

Council of Governors (in Public)

Item 9.3

Subject: National Governor Conference
Date of meeting: 5th June 2018
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Presented by: Trevor Wooding, Public Governor - Merseyside

1.0 Purpose of the Conference

To explore how governors can be best equipped to support their trusts in developing quality healthcare. The conference also allowed governors to increase their understanding of key national issues facing the health service.

2.0 Background

This was the fourth year that NHS Providers organised this national conference. There were 168 elected or appointed governors registered, together with 16 representatives from NHS Providers. Dame Gill Morgan, (Chair, NHS Providers), chaired the day and made opening and closing comments. Main presenters included Chris Hopson, (Chief Executive, NHS Providers), Miriam Deaken, (Head of Strategy, NHS Providers), Suzy Brain England, (Chair, Doncaster and Bassetlaw Foundation Trust), Kim Hutchins, (Head of Development and Engagement, NHS Providers), Philippa Wiffen, (Membership Manager, Cambridge University Hospitals Foundation Trust), Pauline Mountain, (Governor, Lincolnshire Partnership Foundation Trust), Geoffrey Rivett, (former GP and NHS historian), and Siva Anandaciva, (Chief Analyst, King's Fund).

At the end of each session there was ample time for questions from delegates. Following roundtable discussions on integration and collaboration at the end of the morning session, points raised were fed back to delegates at the beginning of the afternoon session. For the second time, the conference included a showcase, where trusts had an opportunity to demonstrate the work and impact of governors. Eight trusts exhibited; these included Oxleas Foundation Trust, Doncaster and Bassetlaw Foundation Trust, Derbyshire Teaching Hospital, Northumbria Healthcare Foundation Trust, Cambridge University NHS Foundation Trust, Birmingham Community Healthcare Foundation Trust, Essex Partnership Foundation Trust and Lincolnshire Partnership Foundation Trust.

3.0 Issues Arising

3.1 Overview of Issues facing Governors

Chris Hopson provided a detailed and well-reasoned picture of the current and anticipated situations within the NHS. He stressed the importance of the political context in which the NHS is operating. Factors here included the continuing

financial constraints together with difficulty in meeting targets, the possible effects of Brexit, various regulatory issues and the unpredictable nature of government.

The recent Care Quality Commission (CQC) Statement of Care Report dealt with the pressures across the system and several examples were provided to illustrate these. Chris Hopson raised some hope for the current movement of government to produce a long-term sustainable plan for the NHS. Nevertheless, it was stressed that public satisfaction is declining and increasingly more of the population think not enough money is being spent on the NHS. Matters needing immediate action relate to vacancies, the declining international pipeline for staff and the doubt around the domestic supply of staff. At the same time there are engagement issues such as staff morale.

As a result of Sustainable Transformation Partnerships (STPs), it was shown that there is wide variation in progress being made. However, there is evidence of developing and new practices across geographic regions. There are some encouraging examples of integration across services involving hospitals, general practice doctors (GPs), the care sector and local councils. It was stressed that we should not forget that health and care are provided across lots of different footprints and we should not become locked into a system which is too narrow.

For governors to be effective, Chris Hopson considered that they should be aware of and understand all the challenges facing the NHS. He presented a series of points that may be helpful within the routine role of governors. Amongst these were:

- make sure we get challenge and support in the right balance
- engage the public in transforming health and care
- check that Board has an appropriate balance between strategic and operational procedures
- understand that institutional interests need to interact with new systems
- maintain positivity and optimism in face of new and growing challenges.

3.2 Integration and Collaboration

Miriam Deakin outlined how it is possible to move from plans to partnerships. A main difficulty to be overcome is the move from a competitive culture to one of collaboration. Providers need to understand the interplay between regulation and commissioning. She gave an example of how an integrated care partnership (ICP) had emerged from collaboration within an STP. This led to new ways of working across a wider footprint. As a final note, Miriam stressed that it is important to get to grips with what drives success.

As chair of her Trust, Suzy Brain England explained her role in integration and collaboration in South Yorkshire. All partners across the area signed up to work together; this covered over 1.5million residents. She discussed that tensions can/do exist at times between Government and local authorities.

Importantly, governors from the whole region came together to examine issues and to put ideas forward. As a result, a *Guiding Coalition* was established and governors will be represented in this forum. It appears that governors feel they are being listened to and intend to seek assurances through NEDs, rather than executives, when discussing the issue of wider collaboration within the region.

3.3 Governor Elections- Achieving the Best

Kim Hutchins outlined the obstacles to becoming a governor, one of which may be the timing of meetings in trusts. Whilst turnout in governor elections may appear to

be low it is not the only measure of quality but it does need to be seen against the increase in uncontested elections. She stressed that the public is interested in the NHS but need assurances that they can make a difference by becoming a governor.

The idea of electronic voting, particularly amongst staff, was raised by Philippa Wiffen. She said that where this had been tried, there had been an increase in the level of voting. In order to get more people involved, she thought it important to know the profile of a trust's membership. One way of getting an increase in the electorate may be to hold governor awareness sessions at different locations led by real governors.

Pauline Mountain presented a short video produced by her trust on how to make best use of governors' skills. It illustrated how to keep in touch with the trust's membership through wide publicity across the region. It also looked at the contribution young people may make to the role of governors. The possibility of work in schools was mentioned and working with youth councils as a means of recruiting governors. In discussion, it was noted that the timing of governors' meetings is not always convenient when the diversity of local populations is taken into consideration.

3.3 The NHS at 70

This session concentrated on highlights within the NHS over the last 70 years. Geoffrey Rivett looked at key developments and pointed out that the service started as an impoverished one and ever since has suffered consequences of various recessions. He explained the different approaches to health care taken by different governments. It was shown how the NHS has changed and improved as a result of changing patterns of disease, research and the introduction of technology.

How the NHS may look in the future was addressed by Siva Anandaciva. Importantly, he stressed that the NHS must get better at diagnosing ailments and that patients themselves should take a more active role. This might mean moving power from clinicians to patients to include patient-led approaches to self-care and treatment. His radical view pointed to how traditionalist cultures need to move and become more proactive. A main point he raised was that the NHS needs to see itself as a system that not only treats patients when they are ill but also as a means of preventing people getting ill in the first place.

The message for governors was that healthcare is changing and so will the understanding of quality, safety and risk. Overall, systems will become more important.

4.0 Conclusions

There was a marked difference in the showcase aspect this year. Stands were smaller and less complex. The matter of LHCH exhibiting was raised following last year's conference. However, it was decided that the effort in designing and mounting a stand did not match the benefit it would bring. Since circumstances have now changed, it may be worthwhile to reconsider our position. Much of the hard work has been removed since NHS Providers design a single poster in their house style and mount the exhibit. If this goes ahead for next year, LHCH would need to provide text, photographs and illustrations for NHS Providers to incorporate in a single poster.

This is a conference which provides update and relevant information for the benefit of governors. It is well-organised and at a venue with excellent facilities. Importantly, it allows governors a glimpse of how the NHS may look in immediate and more long-term future. It is worthy of continued support. A full report of the conference can be found at <http://www.nhsproviders.org/courses-events/annual-events/governor-focus>