients and what happens after the 9 months of support offered by the programme ends. Jo said IPS has several means of finding jobs. At the end of the nine months support period, people are given a support pack which signposts them to other support available in the city.</p> <p>Cllr Steve Ayris asked if there was funding attached to the trial and if so from whom. He also questioned whether employers are offered incentives for employment. Jo confirmed that the trial is Public Health England funded until September 2020 and there are no incentives for employers.</p> <p>Angela Barney questioned whether there were any issues around the benefit system for patients. Jo stated that IPS works very closely with Job Centres, etc., in Sheffield to ensure people are no worse off or lose benefits they may still be entitled to.</p> <p>The Chair thanked Jo for her presentation on behalf of Council.</p>	
CoG 60/12	<p><b>Any Other Business</b></p> <p><b>(a) Council Development</b></p> <p>Rita Evans, Director of Organisation Development presented her paper to CoG which detailed the background to the proposal along with the proposal itself.</p> <p>Professor Scott Weich stated there had been some unhappiness with the wording used in the paper which he had objected to and did not believe had been acknowledged, and asked if any lessons had been learnt as a result of the comments from some governors. Rita responded that that nothing had been taken out of the paper, which had been clearly described as draft, but items</p>	

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	<p>had been added as a result of feedback. She said it had not been intentional to cause any offence and reiterated the point of sharing the draft paper was to gather comments and amend it accordingly before presenting it to CoG.</p> <p>Billie Critchlow asked whether Rita has received commitment from the NEDs regarding this proposal.</p> <p>The Chair responded by saying that the paper is presented to CoG and as the Chair of CoG she gives her 100 per cent commitment regarding the proposal at every stage.</p> <p>Angela Barney stated she saw this as a team building exercise for CoG and therefore what matters is how CoG challenge, how they manage responsibility and how their challenges are received and feels that this proposal will give CoG the opportunity to do this.</p> <p>The Chair responded by saying she would like to remind CoG of the Trust's values of respect, compassion, partnership, accountability, fairness and ambition, stating she would like CoG to go forward with respect. She realises this does not mean that everyone will agree, but asked if matters being dealt with in the future could be done so with respect.</p> <p>Terry Proudfoot questioned whether the trust has a relationship with any other trusts more established in how the governors provide challenge to the NEDs, and if so whether it would be possible for governors to observe the meetings. The Chair confirmed that she meets monthly with the Chairs of other Mental Health Trusts and she has suggested sitting in on each other's meetings.</p> <p>CoG then requested to vote on approving the proposal. This was passed with one abstention.</p> <p><b>(b) Chair Appraisal Process</b>  Sandie Keene, as Senior Independent Director, updated the Council of a new requirement to standardise the appraisal of Chairs for all Trusts, ensuring alignment across the sector which the Trust needs to adopt. She outlined they key points.</p> <p>Sandie then informed CoG that she had met with Sam Stoddart and Toby Morgan to discuss the way forward. Following this discussion, she would like to recommend that CoG allows the Nomination &amp; Remuneration Committee on its behalf, which is scheduled to meet on 29 November, to agree the next steps. She explained that a</p>	<p>Jayne Brown</p> <p>Approved</p>

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	<p>paper will be taken to the Committee suggesting the Trust adopt the new process but also detailing those stakeholders that will be asked to provide feedback on the Chair's performance. Upon NRC's agreement, the Chair's appraisal would then take place shortly afterwards. This was duly agreed.</p> <p><b>(c) Any other urgent business</b>  Billie Critchlow questioned whether the next meeting scheduled for 12 December 2019 should be changed as it coincided with the general election. The Chair asked governors whether they wished to amend the date, but by a show of hands the majority were in favour of it remaining as is.</p> <p>The Chair informed the meeting that this was Margaret Saunder's last meeting as she was leaving the trust today to join a trust in Barnsley and thanked her for her services over the last 3 years.</p>	<p>Agreed</p>
	<p><b>Date and time of next meeting</b>  Extraordinary meeting: Tuesday, 19 November 2019 at 2.00pm in the Mayfield Suite, at Fulwood House regarding the CEO Recruitment.</p> <p>Thursday, 12 December 2019 from 2.45 – 4.45 pm in the Conference Suite, The Circle, VAS, 33 Rockingham Lane, S1 4FW.</p>	